2020 Exempt Org. Return prepared for:

The Wildlands Conservancy 39611 Oak Glen Road, Unit 12 Oak Glen, CA 92399

Kennedy & Kennedy, CPAs 1700 North E Street Suite 201 San Bernardino, CA 92405

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► 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

A	For th	ne 2020 calend	lar year, or tax year beginnir	ng 7/01	, 2020, an	d ending	6/3	0	, 20 2021
В	Check	if applicable:	С					D Employer ide	entification number
	A	ddress change	The Wildlands Cor	nservancy				33-067	76450
	N:	ame change	39611 Oak Glen Ro					E Telephone n	number
	In	itial return	Oak Glen, CA 9239	99				909-79	97-8507
	Fir	nal return/terminated							
	HA	mended return						G Gross receip	ots \$ 12,862,494.
	\vdash	pplication pending	F Name and address of principal office	cer: Frazier Ha	2017			group return for sub	
	Ш.,	pp.iod.com politoring	Same As C Above	riaziei na	ney		H(b) Are all s	subordinates inci attach a list. Sei	
_	Tax-	exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or	527	It "No."	attach a list. Sei	e instructions —
<u>.</u>			w.wildlandsconser		1011(=)(1)		H(c) Group e	exemption numb	er►
K		n of organization:		Association Other	L Yea	r of format	ion: 1995		of legal domicile: CA
	rt I	Summai		7133001011011 01101	1 , 50	01 1011110	1000	, the state	or regarded to the control of the co
1 0	1	Briefly descri	y be the organization's mission	or most significant act	ivities: The	Wildl	ands Co	nservan	cy's dual
		mission	is to preserve the	ne heality and h	niodiversi	ty of	the e	earth and	d to provide
Ce		programs	s so that children	n may know the	wonder ar	nd ior	of na	ture.	2 00 220120
nai		Program	, 50 51146 011114101			25			
Governance	2	Check this bo	if the organization	discontinued its operati	ions or disposed	d of more	e than 25%	of its net as	sets.
	3		ting members of the governi						
• თ	4		dependent voting members o						10
itie	5		of individuals employed in o						13
Activities &	6		of volunteers (estimate if ne						000
Ā	1		ed business revenue from Pa					-	7a 0. 7b 0.
	D	Net unrelated	d business taxable income from	om Form 990-1, Part 1, 1	me II		-	rior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1	h)				751,262	
<u>e</u>	9		rice revenue (Part VIII, line 2					,465,092	
Revenue	10	-	ncome (Part VIII, column (A)					930,179	
Re	11		e (Part VIII, column (A), line					,185,364	
	12		e - add lines 8 through 11 (r					,331,897	
	13		imilar amounts paid (Part IX					6,000	
	14		to or for members (Part IX,			, , , , , , ,			
	15		er compensation, employee					,429,675	3,607,461.
es			fundraising fees (Part IX, co				-	,	
Expenses	100								
X			sing expenses (Part IX, colu		286			F.00 000	2 060 144
	17		ses (Part IX, column (A), line					,592,382	
	18		es. Add lines 13-17 (must ed					,028,057	
	19	Revenue less	expenses. Subtract line 18	from line 12				,303,840	
s or		T-1-11-	(D==k)/ 1(== 10)					g of Current Ye	
sset 3010	20		(Part X, line 16)es (Part X, line 26)					,549,060 680,768	
Net Assets or	21								
-			fund balances. Subtract lin	e 21 from line 20			143	,868,292	2. 147,971,016.
	art II		re Block						
Und	er penali nplete. I	ties of perjury. I decli Declaration of pre	are that I have examined this return, incluparer (other than officer) is based o	iding accompanying schedules and n all information of which prep	d statements, and to the parer has any knowl	ne best of my ledge.	y knowledge an	d beliet, it is true, o	correct, and
_									
C:		Signat	ure of officer				Da	te	
	gn ere	Ema	ation Hanor				Evoci	ıtive Di	r
110	-10	Type	Azier Haney or print name and title				EXEC	ILIVE DI	<u> </u>
_			preparer's name	Preparer's signature		Date		Check X if	F PTIN
Б	الدائد		N. Kennedy	James N. Kenne	v.b.e			self-employed	P01400050
	aid				-uy			Jon Griploydd	1.01.400000
	epai					Firm's FINI >	95-6285205		
9:		Firm's add	Iress 1700 North E		Z U T				09) 886-5048
1/1-	y the	IDS discuss th	San Bernardi		ictions			i none no. 9	X Yes No

orm	1 990 (2020) The Wildlands Conservancy	33-0676450	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1			
	The Wildlands Conservancy's dual mission is to preserve the bea	uty and biodi	<u>versity</u>
	of the earth and to provide programs so that children may know	t <u>he wonder ar</u>	nd_joy_of
	nature.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	Form 990 or 990-EZ?	Ye	s X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servi-	ces? Ye	s 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 service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported.	es, as measured by extending the state of th	penses,
4;	a (Code:) (Expenses \$ 5,241,343. including grants of \$) (F	Revenue \$)
	Stewarding of parkland and wilderness preserves that are open to visitors per year for free. In working to achieve this mission established the largest nonprofit nature preserve system in Cal 21 preserves encompassing 162,000 acres of diverse mountain, valued and oceanfront landscapes. Since the Conservancy believes that pillar of preserving nature, these preserves are open to the purfor passive recreation, including camping, hiking, picnicking, For each of its preserves, the Conservancy employs a full-time staff with college degrees in biology, ecology, and related environment year these rangers work side-by-side with hundreds of volunteer of hours, restoring and maintaining these unique and important	o over 1,500, the Conservation of the Conserva	vancy has prised of , river, ss is a charge more. most . Each
4		veveriue 9	
	See Schedule 0		
	c (Code:) (Expenses \$ 203,608. including grants of \$) (Revenue \$)
	Land Conservation: Expenses incurred in land acquistion project		s more
	than 162,000 acres of land as preserves, and in aggregate has	funded acquis	tions of
	over 750,000 acres statewide. Many statewide and nationally signi-	ficant conserv	vation
	projects were given birth from the Conservancy's preserves, wh:	ich serve as	outposts
	for strategic land-based conservation and stewardship. These:	include the 1	50,000
	acre Sand to Snow National Monument, named after Wildlands Sand	d to Snow Wil	derness
	Interface Project, and the 1.6 million acre Mojave Trails Nation	onal Monument	, the 2nd
	largest in America, for which the more than 560,000 acres acquired	by the Conser	vancy
	with private funding and donated to the American people for con		
	perpetuity became the pillar in its establishment.		
4	d Other program services (Describe on Schedule O.)		`
	(Expenses \$ including grants of \$) (Revenue \$	j)
4	1e Total program service expenses ► 5,951,833.		

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes.' complete 1 X Schedule A.... 2 Χ Is the organization required to complete Schedule B, Schedule of Contributors See instructions?..... Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I..... 3 Χ 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. Χ 4 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... Χ 5 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, 6 Χ Part I...... Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D. Part II. X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 complete Schedule D, Part III..... 8 Χ 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? If 'Yes,' complete Schedule D, Part IV...... 9 Χ Χ 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule X D, Part VI..... 11 a Χ 11 b c Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII...... X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. Χ 11 d Χ e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X...... 11 e 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)? If 'Yes,' complete Schedule D, Part X Χ 111 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Χ Schedule D, Parts XI and XII. 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Χ 12b Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E...... 13 Χ 14a 14a Did the organization maintain an office, employees, or agents outside of the United States?..... 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. Χ 14b 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? If 'Yes,' complete Schedule F, Parts II and IV. Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F. Parts III and IV..... Χ 16 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..... Χ 18 Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Χ complete Schedule G, Part III 19 Χ 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H..... 20a b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?..... 20h 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......... Χ

Form 990 (2020) The Wildlands Conservancy

Part IV Checklist of Required Schedules (continued)

- of the			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? If 'Yes,' complete Schedule J.	23	X				
24	a 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 '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					
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d					
25	a 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	25 a		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		X			
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		X			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):						
	A Current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If '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	X				
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		X			
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes.' complete Schedule M	29	Х				
30	contributions? If 'Yes,' complete Schedule M	30		Х			
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? If 'Yes,' complete Schedule N, Part II.	32		X			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		X			
	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			
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	3 5a		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? If 'Yes,' complete Schedule R, Part V, line 2	36		X			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	37		Х			
38	Note: All Form 990 filers are required to complete Schedule O	38	X				
Part V Statements Regarding Other IRS Filings and Tax Compliance							
	Check if Schedule O contains a response or note to any line in this Part V.		Yes	No			
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	140			
ľ	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ala sepatia			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
BA	(gambling) winnings to prize winners?	1 o		(2020)			
DM	1	1 011	1 220	(2020)			

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

	-	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	75		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	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)?			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).			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 с		
6 a 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		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
services provided to the payor?			X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	15000	53335	9366
organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?		-	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13 a	1	
Note: See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			7,
14 a Did the organization receive any payments for indoor tanning services during the tax year?		-	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 excess parachute payment(s) during the year?	15		Х
If 'Yes,' see instructions and file Form 4720, Schedule N.	4.0		v
Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 10 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...... 1 b 10 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 X 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? Χ 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... 4 Χ Χ 5 Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ 6 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? Χ 7 a **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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... 8 a Χ b Each committee with authority to act on behalf of the governing body?..... Χ 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Χ organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q...... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No X 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a 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 X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... Χ 12 a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ to conflicts?.... 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done. See Schedule O Χ 12 c 13 Did the organization have a written whistleblower policy?..... Χ 13 14 Did the organization have a written document retention and destruction policy?..... 14 Χ 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...... 15 a **b** Other officers or key employees of the organization..... X 15h If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.... X 16 a 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?. 16 b 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 Own website X Upon request 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

Form 990 (2020)	The	Wildlands	Cons	ervancv

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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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations). regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more (A) Name and title (B) (D) (E) (F) than one box, unless person is both an officer and a director/trustee) Reportable compensation from Reportable compensation from Average hours Estimated amount of other compensation from per week the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) Former Institutional trustee Highest compensated employee Key employee the organization and related (list any hours for related director organizations organiza-tions below dotted line) (1) David Myers 60 President 0 0 Χ 165,201 32,000. (2) Frazier Haney 65 Executive Dir. 0 X 0. 132,221 9,300. 50 (3) Christina Sanchez **CFO** 0 Χ 0 89,316 5,771. (4) Jennifer Malone 50 Secretary 0 X 0 82,312 9,150. (5) Emily Gelbaum 5 Director 0 Χ 0 0 0. (6) Carl Pope 5 Director 0. 0 Χ 0 0. (7) April Sall 5 X Director 0 0 . 0. 0. (8) Joan Taylor 5 0. Director 0 Χ 0 0 5 (9) Charles Thomas Director 0 X 0 0 0. 5 (10)Daniel Gelbaum Director 0 X 0 0 0. (11)(12)(13)(14)

Form 990 (2020) The Wildlands Conservar									33-067645		Page 8
Part VII Section A. Officers, Directors, Truste	es, Key (B)	Emp	loy	ees (C		d Hi	ghe	est Compensate	d Employees (con	tinued)	
(A) Name and title	Average hours per week	box,	unle er ar	Pos heck ss pe	sit on more erson d rect	than is both	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	0	(F) ted amount f other
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Formor	(W-2/1099-MISC)	(W-2/1099-MISC)	the or	nsation from ganization i related nizations
(15)											
(16)											
(17)											
(18)		-									
(19)											
(20)		-									
(21)											
(22)											
(23)											
(24)											
(25)		-									
1 b Subtotal							▶	469,050. 0.	0.		56,221. 0.
d Total (add lines 1b and 1c)								469,050.	0.		56,221.
2 Total number of individuals (including but not limi from the organization ▶ 2	ted to tho	se lis	ted	abo	ve) v	vho re	ecei	ived more than \$1	00,000 of reportable	e compe	
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such										3	Yes No
For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportable	e com	nper	ısati	on a	and of	ther	compensation fro			
such individual	compens	ation	fro	m ai	nv u	nrela	ted	organization or in	dividual	5	X
for services rendered to the organization? <i>If 'Yes,</i> Section B. Independent Contractors	complete	e Scri	eau	ie J	TOT S	sucn p	oers	50П		3	A
1 Complete this table for your five highest compens compensation from the organization. Report compensation.	ated inde pensation	pende for t	ent (cont alen	racto idar	ors th year	at r enc	eceived more that ling with or within	n \$100,000 of the organization's t	ax year.	
(A) Name and business addr	ess							Description	of services		C) nsation
AEA Remodeling 13571 Grassland St. Yucaipa,								Construction			69,114.
Pride Trenching, Inc. 9396 Oak Creek Rd Che	erry Val	ley,	CA	. 92	223			Construction		3	53,931.
2 Total number of independent contractors (includir \$100,000 of compensation from the organization	_	limit	ed t	o the	ose I	listed	abo	ove) who received	more than		
TAA						-					000 (0000)

		Check if Schedule	e O c	ontains a	respo	nse or note to any I	ine in this Part VIII			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1 a	Federated campaign	ns		1 a					
iran	b	Membership dues			1 b					
s, G Am	С	Fundraising events.			1 c					
Gift lar,	d	Related organizatio	ns		1 d					
imi		Government grants (cont			1 e	593,964.				
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, g similar amounts not inclu	uded a	above	1 f	3,451,485.				
it.	g	Noncash contributions in lines 1a-1f			1 g	117,420.				
Col	h	Total. Add lines 1a-	1f				4,045,449.			
ne						Business Code				
Program Service Revenue	2 a	Land Lease				110000	1,096,824.	1,096,824.		
Re	b			· 						
Vice	С									
Ser	d									
am	е									
ogr		All other program s			L					
7		Total. Add lines 2a-					1,096,824.			
	3	Investment income other similar amoun	(incl	uding divi	dends	, interest, and	7 700	7 700		
	4	Income from invest	,				7,789.	7,789.		
	5						1,254,227.	1,254,227.		
	,	Noyanics		(i) R		(ii) Personal	1,234,227.	1,234,221.		
	6 a	Gross rents	6a							
		Less: rental expenses	6b							
		Rental income or (loss)	6c							
		Net rental income of		ss)						
	7 a	Gross amount from		(i) Secu	urities	(ii) Other				
	, a	sales of assets	7a	1 (52	246					
	h	other than inventory Less: cost or other basis		1,653	, 246	•				
	_	and sales expenses	7b	1,241	, 395					
		Gain or (loss)	7с	411	,851	4				
	d	Net gain or (loss).					411,851.	411,851.		
<u>o</u>	8 a	Gross income from fund	raising	g events						
e II		(not including \$	J 1:	1-\						
e <		of contributions reported See Part IV, line 18								
F	L	Less: direct expens			-	a b				
Other Revenue	D	Net income or (loss							Name of the state	
0		Gross income from gami	ing act	tivities.						
		See Part IV, line 19				a				
		Less: direct expens				b				
		Net income or (loss			activi	100000000000000000000000000000000000000				
		Gross sales of inventory returns and allowances			10					
		Less: cost of goods)b			(ALL STREET, EASTER)	
	С	Net income or (loss	s) fro	m sales o	finver		•			
SI			- 10			Business Code		1 010 707	Kana Sana	
8 8	11 a	<u>Fire Insurance</u>				900099	4,340,537.	4,340,537.		
lan	b	Property Tax Re				900099	254,681.	254,681.		
e Cel	11 a b c	Paycheck Prote		n Prgrm		900099	202,096.	202,096.		
Miscellaneous Revenue	1	All other revenue Total. Add lines 11					7,645.	7,645.		
	-						4,804,959.	7 575 (50	0	0.
	12	Total revenue. See	111211	1 40110115			11,621,099.	7,575,650.	U.	0.

Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a res	sponse or note to any li	ne in this Part IX		
	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	4,500.	4,500.		
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	469,050.	0.	469,050.	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	2,535,530.	2,206,582.	190,723.	138,225.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	58,815.	42,935.	12,939.	2,941.
9	Other employee benefits	289,064.	211,017.	63,594.	14,453.
10	Payroll taxes	255,002.	186,152.	56,100.	12,750.
	Fees for services (nonemployees):	200,002.	20072021	50,200.	
	Management				
ł	Legal	89,970.	89,970.		
	Accounting	25,648.		25,648.	
	Lobbying.	60,552.	60,552.		
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	154,806.	114,806.	30,000.	10,000.
	Advertising and promotion	001 110	05 077	75 200	70 540
13	Office expenses	231,119.	85,277.	75,300.	70,542.
14	Information technology	85,626.	72,782.	12,844.	
15	Royalties	00 110	0.4.746	4 267	
16	Occupancy	29,113.	24,746.	4,367.	
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	957,974.	670,582.	258,653.	28,739.
23	Insurance	446,590.	446,590.		
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.)				
i	Repairs/Maintenance/Utilities	1,062,001.	1,062,001.		
1	Property Tax	401,909.	401,909.		
	Travel/Lodging/Fuel	193,010.	141,606.	42,396.	9,008.
(Contributions	104,000.	104,000.		
	e All other expenses	25,826.	25,826.		
25	Total functional expenses. Add lines 1 through 24e	7,480,105.	5,951,833.	1,241,614.	286,658.
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)				
BAA		TEEA0110L 10	0/07/20	'	Form 990 (2020)

		Check if Schedule O contains a response or note to	any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,952,902.	1	2,710,851.
	2	Savings and temporary cash investments			2,502,694.	2	502,615.
	3	Pledges and grants receivable, net			174,283.	3	3,339,145.
	4	Accounts receivable, net			2,398,200.	4	2,453,306.
	5	Loans and other receivables from any current or forme trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pers	r officer, contribute	director, or, or 35%		5	
	6	Loans and other receivables from other disqualified per		-			
	0	section 4958(f)(1)), and persons described in section 4		r		6	
	7	Notes and loans receivable, net		7	1,500,000.		
(C)	8	Inventories for sale or use		8	1,300,000.		
Assets	9	Prepaid expenses and deferred charges		9	100,000.		
Ass	_					9	100,000.
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		149,738,087.			
		Less: accumulated depreciation		13,325,573.	136,730,401.	10 c	136,412,514.
	11	Investments — publicly traded securities		L		11	960,436.
	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		t t	790,580.	15	707,013.
	16	Total assets. Add lines 1 through 15 (must equal line 3		144,549,060.	16	148,685,880.	
	17	Accounts payable and accrued expenses	478,672.	17	541,064.		
	18	Grants payable		18	1.00.000		
	19	Deferred revenue.			and the same of th	19	173,800.
10	20	Tax-exempt bond liabilities				20	
ie	21	Escrow or custodial account liability. Complete Part IV				21	
Liabilities	22	Loans and other payables to any current or former offi key employee, creator or founder, substantial contribut controlled entity or family member of any of these pers	cer, director, or 35 sons	ctor, trustee, 5%		22	
_	23	Secured mortgages and notes payable to unrelated thi	rd partie	·S		23	
	24	Unsecured notes and loans payable to unrelated third	parties.			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Compared to the c		1	202,096.	25	
	26	Total liabilities. Add lines 17 through 25			680,768.	26	714,864.
Seol		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	>	X			
lal	27	Net assets without donor restrictions		143,622,941.	27	147,438,929.	
m	28	Net assets with donor restrictions	245,351.	28	532,087.		
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, checand complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current funds			29		
sts	30	Paid-in or capital surplus, or land, building, or equipm				30	
SS	31	Retained earnings, endowment, accumulated income,				31	
t A	32	Total net assets or fund balances			143,868,292.	32	147,971,016.
Se	33	Total liabilities and net assets/fund balances		144,549,060.	-	148,685,880.	
D A		,		11 10/07/20		_	Form 990 (2020)

Forn	n 990 (2020) The Wildlands Conservancy 33-	-0676450		Pa	ge 12
Pa	rt 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	11,6	21,0)99.
2	Total expenses (must equal Part IX, column (A), line 25)	2		80,1	
3	Revenue less expenses. Subtract line 2 from line 1	3			994.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	143,8		
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	_	38,2	270.
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	147,9	71,()16.
Pa	rt XII Financial Statements and Reporting		·		
	Check if Schedule O contains a response or note to any line in this Part XII				
	onsorth deficiency of contains a response of field to any more in the field of the				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 in Schedule O.				
2	a 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 reviewed o separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	n a			
				Х	
	b Were the organization's financial statements audited by an independent accountant?		2b	Λ	Selection.
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle 	За		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3 b		

TEEA0112L 10/19/20

Form 990 (2020)

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization Employer identification number 33-0676450 The Wildlands Conservancy Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 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.) X 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 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 university: 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type II, Type III 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 (vi) Amount of other (ii) EIN (iv) Is the organization listed in your governing document? support (see instructions) support (see instructions) No (A) (B) (C) (D) (E) Total

33-0676450

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.)

Sect	ion A. Public Support						
begin	dar year (or fiscal year ning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	2,943,494.	2,571,316.	10671009.	751,262.	4,045,449.	20,982,530.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	2,943,494.	2,571,316.	10671009.	751,262.	4,045,449.	20,982,530.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6	Public support. Subtract line 5 from line 4						20,982,530.
Sec	tion B. Total Support						
Caler begir	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	2,943,494.	2,571,316.	10671009.	751,262.	4,045,449.	20,982,530.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	28,902.	37,672.	40,119.	33,036.	7,789.	147,518.
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.	51,795.	4,347,333.	9,890,097.	4,863,663.	4,881,497.	24,034,385.
11	Total support. Add lines 7 through 10						45,164,433.
12	Gross receipts from related activ	vities, etc. (see ins	tructions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and	for the organizatio	n's first, second, t	hird, fourth, or fift	h tax year as a se	ection 501(c)(3)	
Sec	tion C. Computation of Pu	ublic Support	Percentage				
14	Public support percentage for 20	020 (line 6, column	(f), divided by line	e 11, column (f)).			46.46 %
15	Public support percentage from	2019 Schedule A,	Part II, line 14				53.08 %
16 a	33-1/3% support test—2020. If to and stop here. The organization	he organization di qualifies as a pub	d not check the bo olicly supported or	x on line 13, and l ganization	line 14 is 33-1/3%	or more, check th	is box X
b	33-1/3% support test—2019. If the and stop here. The organization	ne organization did n qualifies as a pul	l not check a box oblicly supported or	on line 13 or 16a, ganization.	and line 15 is 33-	1/3% or more, che	ck this box
	10%-facts-and-circumstances to or more, and if the organization the organization meets the facts	meets the facts-ai s-and-circumstance	nd-circumstances es test. The organi	test, check this bo zation qualifies as	ox and stop here. Is a publicly suppo	Explain in Part VI orted organization.	how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the facts-and-circumstances'	nd-circumstances test. The organiza	test, check this bo tion qualifies as a	ox and stop here. I publicly supporte	Explain in Part VI d organization	how the
18	Private foundation. If the organi	zation did not che	ck a box on line 13	3, 16a, 16b, 17a, d	or 17b, check this	box and see instru	ctions

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.)

Sect	tion A. Public Support						
	ar year (or fiscal year beginning in) >	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
	Gross receipts from activities that are not an unrelated trade or business under section 513.			,			
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
	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			-			
	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.					7	
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) 🕒	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		-				
	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 in line 10b, whether or not the business is regularly carried on.			1			
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 forganization, check this box and	stop here					
Sec	tion C. Computation of Pu			a		1	
15	Public support percentage for 20						<u> %</u>
16	Public support percentage from 2					16	96
Sect	tion D. Computation of Invest						
17	Investment income percentage for	or 2020 (line 10c, d	column (f), divided	d by line 13, colun	nn (f))		0/0
18	Investment income percentage fr						0/0
	33-1/3% support tests—2020. If t is not more than 33-1/3%, check	this box and stop	here. The organize	ation qualifies as	a publicly suppor	ted organization	
b	33-1/3% support tests—2019. If t line 18 is not more than 33-1/3%	he organization die	d not check a box	on line 14 or line organization qual	19a, and line 16 i lifies as a publicly	s more than 33-1/39 supported organiza	%, and tion ▶ □
20	Private foundation. If the organiz						

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

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

		Yes	No
	1		
	2		
	tivin o mor a	(1.01) PT7 - 1 MAY 100 - 1	
	3a		
	3b		
	3c		or any amount
	4a		
	4b		
	4c		
	North Wind	(radicant have	
	5a		
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	5b		
	5c	E 33	
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	9b	233222	
	9c		
l			
!	10a		CONTRACTOR P
	10b		

Pa	art IV Supporting Organizations (continued)			
11	1. Here the ergonization appented a gift or contribution from any of the following percenc?		Yes	No
	 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, 			
	the governing body of a supported organization?	11a		
	b A family member of a person described in line 11a above?	11b		
_	c A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Sec	ection B. Type I Supporting Organizations		1	Τ
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees		Yes	No
2	were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sed	ection C. Type II Supporting Organizations			
		Trick Person	Yes	No
1	1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	s 1		
Sed	ection D. All Type III Supporting Organizations			
1	1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	766	Yes	No
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			1 0000000000000000000000000000000000000
2	Vere any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	4 50 50	
3	3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a signific voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	ant 3		
Se	ection E. Type III Functionally Integrated Supporting Organizations			
1	1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uctions).		
	a The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruct	ions).	
2	2 Activities Test. Answer lines 2a and 2b below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted	201 A.S. (1900 11) May 1.		
	substantially all of its activities.	2a	1 6500	
	b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities	01		and the state of t
	but for the organization's involvement.	2b		
3	3 Parent of Supported Organizations. Answer lines 3a and 3b below.			Parado insert blace
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Par				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organizations	on Nov. 2 s must co	20, 1970 (explain in Pomplete Sections A thr	art VI). See ough E.
Sect	ion A — Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
k	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c	a	
C	Total (add lines 1a, 1b, and 1c)	1d		
€	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	
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 interesting (see instructions).	grated Ty		
BAA			Schedule A	(Form 990 or 990-EZ)

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)		
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
_ 7	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 2020 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

BAA

Schedule A (Form 990 or 990-EZ) 2020

33-0676450

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	2020	2019	2018	2017	2016
Filming Income, School E	vent Fees, Ot \$ 84,183.	ther \$ 166,243.	\$ 192,651.	\$ 56,158.	\$ 51,795.
Sale of Easement Grant Refund	,	4,275,316.	,	1,941,175. 2,350,000.	•
Life Insurance Proceeds Paycheck Protection Prog	ram		9,697,446.	2,330,000.	
-	202,096.	422,104.			
Fire Insurance Proceeds	4,340,537.				
Property Tax Refund	254,681.				
Total	\$4,881,497.	\$ 4,863,663.	\$ 9,890,097.	\$ 4,347,333.	\$ 51,795.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

Employer identification number

The Wildlands Con	33-0676450				
Organization type (check one	:):				
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a priva	ate foundation			
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private for	oundation			
	501(c)(3) taxable private foundation				
-	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule	e and a Special Rule. See instructions.			
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, cany one contributor. Complete Parts I and II. See instructions for dete				
Special Rules					
under sections 509 received from any	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the fall (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 one contributor, during the year, total contributions of the greater of (I, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	90-EZ), Part II, line 13, 16a, or 16b, and that			
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.					
during the year, co \$1,000. If this box charitable, etc., pu	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 tha 990-PF), but it must answer	at isn't covered by the General Rule and/or the Special Rules doesn't 'No' on Part IV, line 2, of its Form 990; or check the box on line H of t doesn't meet the filing requirements of Schedule B (Form 990, 990-I	file Schedule B (Form 990, 990-EZ, or its Form 990-EZ or on its Form 990-PF,			

	B (Form 990, 990-EZ, or 990-PF) (2020)		1 1 Page 2
Name of org	•	1	Employer identification number 33-0676450
	ildlands Conservancy		33-0070430
Parti	Contributors (see instructions). Use duplicate copies of Part I if additional spa		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution s
1		\$98,	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution s
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
BAA	TEEA0702L 07;28;20	Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization The Wildlands Conservancy

BAA

Employer identification number

33-0676450

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional spa	се	is needed.	
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
1	Agilent and Keysight Technologies stock			
		\$_	98,552.	2/09/21_
(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
		\$_		
		1		

SCHEDULE C (Form 990 or 990-EZ)

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

• 5	Section 501(c)(4), (5), or (6) org	ganizations: Complete Part III.			
Name	of organization			Employer identific	ation number
	e Wildlands Conserv	ancy		33-067645	0
Par	Participation of the Control of the	anization is exempt under section 501	* *	_	
1	Provide a description of the o (See instructions for definition	rganization's direct and indirect political car n of 'political campaign activities')	mpaign activities in P	art IV.	
2	Political campaign activity ex	penditures (See instructions)			
		ampaign activities (See instructions)			
Par		anization is exempt under section 501			
1	Enter the amount of any excis	se tax incurred by the organization under se	ction 4955		0.
2	Enter the amount of any excis	se tax incurred by organization managers un	nder section 4955	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for the	is year?		Yes No
4 a	Was a correction made?				Yes No
ŀ	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the orga	anization is exempt under section 501	(c), except section	1 501(c)(3).	
1	Enter the amount directly exp	ended by the filing organization for section	527 exempt function a	activities 🟲 \$	
2	Enter the amount of the filing 527 exempt function activities	organization's funds contributed to other or	ganizations for sectio	n ▶\$	}
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and or	Form 1120-POL,		}
4	• •	Form 1120-POL for this year?			
5	organization made payments	and employer identification number (EIN) of For each organization listed, enter the amons received that were promptly and directly action committee (PAC). If additional space	ount paid from the fili	ng organization's funds.	. Also enter the
	(a) Name	(b) Address	(c) E⊹N	(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 or 990-EZ) 2020

Part II-A Complete if th section 501(e organization is	s exempt under section 5	501(c)(3) and filed F	orm 5768 (election und	er
		ongs to an affiliated group (a	nd list in Part IV each	affiliated group member's i	name
L		d share of excess lobbying ex		annated group member 3 i	idirio,
		cked box A and 'limited conti	· · · · · · · · · · · · · · · · · · ·		
(The term		ying Expenditures ans amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditur	res to influence pul	olic opinion (grassroots lobby	/ing)		
b Total lobbying expenditu	res to influence a le	egislative body (direct lobbyi	ng)		
c Total lobbying expenditu	res (add lines 1a a	nd 1b)	v		
d Other exempt purpose ex	penditures				
e Total exempt purpose ex	penditures (add lin	es 1c and 1d)			
		ount from the following table			
If the amount on line 1e, colu	mn (a) or (b) is :	The lobbying nontaxable a	mount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0	000,000	\$100,000 plus 15% of the excess of	over \$500,000.		
Over \$1,000,000 but not over \$1	,500,000	\$175,000 plus 10% of the excess of	over \$1,000,000.		
Over \$1,500,000 but not over \$1	7,000,000	\$225,000 plus 5% of the excess ov	ver \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	mount (enter 25%	of line 1f)			
h Subtract line 1g from line	e 1a. If zero or less	s, enter -0			
i Subtract line 1f from line	1c. If zero or less,	, enter -0			
j If there is an amount oth section 4911 tax for this	er than zero on eit vear?	her line 1h or line 1i, did the	organization file Form	4720 reporting	Yes No
		4-Year Averaging Period L	Jnder Section 501(h)		
(Soi		hat made a section 501(h) el pelow. See the separate inst			
	Lob	bying Expenditures During 4	l-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
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 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	990 or 990-EZ) 2020

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

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.)	(b)
		No	Amount
See Part IV 1 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:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		Χ	
d Mailings to members, legislators, or the public?		Χ	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		Χ	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		60,552.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	
i Other activities?		X	
j Total. Add lines 1c through 1i			60,552.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912			The first of the control of the control of the beauty of the control of the contr
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- In a second		
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		

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.' Part III-B

	Dues, assessments and similar amounts from members.	-	
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).		
	a Current year	2a	
	b Carryover from last year	2b	
	c Total	2 c	
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 expenditure next year?	4	
į	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

Duos assessments and similar amounts from members

The Conservancy hired a firm which provided consultation and advocacy in support of funding projects through multiple funding sources, as well as regional conservation investment strategies/mitigation credit agreements by engaging CA Dept of Fish and Wildlife on the development of mitigation credit agreements

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification numbe The Wildlands Conservancy 33-0676450 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year..... 2 Aggregate value of contributions to (during year). Aggregate value of grants from (during year). 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Yes Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area X Protection of natural habitat Preservation of a certified historic structure X Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2 **b** Total acreage restricted by conservation easements 2 b 478 c Number of conservation easements on a certified historic structure included in (a)... 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... 2dNumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 4 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, X No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

See Part XIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1............... (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X......

▶\$

14.						
Schedule D (Form 990) 2020 The W	ildlands	Conservancy		33-067		Page 2
Part III Organizations Maintainin	ng Collection	s of Art, Historical	Treasures, or Other	Similar Assets (cont	inued)	
3 Using the organization's acquisition items (check all that apply):	n, accession, a	and other records, chec	ck any of the following th	nat make significant use	of its collect	ion
a Public exhibition		d Loan	or exchange program			
b Scholarly research		e Other				
c Preservation for future generat	tions					
4 Provide a description of the organi. Part XIII.	zation's collec	tions and explain how	they further the organiza	ation's exempt purpose	in	
5 During the year, did the organization to be sold to raise funds rather tha	on solicit or re n to be mainta	ceive donations of art, ained as part of the org	historical treasures, or ganization's collection?.	other similar assets	Yes	No
Part IV Escrow and Custodial Ar	rangements	. Complete if the or	ganization answered		Part IV,	
1 a Is the organization an agent, trusted on Form 990, Part X?	ee, custodian o	or other intermediary for	or contributions or other	assets not included	Yes	No
b If 'Yes,' explain the arrangement in						
					Amount	
c Beginning balance						
d Additions during the year						
e Distributions during the year						
f Ending balance						
2a Did the organization include an am				• 4 4 4 4 4 4	Yes	No
b If 'Yes,' explain the arrangement in	n Part XIII. Ch	eck here if the explana	tion has been provided	on Part XIII		
Part V Endowment Funds. Com						
	(a) Current y	ear (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four y	ears back
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the current	year end balance (line	1g, column (a)) held as	•		1)
a Board designated or quasi-endown	ment ►	%				
b Permanent endowment ►	9/0					
c Term endowment ►	%					
The percentages on lines 2a, 2b, a	and 2c should	equal 100%.				
32 Are those and support funds not in				-1		
3a Are there endowment funds not in organization by:	the possessio	n or the organization t	nat are neid and adminis	stered for the	Ye	s No
(i) Unrelated organizations					. 3a(i)	
(ii) Related organizations					4.7	
b If 'Yes' on line 3a(ii), are the relate						
4 Describe in Part XIII the intended in	-					
Part VI Land, Buildings, and		·				
Complete if the organiza			90, Part IV, line 11a	. See Form 990, Par	t X, line 10	1.
Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land		125,168,832.			125,16	8,832.
b Buildings		10,766,079.		4,853,519.	5,91	2,560.

 1a Land
 125,168,832.

 b Buildings
 10,766,079.
 4,853,519.
 5,912,560.

 c Leasehold improvements
 1,410,482.
 473,191.

 d Equipment
 1,919,503.
 7,061,572.
 4,857,931.

136, 412, 514. Schedule D (Form 990) 2020

Complete if the organization answered 'Y	es' on Form 990. F	N/A Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G) 		
(H)		
(l) 		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		
Part VIII Investments — Program Related.	/es' on Form 990 F	N/A Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	, , , , , , , , , , , , , , , , , , , ,	, , and a second
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990. Part X, column (B) line 13.)	>	
Part IX Other Assets.	N/	'A Part IV, line 11d. See Form 990, Part X, line 15.
	escription	(b) Book value
(1)	33011511011	(3) 2001. (4100
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(10)		
Total. (Column (b) must equal Form 990. Part X, column (B	R) line 15)	>
Part X Other Liabilities.) IIIIC 13.)	
Complete if the organization answered 'Yes' on	Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X. line 25.
	cription of liability	(b) Book value
(1) Federal income taxes		
(2)		
(3)		
(4)	· · · · · · · · · · · · · · · · · · ·	
(5) (6)		
(6)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)		>

tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2020 THE WILLIAMUS COMSELVANCY	-0070	430 Fage 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	11,582,829.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments. 2a -38,270.		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.). 2d		
e Add lines 2a through 2d	2 e	-38,270.
3 Subtract line 2e from line 1	3	11,621,099.
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	11,621,099.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	7,480,105.
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.). 2d		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	7,480,105.
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.)		
c Add lines 4a and 4b.	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,480,105.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, 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 easement was recorded as revenue when sold to the Natural Resource Conservation Service in the fiscal year ending June 30, 2020. The easement is located on the Eel River Estuary in Humboldt County. The Conservancy was paid \$4,275,316 in the fiscal '20 year for this easement.

Part V, Line 4 - Intended Uses Of Endowment Fund

These funds were earmarked for TWC's Sand to Snow Preserve System. They were

undesignated in 2017.

Part XIII Supplemental Information.

Schedule D (Form 990) 2020

Part X - FASB ASC 740 Footnote

BAA

(Continued)

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.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23. ► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

The Wildlands Conservancy

Part I Questions Regarding Compensation

Employer identification number 33-0676450

			- 1		
1 -	Check the appropriate box(es) if the organization provided any	of the following to or for a person listed on Form 990 Part	0.01000	Yes	No
1 a	VII, Section A, line 1a. Complete Part III to provide any relevan	nt information regarding these items. Part III			
	First-class or charter travel	X 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	n follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described at	pove? If 'No,' complete Part III to explain	1 b	X	at et al at a
2	Did the organization require substantiation prior to reimbursing				
	trustees, and officers, including the CEO/Executive Director, re-	garding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the organization used to Executive Director. Check all that apply. Do not check any box establish compensation of the CEO/Executive Director, but exp	establish the compensation of the organization's CEO/ es for methods used by a related organization to plain 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, Sorganization or a related organization:	Section A, line 1a, with respect to the filing			
ä	Receive a severance payment or change-of-control payment?		4a		X
	Participate in or receive payment from a supplemental nonqua		4b		X
	: Participate in or receive payment from an equity-based compe		4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the approximation of the second s	oplicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, d				
	contingent on the revenues of:				
	The organization?		5 a		X
	Any related organization?		5 b		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, d contingent on the net earnings of:	id the organization pay or accrue any compensation			
	The organization?		6 a		X
	Any related organization?		6 b		X
	If 'Yes' on line 6a or 6b, describe in Part III.			Spire university	
7	For persons listed on Form 990, Part VII, Section A, line 1a, of payments not described on lines 5 and 6? If 'Yes,' describe in	lid the organization provide any nonfixed Part III.	7		X
8	Were any amounts reported on Form 990, Part VII, paid or acc	crued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations secti If 'Yes,' describe in Part III.	on 53 4958-4(a)(3)?	8		X
_			-		1
9	If 'Yes' on line 8, did the organization also follow the rebuttab	ie presumption procedure described in Regulations		Į	

33-0676450

The Wildlands Conservancy

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2020

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 o	Breakdown of W-2 and/or 1099-MISC compensation	2 compensation				Ĺ
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(c) Retirement and other deferred compensation	(b) Nontaxable benefits	(E,) rotal of columns(B)(i)-(D)	(columns(B)(i)-(b) in column (B) reported as deferred on prior Form 990
David Myers	Θ	165,201.	0.	0		32,000.		
1 President	<u> </u>		0	.0	0	0.	0	0
	0				 	1 1 1		
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5	(E)					And a second sec		
	Θ							
9	(ii)							
	(i)			 				
7	(ii)							
	Θ		 	1] 	1 1	
8	(ii)							
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15	<u>(ii)</u>							
	E						1	
16	€		- 1					
BAA			TEEA4102L 09/25/20	50			Schedule	Schedule J (Form 990) ZUZU

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.

Schedule J (Form 990) 2020

SCHEDULE L (Form 990 or 990-EZ)

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 Name of the organization

The Wildlands Conservancy

Employer identification number

33-0676450

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

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

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

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loa fror organ	an to or n the ization?	(e) Original principal amount	(f) Balance due	(g) in d	lefault?	(h) App by bo comm	proved ard or littee?	(i) Wi agreer	ntten ment?
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												L
(7)												
(8)												
(9)												<u></u>
(10)												
Total										Edit		

Part III Grants or Assistance Benefiting Interested Persons.

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

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

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

Schedule L (Form 990 or 990-EZ) 2020

Part IV Business Transactions Involving Interested Persons.

Complete if the ord	ganization 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	146,660.	Program support		X
(2) Anthony Malone	Husband of Off	169,114.	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 \$146,660 for sponsorships, general operations, and for program support during the year. Also, Anthony Malone, the husband of the Human Resource Director, was paid \$169,114 for contracting 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990.

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

Open to Public Inspection

Employer identification number The Wildlands Conservancy 33-0676450 Part I Types of Property (b) Chèck if Number of Noncash contribution Method of determining applicable contributions or amounts reported noncash contribution amounts items contributed on Form 990, Part VIII, line 1g 2 3 Art -- Fractional interests..... Books and publications..... 4 Clothing and household goods..... Cars and other vehicles 6 7 Boats and planes..... Intellectual property..... 8 9 3 117,420. FMV Securities - Closely held stock..... 10 11 Securities - Partnership, LLC, or trust interests . . Securities - Miscellaneous..... 13 Qualified conservation contribution — Historic structures..... Qualified conservation contribution — Other..... 14 15 16 Real estate - Commercial..... 17 19 Food inventory..... 20 Drugs and medical supplies..... Taxidermy..... 21 22 Scientific specimens..... 23 Archeological artifacts..... 24 25 Other > 26 Other > 27 Other ▶ 28 Other ► Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement..... 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three 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 a b If 'Yes,' describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?...... 31 Χ 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.... Χ b If 'Yes,' describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) 2020

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.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

The Wildlands Conservancy

33-0676450

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 leader in providing free outdoor education programs to underserved youth. From day-long trips to week-long science school, more than 1.3 million children partipcated in an outdoor education experience provided by the Conservancy. Traditionally, more than 60,000 youth participate in educational opportunities at a Conservancy preserve, from self-quided exploratation through interactive interpetive signage to naturalist-guided field trips and programs. While the Covid pandemic brought challenges to providing standard free field trips, the Conservancy pivoted to provide parents and guardians free resources to enrich their children's distance-learning experience. Additionally, new preserve-based programs focus on providing visiting families and individuals with educational opportunities in a safe manner.

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

Director Emily Gelbaum is the niece of President 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.

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

Directors, CEO, Vice 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 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

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Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management (continued) 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 kept in a binder at each location where the public visits. All employees are trained to provide a copy of these documents immediately upon request.