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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 10-01-2015 , and ending 09-30-2016

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1450 MERRIHUE DRIVE

City or town, state or province, country, and ZIP or foreign postal code
NAPLES, FL 34102

D Employer identification number
59-1157084

E Telephone number
(239) 262-0304

G Gross receipts $ 10,823,709

F Name and address of principal officer
ROB MOHER
1450 MERRIHUE DRIVE
NAPLES, FL 34102

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW CONSERVANCY ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1964

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
OUR MISSION IS TO PROTECT SOUTHWEST FLORIDA'S UNIQUE NATURAL ENVIRONMENT AND QUALITY OF LIFE

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

Activities & Governance	**3** Number of voting members of the governing body (Part VI, line 1a)	**3**	31
	4 Number of independent voting members of the governing body (Part VI, line 1b)	**4**	31
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	**5**	83
	6 Total number of volunteers (estimate if necessary)	**6**	600
	7a Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	-13,816
	b Net unrelated business taxable income from Form 990-T, line 34	**7b**	-13,816

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	6,385,623	7,050,240
	9 Program service revenue (Part VIII, line 2g)	381,477	357,552
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,134,007	202,336
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	142,802	-485,165
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,043,909	7,124,963
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,753,563	3,900,903
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶883,596		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,704,126	3,741,063
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	7,457,689	7,641,966
	19 Revenue less expenses Subtract line 18 from line 12	586,220	-517,003

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	52,829,972	53,161,288
	21 Total liabilities (Part X, line 26)	4,568,582	3,806,057
	22 Net assets or fund balances Subtract line 21 from line 20	48,261,390	49,355,231

Part II Signature Block

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

Sign Here

******
Signature of officer — 2017-03-18 Date

VICTORIA POLLOCK CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
AMELIA COOPER CPA	AMELIA COOPER CPA	2017-02-26		P00437898

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 4099 TAMIAMI TRAIL N STE 300
NAPLES, FL 34103

Phone no (239) 262-8686

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

WE ARE A GRASSROOTS ORGANIZATION FOCUSED ON THE CRITICAL ENVIRONMENTAL ISSUES OF SOUTHWEST FLORIDA WE ACCOMPLISH THIS THROUGH THE COMBINED EFFORTS OF OUR PROGRAMMATIC DEPARTMENTS SCIENCE, POLICY, EDUCATION AND WILDLIFE REHABILITATION

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 1,269,306 including grants of $) (Revenue $)

THE CONSERVANCY OF SOUTHWEST FLORIDA'S ENVIRONMENTAL SCIENCE TEAM IS DEDICATED TO PROVIDING UNBIASED STUDIES AND ENJOYS A NATIONAL REPUTATION FOR THEIR EXPERTISE WITH MORE THAN 100 YEARS OF COLLECTIVE EXPERIENCE, THE SCIENTISTS PROVIDE THE DEPTH OF EXPERIENCE AND KNOWLEDGE RANGING FROM CONDUCTING ENVIRONMENTAL SITE AUDITS TO DETAILED LABORATORY STUDIES THE PRIMARY OBJECTIVE IS TO CONDUCT RESEARCH TO ENHANCE OUR UNDERSTANDING OF WILDLIFE POPULATIONS AND THE BIOLOGICAL COMMUNITIES ON WHICH THEY DEPEND - FOR USE IN MORE EFFECTIVELY CONSERVING, MANAGING AND RESTORING SOUTHWEST FLORIDA'S NATURAL SYSTEMS CONTINUED ON SCHEDULE O

4b (Code) (Expenses $ 1,388,646 including grants of $) (Revenue $)

THE CONSERVANCY OF SOUTHWEST FLORIDA'S ENVIRONMENTAL POLICY TEAM USES A SCIENCE-BASED APPROACH TO TACKLE BROAD REGIONAL ENVIRONMENTAL ISSUES AND COLLABORATES WITH PARTNERS SUCH AS BUSINESS, ENVIRONMENTAL, ACADEMIC AND GOVERNMENT LEADERS TO ENSURE THE PROPER STEWARDSHIP OF SOUTHWEST FLORIDA'S WATER, LAND AND WILDLIFE THEY PROVIDE OUR REGION'S DECISION MAKERS WITH THE TOOLS NECESSARY TO MAKE INFORMED DECISIONS ON ENVIRONMENTAL AND CONSERVATION ISSUES SPECIFIC OBJECTIVES TACKLED BY THE TEAM ARE DEVELOPMENT, SMART GROWTH, WATER ISSUES, ENDANGERED SPECIES AND WILDLIFE HABITAT PROTECTION CONTINUED ON SCHEDULE O

4c (Code) (Expenses $ 1,757,328 including grants of $) (Revenue $ 357,552)

THE CONSERVANCY OF SOUTHWEST FLORIDA'S ENVIRONMENTAL EDUCATION TEAM IS COMMITTED TO DEVELOPING THE ENVIRONMENTAL LEADERSHIP OF TOMORROW WE STRIVE TO PROVIDE CHILDREN AND ADULTS AN APPRECIATION AND UNDERSTANDING OF SOUTHWEST FLORIDA'S UNIQUE NATURAL RESOURCES THROUGH THIS WORK, WE STRIVE TO EQUIP OUR COMMUNITY WITH THE KNOWLEDGE AND UNDERSTANDING TO MAKE A DIFFERENCE FOR THE ENVIRONMENT AND CREATE THE NEXT GENERATION OF ENVIRONMENTAL LEADERS PEOPLE WHO APPRECIATE THE IMPORTANCE OF THESE RESOURCES ARE MORE WILLING TO HELP PROTECT AND TO ADDRESS THE CRITICAL ENVIRONMENTAL ISSUES FACING SOUTHWEST FLORIDA'S LAND, WATER AND WILDLIFE CONTINUED ON SCHEDULE O

See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses $ 1,445,830 including grants of $) (Revenue $)

4e **Total program service expenses ▶** 5,861,110

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**		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**		No
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**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	**24a**		No
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**		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
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**		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**27**		No
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	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
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**		No
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**	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
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**		No
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**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	54		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
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	83		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .		3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .		3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .		4a		No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .		5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	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		No
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?		7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
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? **Note.** See the instructions for additional information the organization must report on Schedule O		13a		
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		14b		

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	31		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	31		
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?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6		Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
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*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ FL , PA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶VICTORIA POLLOCK 1495 SMITH PRESERVE WAY NAPLES, FL 34102 (239) 403-4202

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See 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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b **Sub-Total** ▶										
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶								499,576	0	34,406

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
STEVENS CONSTRUCTION 62808 WHISKEY CREEK DR FT MYERS, FL 33919	CONSTRUCTION	192,977
PRESSTIGE PRINTING 10940 HARMONY PARK DRIVE BONITA SPRINGS, FL 34135	PRINTING	149,082
HEATHERWOOD CONSTRUCTION COMPANY 8880 TERRENCE COURT BONITA SPIRNGS, FL 34135	CONSTRUCTION	122,064
TENTLOGIX INC 2820 SE MARTIN SQUARE STUART, FL 34994	RENT OF A TENT	114,542
GLMV ARCHITECTURE INC 1525 E DOUGLAS WICHITA, KS 67211	ARCHITECTUAL SERVICES	107,012

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 5

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	1,885,026			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	503,904			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,661,310			
	g	Noncash contributions included in lines 1a-1f $		648,574			
	h	**Total.** Add lines 1a-1f		7,050,240			
Program Service Revenue			Business Code				
	2a	PROGRAM INCOME	611710	206,044	206,044		
	b	ADMISSIONS	713990	151,508	151,508		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		357,552			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		199,317			199,317
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross rents	33,403 /				
	b	Less rental expenses	0 /				
	c	Rental income or (loss)	33,403 /				
	d	Net rental income or (loss)		33,403			33,403
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	2,516,624 /				
	b	Less cost or other basis and sales expenses	2,491,515 / 22,090				
	c	Gain or (loss)	25,109 / -22,090				
	d	Net gain or (loss)		3,019			3,019
	8a	Gross income from fundraising events (not including $ 1,885,026 of contributions reported on line 1c) See Part IV, line 18	a 120,745				
	b	Less direct expenses	b 744,003				
	c	Net income or (loss) from fundraising events		-623,258			-623,258
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances	a 508,773				
	b	Less cost of goods sold	b 441,138				
	c	Net income or (loss) from sales of inventory		67,635	81,451	-13,816	
		Miscellaneous Revenue	Business Code				
	11a	OTHER INCOME	900099	31,958			31,958
	b	TAX REFUNDS	900099	5,097			5,097
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		37,055			
	12	**Total revenue.** See Instructions		7,124,963	439,003	-13,816	-350,464

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	528,259	101,131	191,509	235,619
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,700,935	2,077,715	353,973	269,247
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	47,700	36,877	5,282	5,541
9 Other employee benefits	392,205	279,130	61,083	51,992
10 Payroll taxes	231,804	157,619	38,676	35,509
11 Fees for services (non-employees)				
a Management				
b Legal	40,444	31,626	4,112	4,706
c Accounting				
d Lobbying	47,047	47,047		
e Professional fundraising services See Part IV, line 17				
f Investment management fees	37,967		37,967	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	351,881	264,901	40,557	46,423
12 Advertising and promotion	167,155	152,238	5,216	9,701
13 Office expenses	199,688	155,342	5,999	38,347
14 Information technology				
15 Royalties				
16 Occupancy	22,243	14,518	3,096	4,629
17 Travel	57,633	44,939	3,629	9,065
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	101,412	99,384	2,028	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,311,849	1,164,015	69,732	78,102
23 Insurance	275,742	236,779	19,065	19,898
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a MAINTENANCE	271,572	225,104	18,765	27,703
b MATERIALS AND SMALL EQU	242,880	205,951	18,760	18,169
c TELEPHONE AND UTILITIES	225,519	199,149	11,089	15,281
d INTERNS	154,260	154,260		
e All other expenses	233,771	213,385	6,722	13,664
25 **Total functional expenses.** Add lines 1 through 24e	7,641,966	5,861,110	897,260	883,596
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)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	562,520	1	492,933
	2	Savings and temporary cash investments	1,464,199	2	218,890
	3	Pledges and grants receivable, net	1,765,695	3	1,317,017
	4	Accounts receivable, net	10,387	4	10,647
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	138,415	8	31,462
	9	Prepaid expenses and deferred charges	187,989	9	192,112
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 32,500,789			
	b	Less accumulated depreciation — 10b: 7,372,193	24,065,973	10c	25,128,596
	11	Investments—publicly traded securities	10,804,793	11	11,478,007
	12	Investments—other securities See Part IV, line 11	5,000	12	5,511
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	13,825,001	15	14,286,113
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	52,829,972	16	53,161,288
Liabilities	17	Accounts payable and accrued expenses	654,646	17	529,195
	18	Grants payable		18	
	19	Deferred revenue	182,858	19	146,481
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	12,719	22	0
	23	Secured mortgages and notes payable to unrelated third parties	3,712,759	23	3,126,631
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	5,600	25	3,750
	26	**Total liabilities.** Add lines 17 through 25	4,568,582	26	3,806,057
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	26,238,354	27	27,099,845
	28	Temporarily restricted net assets	11,469,544	28	11,590,354
	29	Permanently restricted net assets	10,553,492	29	10,665,032
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	48,261,390	33	49,355,231
	34	Total liabilities and net assets/fund balances	52,829,972	34	53,161,288

Part XI Reconcilliation 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	7,124,963
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,641,966
3	Revenue less expenses Subtract line 2 from line 1	3	-517,003
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	48,261,390
5	Net unrealized gains (losses) on investments	5	825,857
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	784,987
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	49,355,231

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 59-1157084

Name: THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 1,445,830 including grants of $) (Revenue $)

CONSERVANCY OF SOUTHWEST FLORIDA'S VON ARX HOSPITAL WILDLIFE HOSPITALTHE CONSERVANCY OF SOUTHWEST FLORIDA'S VON ARX WILDLIFE HOSPITAL ADMITTED APPROXIMATELY 3,500 NATIVE ANIMALS THIS YEAR FOREMOST THE HOSPITAL IS DESIGNED TO MEET THE MEDICAL NEEDS OF INJURED, SICK AND ORPHANED NATIVE BIRDS, MAMMALS AND REPTILES, ULTIMATELY IMPROVING THEIR ABILITY TO BE RELEASED BACK IN TO THE WILD THE SECOND GOAL IS TO PROVIDE EDUCATION TO OUR NATURE CENTER VISITORS ON HOW TO PREVENT INJURIES TO WILDLIFE THE VON ARX WILDLIFE HOSPITAL IS THE ONLY FACILITY OF ITS KIND WITHIN COLLIER COUNTY THE INJURED, SICK AND ORPHANED NATIVE WILDLIFE ARE CARED FOR BY A DEDICATED STAFF OF FIVE FULL-TIME EMPLOYEES, A STAFF VETERINARIAN, AND SEASONAL INTERNS STAFF EFFORTS ARE SUPPORTED BY VOLUNTEERS WHO ASSIST WITH DIET PREPARATION, CAGE CLEANING, ANIMAL RESTRAINT AND WILDLIFE RESCUE AND RELEASE THE COST TO TREAT EACH ANIMAL IS MORE THAN $250 OPERATING EXPENSES FOR FOOD, MEDICAL SUPPLIES AND STAFF EXCEEDS $350,000 ANNUALLY INCREMENTAL OPERATING COSTS ARE SUBSIDIZED BY A SMALL NUMBER OF COMMUNITY PARTNERS WHO DONATE BASIC SUPPLIES SUCH AS FOOD, MAINTENANCE EQUIPMENT AND MEDICAL SUPPLIES NEEDED TO CARE FOR THE WILDLIFE PATIENTS THE VON ARX WILDLIFE HOSPITAL TEAM RELEASES ABOUT HALF OF THE ANIMALS TREATED BACK INTO THEIR NATURAL HABITATS IN 2016 THE CONSERVANCY OF SOUTHWEST FLORIDA OPENED EXPANDED OUTDOOR WILDLIFE RECOVERY AREAS THE GOAL OF THESE ENCLOSURES IS TO SERVE A BROADER VARIETY OF PATIENTS AND INCREASE THE NUMBER OF PATIENTS WE ARE ABLE TO REHABILITATE THE EXPANSION ALSO INCLUDES A PUBLIC AREA WHERE NATURE CENTER GUESTS CAN LEARN MORE ABOUT PREVENTING INJURY TO WILDLIFE BEHIND-THE-SCENES EXPANSION FEATURES INCLUDE O A NEW AND ENLARGED SHOREBIRD RECOVERY AREAO TWO LARGE OUTDOOR REHABILITATION STRUCTURES TO ACCOMMODATE THE INCREASING NUMBER OF PATIENTS, INCLUDING THE ABILITY TO CARE FOR OTTERS THROUGH THE ENTIRE REHABILITATION PROJECTO EIGHT SMALL MAMMAL RECOVERY AREASO IMPROVEMENTS TO INFRASTRUCTURE INCLUDING WATER, POWER AND CAREGIVER ACCESSO ADDITIONAL MAINTENANCE AND STORAGE FACILITIES GUEST EDUCATION AREAS DUE TO PERMITS, THE VAST MAJORITY OF WORK AT THE VON ARX WILDLIFE HOSPITAL HAPPENS BEHIND-THE-SCENES, AWAY FROM PUBLIC VIEW THE NEW PUBLIC EXHIBITS PROVIDE GUESTS WITH A VARIETY OF OPPORTUNITIES TO LEARN ABOUT WORK THAT TAKES PLACE INSIDE THE WILDLIFE HOSPITAL AND HOW TO PREVENT INJURY TO WILDLIFE SAPAKIE WILDLIFE EXHIBIT HALLTHE NEW SAPAKIE WILDLIFE EXHIBITS ARE GEARED TOWARD EDUCATING MEMBERS AND VISITORS ON THE REASONS WHY ANIMALS ARE ADMITTED TO THE VON ARX WILDLIFE HOSPITAL, THE TYPES OF MEDICAL CARE THEY RECEIVE, AND THE WAYS THE PUBLIC CAN HELP PREVENT WILDLIFE INJURIES IN ADDITION, THE EXHIBIT HAS A KIDS' PLAY AREA, WHERE CHILDREN CAN TRANSFORM INTO JUNIOR VETERINARIANS AND JOIN DR OLLIE OWL FOR HANDS-ON ACTIVITIES EMPHASIZING HOW THE HOSPITAL CARES FOR PATIENTS VON ARX WILDLIFE VIEWING PAVILIONTHE NEW VON ARX WILDLIFE VIEWING PAVILION GIVES GUESTS THE OPPORTUNITY TO COME FACE-TO-BEAK WITH THREE WILDLIFE AMBASSADORS THESE PERMANENT RESIDENTS ARE FORMER HOSPITAL PATIENTS DUE TO THE SEVERITY OF THEIR INJURIES, THEY ARE UNABLE TO SURVIVE IN THE WILD GUESTS CAN MEET A RED-TAILED HAWK, BALD EAGLE AND AN EASTERN SCREECH OWL PREVENTION OF INJURY TO WILDLIFE CAMPAIGNDURING THE EXPANSION CELEBRATION, THE CONSERVANCY ANNOUNCED A NEW PUBLIC OUTREACH CAMPAIGN, THROUGH THEIR EYES THE CAMPAIGN INTENDS FOR THE PUBLIC TO SEE LIFE THROUGH THE EYES OF SOUTHWEST FLORIDA'S WILDLIFE THE INITIATIVE'S CALL TO ACTION URGES THE COMMUNITY TO PROTECT WILDLIFE AND PRESERVE THEIR HABITATS THE CAMPAIGN WAS INSPIRED THROUGH A PARTNERSHIP BETWEEN THE CONSERVANCY AND ADVERTISING STUDENTS AT THE UNIVERSITY OF MIAMI, SCHOOL OF COMMUNICATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KEN KRIER CHAIRMAN OF BOARD	15 00	X		X				0	0	0
VAN WILLIAMS VICE CHAIRMAN	15 00	X		X				0	0	0
JAY TOMPKINS TREASURER	15 00	X		X				0	0	0
LYNNE SHOTWELL SECRETARY	5 00	X						0	0	0
LEW ALLYN DIRECTOR	5 00	X						0	0	0
DENNIS BROWN DIRECTOR	5 00	X						0	0	0
WILLIAM BOYAJIAN DIRECTOR	5 00	X						0	0	0
ED EATON DIRECTOR	5 00	X						0	0	0
THOMAS GIBSON DIRECTOR	5 00	X						0	0	0
STEPHANIE GOFORTH DIRECTOR	5 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PHIL GRESH DIRECTOR	5 00	X						0	0	0
JOHN R HALL DIRECTOR	5 00	X						0	0	0
DR JUDITH HURSHON DIRECTOR	5 00	X						0	0	0
LOIS KELLEY DIRECTOR	5 00	X						0	0	0
LORALEE LEBOEUF DIRECTOR	5 00	X						0	0	0
WAYNE MELAND DIRECTOR	5 00	X						0	0	0
GERRI MOLL DIRECTOR	5 00	X						0	0	0
KARL WILLIAMS DIRECTOR	5 00	X						0	0	0
DR KAMELA PATTON DIRECTOR	5 00	X						0	0	0
MAYELA ROSALES DIRECTOR	5 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PATSY SCHROEDER DIRECTOR	5 00	X						0	0	0
BOB SALTARELLI DIRECTOR	5 00	X						0	0	0
PHIL COLLINS DIRECTOR	5 00	X						0	0	0
TOM MORAN DIRECTOR	5 00	X						0	0	0
TUCKER TYLER DIRECTOR	5 00	X						0	0	0
NANCY WHITE DIRECTOR	5 00	X						0	0	0
JANE PEARSALL DIRECTOR	5 00	X						0	0	0
DAVE RISMILLER DIRECTOR	5 00	X						0	0	0
JOHN WALTER DIRECTOR	5 00	X						0	0	0
SUE SHULTZ DIRECTOR	5 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SHARON VON ARX DIRECTOR	5 00	X						0	0	0
LYNN SLABAUGH DIRECTOR	5 00	X						0	0	0
JOH WALTER DIRECTOR	5 00	X						0	0	0
ROB MOHER CEO	60 00			X				216,703	0	16,469
VICTORIA POLLOCK CFO	60 00			X				99,296	0	7,510
PAUL SIEFERT VP OF MARKETING	60 00			X				183,577	0	10,427

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SCHEDULE A (Form 990 or 990EZ)

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.**

▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See**section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **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.**

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.**

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.**

d ☐ **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.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . . _____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	4,802,653	4,799,475	10,554,665	6,385,623	7,050,240	33,592,656
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	4,802,653	4,799,475	10,554,665	6,385,623	7,050,240	33,592,656
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)						3,882,229
6 **Public support.** Subtract line 5 from line 4						29,710,427

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	4,802,653	4,799,475	10,554,665	6,385,623	7,050,240	33,592,656
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	221,681	233,453	299,242	293,393	232,720	1,280,489
9 Net income from unrelated business activities, whether or not the business is regularly carried on	34,237	132,833	49,780	31,775	0	248,625
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	52,034		8,642	15,158	37,055	112,889
11 **Total support.** Add lines 7 through 10						35,234,659

12 Gross receipts from related activities, etc (see instructions)	12	2,548,847

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	84 320 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	88 130 %

16a **33 1/3% support test—2015.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support test—2014.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15
16	Public support percentage from 2014 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination*	3b		
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*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	4b		
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*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) 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.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) 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.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	11c		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	1		
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		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- **b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

			Yes	No
2	Activities Test. **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	2a		
b	Did the activities described in (a) 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 but for the organization's involvement*	2b		
3	Parent of Supported Organizations. **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *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		

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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (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 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount

				Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

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).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER INCOME - 2011 AMOUNT $ 52,034 2013 AMOUNT $ 8,642 2014 AMOUNT $ 15,158 2015 AMOUNT $ 37,055

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

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

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

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

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

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

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

Name of the organization	Employer identification number
THE CONSERVANCY OF SOUTHWEST FLORIDA INC	59-1157084

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

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

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

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

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	22,147	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	24,900	
c Total lobbying expenditures (add lines 1a and 1b)	47,047	
d Other exempt purpose expenditures	5,821,990	
e Total exempt purpose expenditures (add lines 1c and 1d)	5,869,037	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	443,452	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)	110,863		
h Subtract line 1g from line 1a If zero or less, enter -0-	0		
i Subtract line 1f from line 1c If zero or less, enter -0-	0		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	465,654	487,456	434,521	443,452	1,831,083
b Lobbying ceiling amount (150% of line 2a, column(e))					2,746,625
c Total lobbying expenditures	28,701	38,944	46,603	47,047	161,295
d Grassroots nontaxable amount	116,414	121,864	108,630	110,863	457,771
e Grassroots ceiling amount (150% of line 2d, column (e))					686,657
f Grassroots lobbying expenditures		1,954	13,862	22,147	37,963

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a) Yes	(a) No	(b) Amount
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?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
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?			

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 expenditures from the prior year?	3		

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

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

Part IV Supplemental Information

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

Return Reference	Explanation

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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.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☑ Protection of natural habitat
☐ Preservation of a certified historic structure
☑ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a: 2
b	Total acreage restricted by conservation easements	2b: 10 00
c	Number of conservation easements on a certified historic structure included in (a)	2c: 0
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d:

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☑ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 350 00

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ 22,146

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

			Amount
b	If "Yes," explain the arrangement in Part XIII and complete the following table		
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

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

		(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	10,154,617	10,386,854	9,941,441	9,302,844	10,513,485
b	Contributions	111,540	503,799	330,121	263,640	16,662
c	Net investment earnings, gains, and losses	936,687	-236,036	615,292	726,957	
d	Grants or scholarships					
e	Other expenditures for facilities and programs	500,000	500,000	500,000	352,000	1,227,303
f	Administrative expenses					
g	End of year balance	10,702,844	10,154,617	10,386,854	9,941,441	9,302,844

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

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c)depreciation	(d)Book value
1a Land		579,046		579,046
b Buildings		28,408,277	5,746,028	22,662,249
c Leasehold improvements				
d Equipment		745,435	474,716	270,719
e Other		2,768,031	1,151,449	1,616,582
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				25,128,596

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) LAND HELD FOR CONSERVATION	5,065,002
(2) OTHER RECEIVABLES	221,337
(3) TRUST RECEIVABLES	8,999,774
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	14,286,113

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

1. (a) Description of liability	(b) Book value
Federal income taxes	
FACILITY DEPOSITS	3,750
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	3,750

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

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

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

1	Total revenue, gains, and other support per audited financial statements			1	7,912,854
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	825,858		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	825,858
3	Subtract line **2e** from line **1**			3	7,086,996
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	37,967		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	37,967
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	7,124,963

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	7,604,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	7,604,000
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	37,967		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	37,967
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	7,641,967

Part XIII Supplemental Information

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

Return Reference	Explanation
PART II, LINE 9	LAND HELD FOR CONSERVATION LAND HELD FOR CONSERVATION IS RECORDED AT COST WHEN PURCHASED OR AT FAIR MARKET VALUE AT THE DATE OF ACQUISITION, IF DONATED MANAGEMENT REVIEWS EACH PARCEL PERIODICALLY TO DETERMINE IF THERE HAS BEEN IMPAIRMENT TO THE VALUE THAT IS RECORDED IN THE STATEMENT OF FINANCIAL POSITION

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a

▶ Attach to Form 990 or Form 990-EZ

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www irs gov/form990*

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

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

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

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

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

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total		▶					

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

FL, PA

Part II Fundraising Events.
Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 MAGIC UNDER THE MANGROVES (event type)	(b) Event #2 RED SNOOK FISHING TOURNAMENT (event type)	(c) Other events 2 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	1,751,816	108,089	145,866	2,005,771
	2 Less Contributions	1,640,121	104,239	140,666	1,885,026
	3 Gross income (line 1 minus line 2)	111,695	3,850	5,200	120,745
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	139,784			139,784
	7 Food and beverages	137,299	1,740		139,039
	8 Entertainment				
	9 Other direct expenses	365,842	52,270	47,068	465,180
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				744,003
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-623,258

Part III Gaming.
Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

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

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ .....

Address ▶ .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶ .....

Address ▶ .....

16 Gaming manager information

Name ▶ .....

Gaming manager compensation ▶ $.....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

Return Reference	Explanation

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

▶ **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	☑ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☑ 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, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		Base (i) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROB MOHERCEO	(i)	216,703	0	0	6,111	10,358	233,172	0
	(ii)	0	0	0	0	0	0	0
2 PAUL SIEFERT VP OF MARKETING	(i)	183,577	0	0	0	10,427	194,004	0
	(ii)	0	0	0	0	0	0	0

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.

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493101004117

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

▶ Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	22	361,814	
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AUCTION ITEMS)	X	166	286,760	
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

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

		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 is not required to be used for exempt purposes for the entire holding period?		No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b	If "Yes," describe in Part II		
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

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.

Return Reference	Explanation
PART I, LINE 32B	A THIRD PARTY IS USED TO SELL CONTRIBUTED SECURITIES UPON RECEIPT

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

Return Reference	Explanation
FORM 990, PART III, LINE 4A	PROGRAM ACCOMPLISHMENTS FOR CONSERVANCY SCIENCE TEAM IN 2015-2016 - ADVANCED WORK ON RESTORATION OF MANGROVE DIE-OFF AREAS, INCLUDING AREAS NEAR GOODLAND FL - CONTINUING ONE OF THE LONGEST LOGGERHEAD SEAT TURTLE MONITORING PROGRAMS IN THE COUNTRY THIS PROGRAM INCLUDES APPLYING SATELLITE TAGS TO MONITOR SEA TURTLE TRAVEL HABITS - CONTINUE WORKING WITH OTHER ORGANIZATIONS TO MANAGE EXOTIC SPECIES, IN ORDER TO HELP LIMIT THE DESTRUCTION OF NATIVE PLANTS AND WILDLIFE. THIS INCLUDES THE TAGGING OF PYTHONS TO STUDY THEIR BEHAVIOR IN HOPES OF CONTROLLING THIS NON-NATIVE INVADER STUDY EXPANDED THIS YEAR TO INCLUDE BEHAVIORS OF PYTHON HATCHLINGS AND EMERGING EXOTIC SPECIES SUCH AS THE TEGU AND MONITOR LIZARDS - ONGOING STUDY OF WATER QUALITY PARAMETERS IN COAST SYSTEMS, AND RESEARCH AND ASSESS STORM WATER RUNOFF, WATER RESOURCE AND WATERSHEDS SEA TURTLES THE CONSERVANCY'S SEA TURTLE NESTING AND BEACH MONITORING PROGRAM ON KEEWAYDIN ISLAND IS 34 YEARS OLD THE SUMMER OF 2016 WAS ANOTHER BUSY NESTING YEAR THIS YEAR ALONE AN ESTIMATED 26,000 HATCHLINGS MADE IT SAFELY TO THE GULF FECAL SAMPLES HAVE BEEN COLLECTED FROM 31 KEMP'S RIDLEYS FOR USE IN DIET STUDIES FIFTEEN YEARS PRIOR TO CURRENT STUDY, KEMP'S RIDLEY CONSUMED SOLITARY TUNICATES (SEA SQUIRTS) AND SECONDARILY CRABS THE CURRENT STUDY HAS DOCUMENTED A SHIFT IN THE DIET WITH TURTLES INITIALLY FEEDING ON SPONGES, (WHICH HAS NEVER BEEN OBSERVED IN KEMP'S RIDLEYS), SWITCHING COLONIAL TUNICATES, AND THEN SWITCHING TO CRABS THE SHIFTING DIET IS YET ANOTHER "RIDDLE OF THE RIDLEY AND IT IS HYPOTHESIZED THAT THERE HAS BEEN SOME SORT OF DISTURBANCE IN THE TURTLE'S FEEDING GROUNDS ALTERING THE AVAILABILITY OF THEIR PREY MANGROVES THIS PROGRAM SPANS 3 DIFFERENT MANGROVE RESEARCH AND RESTORATION PROJECTS, WHICH EVALUATE RESTORATION SUCCESS IN AN AREA WHERE MANGROVES HAVE DIED OFF, HELP TO MAINTAIN HEALTHY FOREST CONDITIONS IN RESTORED FORESTS BY SPOTTING PROBLEMS EARLY, AND PERFORM RESEARCH TO ASSESS FOREST RESPONSE TO HUMAN ALTERATION WE ALSO ARE RAISING PUBLIC AWARENESS OF THESE IMPORTANT FORESTS UPON WHICH NUMEROUS FISH, BIRDS, REPTILES, AMPHIBIANS AND INVERTEBRATES DEPEND UPON DURING SOME PART OF THEIR LIVES MANGROVES, ALONG WITH SEAGRASS, FORM THE BACKBONE OF ESTUARIES AND WITHOUT THEIR PRESENCE THE WILDLIFE, INCLUDING THE FISH AND BIRDS THAT THRIVE IN THESE AREAS WILL DECLINE THIS IS WHY MANGROVE RESTORATION IS SO IMPORTANT TO OUR FUTURE, OUR ECONOMY AND OUR QUALITY OF LIFE IN YEARS TO COME THIS YEAR WE ASSESSED THE HEALTH AND VIABILITY OF 21,405 MANGROVES! WESTERN EVERGLADES PICAYUNE STRAND STATE FOREST UNDERWENT EXTENSIVE HYDROLOGIC AND ENVIRONMENTAL ALTERATION IN THE 1960'S WHEN A NETWORK OF CANALS, LEVEES, AND ROADS WERE CONSTRUCTED TO MAKE ROOM FOR THE NOW DEFUNCT SOUTHERN GOLDEN GATE ESTATES DEVELOPMENT THE RESTORATION IS ALL ABOUT RETURNING THIS AREA, AS MUCH AS POSSIBLE, TO ITS PRE-DEVELOPMENT HYDROLOGIC REGIME. THIS SHOULD RESULT IN RE-ESTABLISHMENT OF THE PRE-DEVELOPMENT PLANT AND ANIMAL COMMUNITIES IN THE AREAS DOWNSTREAM OF THE RESTORATION PROJECT CONSERVANCY BIOLOGISTS PERFORMED THE BASELINE FAUNAL STUDIES PRIOR TO RESTORATION AND NOW ARE BACK AT WORK DOCUMENTING ANY CHANGES IN AQUATIC FAUNAL AND ANURAN COMMUNITIES (FISH, AQUATIC INVERTEBRATES AND FROGS) RESULTING FROM HYDROLOGIC AND TOPOGRAPHIC RESTORATION OF THE INITIAL TWO PHASES OF THE PSRP FOR THE SOUTH FLORIDA WATER MANAGEMENT DISTRICT THIS WORK SHALL PROVIDE THE FIRST POST-CONSTRUCTION MONITORING OF AQUATIC FAUNA PLOTS THAT WE ESTABLISHED DURING THE PSRP BASELINE MONITORING EFFORT BEFORE CONSTRUCTION COMMENCED ON THE PROJECT ALTHOUGH THIS WORK HAS JUST BEGUN GIVEN THE FACT THAT WE HAVE TO KAYAK DOWN OLD TORN UP ROAD BEDS TO GET TO THE MONITORING SITES IS AN ENCOURAGING SIGN THAT SOMETHING HAPPENED! INVASIVE SPECIES MORE THAN 50 SPECIES OF NONNATIVE REPTILES ARE CURRENTLY ESTABLISHED IN FLORIDA! A GROWING COALITION OF PARTNERS INCLUDING THE CONSERVANCY OF SOUTHWEST FLORIDA, DENISON AND DAVIDSON UNIVERSITIES, ROOKERY BAY NATIONAL ESTUARINE RESEARCH RESERVE, UNITED STATES GEOLOGICAL SURVEY, THE NAPLES ZOO, FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION, UNIVERSITY OF FLORIDA, SWFL COOPERATIVE SPECIES MANAGEMENT AREA AND OTHER GROUPS HAVE BANDED TOGETHER TO DEVELOP A MANAGEMENT STRATEGY WITH THE ULTIMATE GOAL OF CONTROLLING BURMESE PYTHON POPULATION LEVELS IN SOUTHWEST FLORIDA THIS PYTHON IS OF PARTICULAR ECOLOGICAL CONCERN, AS THIS INVASIVE EXOTIC APPEARS TO BE CAUSING MASSIVE DECLINES IN A RANGE OF NATIVE MAMMAL SPECIES IN THE EVERGLADES BY DEVELOPING AND IMPLEMENTING SCIENTIFICALLY APPLIED METHODS TO LESSEN PYTHON DISPERSAL RATES AND CONTAIN THEIR POPULATION WE WILL LESSEN THE IMPACT ON OUR NATIVE WILDLIFE HERE IN SOUTHWEST FLORIDA BULLETS - 37 KEMP'S RIDLEYS CAPTURED AND TAGGED IN THE TEN THOUSAND ISLANDS SINCE SEPTEMBER 2014 - 4 TAGGED RIDLEYS HAVE BEEN RECAPTURED IN THE STUDY AREA AND 2 OF THESE TURTLES HAVE BEEN RECAPTURED TWICE - 7 KEMP'S RIDLEYS TRACKED WITH SATELLITE TELEMETRY IN 2014-15 ONE OF THESE TURTLES (OB1) HAS BEEN RECAPTURED TWICE FOLLOWING TRACKING AND ANOTHER (CASPER) WAS RECAPTURED ONCE - 9,665 JUVENILE FISH IDENTIFIED, MEASURED AND SEXED FOR VARIOUS STUDIES - 75 DIFFERENT SPECIES OF BIRDS WERE OBSERVED DURING SURVEYS IN THE UPPER GORDON RIVER - REMOVED A TON OF PYTHONS DURING DECEMBER 2015-EARLY MARCH 2016 - 21,405 MANGROVES GOT A PHYSICAL THIS YEAR

Return Reference	Explanation
FORM 990, PART III, LINE 4B	PROGRAM ACCOMPLISHMENTS FOR CONSERVANCY POLICY TEAM IN 2015-2016 POLICY LED INITIATIVES GROWTH MANAGEMENT 1 PROMOTED MORE SUSTAINABLE GROWTH IN CHARLOTTE COUNTY CHARLOTTE COUNTY PLANNING & ZONING BOARD ACCEPTS AND SUPPORTS INPUT FROM THE CONSERVANCY TO THEIR STAFF REPORT ON PROPOSED COMP PLAN AMENDMENTS INCLUDING ORETAINING BUFFERS AROUND WETLANDS AND WETLAND PROTECTIONS ORETAINING CONSERVATION LAND PROTECTIONS FOR NEIGHBORING DEVELOPMENT TO ENSURE COMPATIBILITY ODIRECTING GROWTH TO LESS ENVIRONMENTALLY SENSITIVE AREAS OHOLD MORE PUBLIC MEETINGS ON UPCOMING TRANSFERABLE DEVELOPMENT RIGHT POLICY CHANGES 2 RIVER HALL SUCCESSFULLY SUPPORTED RESIDENTS IN THEIR CHALLENGE AGAINST THE RIVER HALL COMPREHENSIVE PLAN AMENDMENT AND ACTED AS THEIR EXPERT PLANNING WITNESS DURING THE ADMINISTRATIVE HEARING PROCESS 3 LEE COUNTY DENSITY REDUCTION/GROUNDWATER RESOURCE (DR/GR) AREA ENVIRONMENTAL ENHANCEMENT AND PRESERVATION COMMUNITIES OVERLAY SUCCESSFULLY ADVOCATED PROPOSED DEVELOPMENTS WITHIN THIS OVERLAY BE DESIGNED TO PROVIDE INCREASED HYDROLOGICAL AND WILDLIFE HABITAT BENEFITS 4 COLLIER 2040 LONG RANGE TRANSPORTATION PLAN SERVED AS A NON-VOTING MEMBER OF THE COLLIER METROPOLITAN PLANNING ORGANIZATION'S (MPO) TECHNICAL ADVISORY COMMITTEE AND WORKED WITH THE MPO TO INCLUDE LANGUAGE IN THE LONG RANGE TRANSPORTATION PLAN IDENTIFYING THE NEED TO FURTHER STUDY APPROPRIATE ROAD ALIGNMENTS WITHIN THE AREAS OF NORTH BELLE MEADE AND CR951 5 LEE COUNTY'S CONSERVATION 20/20 PINE LAKES PRESERVE PROVIDED INFORMATION TO THE LEE COUNTY SCHOOL BOARD REGARDING THE INCOMPATIBILITY OF PLACING THE NEW BONITA SPRINGS HIGH SCHOOL WITHIN PINE LAKES PRESERVE, WHICH RESULTED IN THE SCHOOL BOARD ELIMINATING THIS CONSERVATION LAND FROM CONSIDERATION 6 GORDON RIVER GREENWAY WORKED WITH THE CITY OF NAPLES AND THE NAPLES AIRPORT AUTHORITY TO AMEND THE AIRPORT'S CONSERVATION EASEMENT, FOR WHICH THE CONSERVANCY IS A GRANTEE, TO ACCOMMODATE A NEW PEDESTRIAN BRIDGE WHILE MAINTAINING THE ECOLOGICAL INTEGRITY OF THE PRESERVE 7 EASEMENT AND SETTLEMENT DEFENSE CONTINUE TO ENSURE ACTIVITIES WITHIN AREAS PROTECTED BY CONSERVANCY-HELD EASEMENTS OR SETTLEMENTS ARE CONSISTENT WITH THE TERMS AND INTENT OF THESE AGREEMENTS, INCLUDING THE DELTONA SETTLEMENT AGREEMENT OIL & GAS 8 FIRST FRACKING SUMMIT HELD IN FLORIDA PRESENTERS CAME FROM ALL OVER THE COUNTRY IN THIS 2 DAY EVENT OVER 100 ATTENDEES INCLUDING LOCAL AND STATE ELECTED LEADERS ATTENDED AND COMMENTED FAVORABLY ABOUT THE EVENT RESULTED IN RAISING COMMUNITY AND POLICY MAKER AWARENESS, AS WELL AS INCREASED MEDIA AND POLITICAL PRESSURE 9 BAD OIL BILL DEFEATED WEAK AND DEFICIENT OIL BILLS THAT WERE ON FAST TRACK IN THE HOUSE AND SENATE KILLED THANKS TO A SOPHISTICATED MULTI-PRONG STRATEGY AND EFFORT, WE WERE ABLE TO ENSURE THAT LEGISLATION THAT PURPORTS TO PROTECT THE ENVIRONMENT BUT ACTUALLY DOES NOT, WILL NOT MOVE FORWARD LEGISLATORS ARE NOW BETTER EDUCATED (INCL FAMILIAR WITH MATRIX ACIDIZING AND HOW THAT DIFFERS FROM "FRACKING" ETC) WATER 10 CONSERVANCY SUPPORTS PASSAGE OF LEGACY FLORIDA CONSERVANCY SUPPORTED, THROUGH ISSUING ACTION ALERTS, OP EDS AND LOBBYING IN TALLAHASSEE FOR EVERGLADES ACTION DAY, FOR THE PASSAGE OF LEGACY FLORIDA THIS BILL DEDICATES 25% OR 200 MILLION DOLLARS OF AMENDMENT 1 TO EVERGLADES RESTORATION FOR YEARS TO COME 11 MARCO ISLAND APPROVES A FERTILIZER ORDINANCE CITY OF MARCO ISLAND PASSES A FERTILIZER ORDINANCE INITIATED BY CONSERVANCY STAFF THAT PROTECTS OUR LOCAL WATERS FROM EXCESS NITROGEN AND PHOSPHORUS POLLUTION DURING FERTILIZATION OF LAWNS 12 WATER BILL LEGISLATION REVIEWED LENGTHY 140+ PAGE WATER BILLS FROM 2015 AND 2016 LEGISLATIVE SESSIONS OPROVIDED COMMENTS TO LEGISLATURE AND MET WITH STATE LEGISLATORS IN TALLAHASSEE AND LOCALLY OISSUED TWO ALERTS FOR CONSERVANCY MEMBERS TO TAKE ACTION IN ADVANCE OF COMMITTEE AND FLOOR VOTES OSUCCESSFULLY ADVOCATED FOR A STUDY OF BEST MANAGEMENT PRACTICES AND IMPLEMENTATION OF BMP VERIFICATION PROGRAM WILDLIFE 13 CONSERVANCY SUCCESSFULLY CONTRIBUTED TO A POSTPONEMENT OF THE BLACK BEAR HUNT IN 2016 NOT ONLY DID THE CONSERVANCY PROVIDE COMMENT LETTERS, PATRICIATE IN MEETINGS AND WEBINARS, DRIVING UP TO THE PANHANDLE TO GIVE COMMENTS, BUT ALSO REACHED OUT TO EXTERNAL BEAR BIOLOGISTS TO PROVIDE A REVIEW OF THE AGENCY'S BASIS FOR THE HUNT THE CONSERVANCY ALSO REQUESTED THE FWC TO PRESENT A SUITE OF DIFFERENT OPTIONS, PAVING THE WAY FOR THE COMMISSIONERS TO VOTE ON OPTION 3 FOR A MORATORIUM TO FOCUS ON OTHER BEAR MANAGEMENT ISSUES 14 BOAT RAMP THAT WOULD HAVE BEEN TERRIBLE FOR MANATEES WAS REMOVED FROM ARGO MANATEE PLAN AND AN ADDITIONAL 11 ACRES OF UPLANDS WERE PERMANENTLY CONSERVED 15 FWC IMPERILED SPECIES MANAGEMENT PLAN IMPROVED TO REMOVE USE OF SINGLE USE NEST REMOVAL POLICY ON BURROWING OWLS, AND TO REQUIRE ALL AVOIDANCE MEASURES BE IMPLEMENTED PRIOR TO USE OF AVERSIVE CONDITIONING 16 CONSERVANCY INPUT CREATES BETTER REVIEW OF COLLIER HCP USFWS RESPONDED TO CONCERNS RAISED BY CONSERVANCY AND DECIDED NOT TO HIRE OUTSIDE CONSULTANT TO REVIEW THE EASTERN COLLIER HABITAT CONSERVATION PLAN (HCP) AFTER ALL INSTEAD, THEY HIRED NEW STAFF PERSONNEL TO ENSURE THAT THE HCP WAS REVIEWED BY AN INTERNAL STAFF PERSON 17 REDUCED IMPACTS TO BIG CYPRESS NATIONAL PRESERVE BURNETT SEISMIC SURVEY STAGING AREAS MOVED OUT OF WETLANDS WITHIN THE PRESERVE AND INTO OFFSITE UPLANDS 18 CONSERVATION LAND ACQUISITION CONSERVATION 20/20 SUCCESSFULLY ADVOCATED TO MOVE 579 ACRE PROPERTY IN THE LEE DR/GR AND ADJACENT TO CORKSCREW SWAMP SANCTUARY TO THE APPRAISAL AND NEGOTIATION PHASE SUCCESSFULLY ADVOCATED FOR THE REMOVAL OF THE "ASKING PRICE" FROM 20/20 NOMINATION FORM TO RE-EMPHASIZE REVIEWING NOMINATIONS FOR ENVIRONMENTAL CRITERIA, NOT PRICE ASKED FOR SUCCESSFULLY WORKED WITH LEE BCC AND COUNTY STAFF TO MAKE IMPROVEMENTS TO DRAFT 2016 BALLOT REFERENDUM LANGUAGE TO ENSURE STAYS CONSISTENT WITH CURRENT ORDINANCE

Return Reference	Explanation
FORM 990, PART III, LINE 4C	PROGRAM ACCOMPLISHMENTS FOR CONSERVANCY EDUCATION TEAM IN FY 2014-2015 STEM EDUCATION NUMBERS # OUTREACH PROGRAMS 128 # STUDENTS REACHED IN THEIR SCHOOLS 3,816 # FIELD TRIPS 196 # STUDENTS ONSITE 3,454 # ADULT EDUCATION PROGRAMS 27 # ADULTS REACHED ON FORMAL EDUCATION PROGRAMS 519 # COMMUNITY EVENTS ATTENDED 17 # COMMUNITY MEMBERS REACHED 2,916 KIDS FREE SATURDAYS OVER 1,200 PEOPLE VISITED THE CONSERVANCY'S NATURE CENTER ON SATURDAYS DURING THE MONTHS OF JULY AND AUGUST FOR KIDS FREE SATURDAYS EACH SATURDAY FEATURED A DIFFERENT NATURE THEME, AND FAMILIES WERE ENCOURAGED TO COME BACK WEEK AFTER WEEK TO LEARN ABOUT THE OLYMPIC ATHLETES OF THE ANIMAL WORLD, HOW INVASIVE SPECIES ARE TAKING OVER FLORIDA, AND THE BRILLIANT BIRDS THAT RELY ON SOUTHWEST FLORIDA HABITATS FOR SURVIVAL COMMUNITY SUPPORT THE CONSERVANCY'S EDUCATION TEAM IS FORTUNATE TO BE SUPPORTED BY NUMEROUS CORPORATE AND FAMILY FOUNDATIONS THIS FINANCIAL SUPPORT ENABLES THE TEAM TO PROVIDE HIGH QUALITY, IMPACTFUL ENVIRONMENTAL EDUCATION PROGRAMS TO UNDERSERVED CHILDREN AND YOUTH ACROSS SOUTHWEST FLORIDA THANKS TO A GRANT FROM THE NAPLES CHILDREN AND EDUCATION FOUNDATION, THE CONSERVANCY PARTNERED WITH THE NAPLES BOTANICAL GARDEN TO OFFER AN EXTENDED SUMMER CAMP EXPERIENCE TO 32 CHILDREN FROM AVALON AND SHADOWLAWN ELEMENTARY SCHOOLS SCHOLARSHIPS WERE PROVIDED TO ALL CHILDREN, SO THAT THEY COULD ATTEND CAMP AT NO COST THESE CAMPERS, AGES 7-10, SPENT TWO WEEKS IN THE CONSERVANCY'S AWARD WINNING SUMMER CAMP, WHERE THEY MET BECAME CRITTER SCENE INVESTIGATORS AND GOPHER TORTOISE BIOLOGISTS, "TRACKED" AN ENDANGERED FLORIDA PANTHER ON THE TRAILS, DISCOVERED AQUATIC LIFE IN THE FILTER MARSH, TOOK A BOAT RIDE ON THE GORDON RIVER, AND LEARNED HOW FEMALE SEA TURTLES DIG THEIR NESTS ON FLORIDA BEACHES THE IMPACT WAS ENORMOUS PARENTS REPORTED THAT NOT ONLY DID THEIR CHILDREN COME HOME WITH AN APPRECIATION FOR NATURE, BUT THE CAMPS HELPED THEIR CHILDREN MAKE NEW FRIENDS, BE MORE ACTIVE AND HEALTHY, AND OVERCOME SHYNESS! PNC FOUNDATION GRANT EXPANDS PRE-K PROGRAM OFFERINGS THE CONSERVANCY IS COMMITTED TO PROVIDING HIGH QUALITY ENVIRONMENTAL EDUCATION PROGRAMS TO CHILDREN OF ALL AGES RECOGNIZING THE VALUE OF EARLY CHILDHOOD EDUCATION, THE CONSERVANCY SECURED FUNDING FROM THE PNC FOUNDATION TO EXPAND THE ORGANIZATION'S PRE-K PROGRAMS THIS $28,000 GRANT ENABLED THE EDUCATION TEAM TO CREATE AND OFFER THREE NEW PRE-K OUTREACH PROGRAMS, TERRIFIC TURTLES, AWESOME ALLIGATORS, AND SLITHER, SLITHER SNAKE. DESIGNED TO ENGAGE YOUNG CHILDREN WITH ANIMALS AND NATURE, THE CONSERVANCY'S PRE-K OUTREACH PROGRAMS IMPACTED 952 PRE-K STUDENTS IN 2015-16 ADDITIONALLY, DUE TO THE INCREDIBLE SUCCESS OF THE LITTLE EXPLORERS PROGRAM, THE EDUCATION TEAM USED THE GRANT TO CREATE NEW PROGRAMS AND DOUBLE THE NUMBER OF PROGRAMS OFFERED THROUGHOUT THE YEAR - REACHING 237 CHILDREN AND 194 PARENTS FINALLY, WITH HUNDREDS OF YOUNG CHILDREN AND THEIR FAMILIES PLAYING IN THE LITTLE EXPLORER PLAY ZONE, GRANT FUNDS WERE USED TO ADD ADDITIONAL INTERACTIVE COMPONENTS TO THE SPACE, GIVING CHILDREN THE OPPORTUNITY TO INVESTIGATE WILDLIFE TRACKS, DISCOVER ANIMAL HABITATS, AND DRESS UP LIKE THEIR FAVORITE WILD ANIMAL STUDIES HAVE SHOWN THAT NATURE-BASED PLAY IS EXTREMELY VALUABLE FOR HEALTHY CHILDHOOD DEVELOPMENT AND LAYS THE FOUNDATION FOR YOUNG CHILDREN TO BECOME THE FUTURE CONSERVATIONISTS WE NEED CONSERVANCY HOSTS HIGH SCHOOL MARINE SCIENCE FILM FESTIVAL IN PARTNERSHIP WITH COLLIER COUNTY PUBLIC SCHOOLS, DISCOVERY EDUCATION, AND ROOKERY BAY NATIONAL ESTUARINE RESEARCH RESERVE, THE CONSERVANCY EDUCATION TEAM WORKED WITH MARINE SCIENCE STUDENTS AT BARRON COLLIER AND NAPLES HIGH SCHOOLS TO CREATE DOCUMENTARY FILMS FOCUSED ON ENVIRONMENTAL ISSUES IN SOUTHWEST FLORIDA THE TOP TEN FILMS WERE SHOWN AT A MARINE SCIENCE FILM FESTIVAL IN EATON CONSERVATION HALL IN SPRING 2016, DRAWING OVER 100 STUDENTS, PARENTS, AND SCHOOL ADMINISTRATORS TO THE CONSERVANCY CAMPUS FOR AN ENGAGING EVENING SHOWCASING STUDENTS' CREATIVITY AND PASSION FOR ENVIRONMENTAL CONSERVATION FGCU INTERNSHIP PROGRAM THIS YEAR MARKED THE FIRST FULL YEAR OF THE CONSERVANCY'S INTERNSHIP PROGRAM FOR UNDERGRADUATE STUDENTS AT FLORIDA GULF COAST UNIVERSITY THESE SEMESTER-LONG INTERNSHIPS PROVIDE UNIQUE OPPORTUNITIES FOR STUDENTS TO OBTAIN REAL-WORLD CAREER EXPERIENCE IN THE ENVIRONMENTAL EDUCATION FIELD STUDENTS COMMIT TO GIVING 150 HOURS OF THEIR TIME TO THE CONSERVANCY, LEARNING HOW TO BE EFFECTIVE EDUCATORS, CARE FOR AND PRESENT WILDLIFE AMBASSADORS, AND DEVELOP CURRICULUM BASED LESSONS FOR K-12 STUDENTS ASPIRING TO BE ENVIRONMENTAL EDUCATORS, BIOLOGISTS, OR CLASSROOM TEACHERS, THESE STUDENTS GAIN VALUABLE SKILLS AND EXPERIENCE AT THE CONSERVANCY, HELPING TO LAUNCH THEIR CAREERS IN ENVIRONMENTAL FIELDS A FAREWELL TO BETSY AND A WELCOME TO LUNA! THE CONSERVANCY SAID A FINAL FAREWELL TO BETSY, THE LOGGERHEAD SEA TURTLE IN MARCH 2016 AFTER SERVING AS AN AMBASSADOR FOR HER SPECIES IN THE DALTON DISCOVERY CENTER FOR TWO YEARS, BETSY WAS RELEASED NEAR THE TEN THOUSAND ISLANDS TO CONTINUE HER JOURNEY TO ADULTHOOD SHE WAS FITTED WITH FLIPPER AND PIT TAGS BEFORE BEING RELEASED - WE HOPE TO SEE HER AGAIN IN TWENTY YEARS WHEN SHE RETURNS TO THE BEACH TO LAY A NEST OF HER OWN THIS SPECIAL TURTLE WAS NAMED AFTER THE LATE BETSY SANDSTROM, A LONG-TIME SEA TURTLE ADVOCATE AND VOLUNTEER FOR THE BONITA SPRINGS / FORT MYERS BEACH ORGANIZATION TURTLE TIME FOLLOWING BETSY'S RELEASE, THE CONSERVANCY WELCOMED LUNA TO THE AMBASSADOR TEAM THIS NEW LOGGERHEAD SEA TURTLE WAS PART OF A LONG-TERM SEA TURTLE RESEARCH STUDY CONDUCTED BY FLORIDA ATLANTIC UNIVERSITY SHE WILL LIVE AT THE CONSERVANCY UNTIL SHE GROWS LARGE ENOUGH TO BE RELEASED

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE IS MADE UP OF THE COB, VICE CHAIR, SECRETARY, TREASURER, CHAIR OF EAC, CHAIR OF DEVELPMENT COMMITTEE, CHAIR OF MEMBERSHIP AND MARKETING COMMITTEE, CHAIR OF BOARD GOVERNANCE COMMITTEE, AND CHAIR OF EDUCATION COMMITTEE THE EXECUTIVE COMMITTEE SHALL MEET REGULARLY IN THE "OFF SEASON OR UPON CALL BY THE BOARD CHAIR, TO REVIEW AND ACT ON MATTERS BETWEEN BOARD MEETINGS IT SHALL HAVE THE FULL POWER TO ACT FOR AND IN PLACE OF THE BOARD AS PROVED BY FLORIDA LAW

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION IS MADE UP OF MEMBERS WHO PAY DUES ALL MEMBERS HAVE THE SAME RIGHTS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS ELECT THE BOARD OF DIRECTORS DURING THE ANNUAL MEETING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	BUDGET AND FINANCE COMMITTEE WILL REVIEW THE 990, THE 990 WILL BE MADE AVAILABLE TO ALL BOARD MEMBERS PRIOR TO FILING, ALL QUESTIONS AND CONCERNS WILL BE BROUGHT TO BUDGET & FINANCE FOR FINAL REVIEW SUBSEQUENT TO FILING THE AUDIT COMMITTEE WILL REVIEW

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	WE DISTRIBUTE CONFLICT OF INTEREST STATEMENTS FOR BOARDMEMBERS TO SIGN AT BEGINNING OF YEAR AT EACH MEETING, COMMITTEE OR OTHERWISE, WE ANNOUNCE THE AGENDA AND THEN ASK IF ANYONE HAS A CONFLICT WITH ANY ITEMS IF YES, THEY EXCUSE THEMSELVES FROM DISCUSSION AND VOTE ON SAID ITEM

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THERE IS A COMPENSATION COMMITTEE THAT MEETS AND RECOMENDS SALARIES TO THE BOARD THE BOARD PERFORMS A COMPARATIVE STUDY TO LOCAL, STATEWIDE AND NATIONAL ORGANIZATIONS OF COMPARABLE SIZE AND COMPLEXITY

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	APPRECIATION OF SPLIT INTEREST AGREEMENT & TRUST RECEIVABLE 784,987

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE CONSERVANCY OF SOUTHWEST FLORIDA INC

Employer identification number
59-1157084

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TCI PEACEFUL HORSE LLC 1496 SMITH PRESERVE WAY NAPLES, FL 34102 99-9999999	N/A	FL			THE CONSERVANCY OF SOUTHWEST FLORIDA

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No

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

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

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

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

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

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

		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)	1b		
c Gift, grant, or capital contribution from related organization(s)	1c		
d Loans or loan guarantees to or for related organization(s)	1d		
e Loans or loan guarantees by related organization(s)	1e		
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	1i		
j Lease of facilities, equipment, or other assets to related organization(s)	1j		
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o Sharing of paid employees with related organization(s)	1o		
p Reimbursement paid to related organization(s) for expenses	1p		
q Reimbursement paid by related organization(s) for expenses	1q		
r Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

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