

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

OMB No 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019

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

C Name of organization LANCASTER COUNTY CONSERVANCY
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite 117 SOUTH WEST END AVENUE
City or town, state or province, country, and ZIP or foreign postal code LANCASTER, PA 176033396

D Employer identification number 23-7046908
E Telephone number (717) 392-7891

F Name and address of principal officer PHILIP WENGER 117 SOUTH WEST END AVENUE LANCASTER, PA 176033396

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
H(c) Group exemption number

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

J Website: WWW.LANCASTERCONSERVANCY.ORG

K Form of organization Corporation Trust Association Other

L Year of formation 1969

M State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE MISSION OF THE LANCASTER COUNTY CONSERVANCY IS "PROVIDING WILD AND FORESTED LANDS AND CLEAN WATERWAYS FOR OUR COMMUNITY FOREVER" THE CHARITABLE PURPOSES OF THE LANCASTER COUNTY CONSERVANCY INCLUDE PRESERVATION OF NATURAL LANDS, ECOSYSTEMS, LANDSCAPES AND WATERWAYS FOR FUTURE GENERATIONS CONSERVANCY PRESERVES ARE OPEN TO THE PUBLIC 365 DAYS A YEAR, SUN UP TO SUN DOWN OUR WORK RESULTS IN PROTECTION OF CRITICAL WILDLIFE CORRIDORS, RECREATION LANDS, WATER RESOURCES, AND PRESERVES MATURE FORESTS THAT CLEAN OUR AIR AND WATER WE WORK WITH NATIONAL, REGIONAL AND LOCAL PARTNERS TO PROTECT THE SPECIAL PLACES WITHIN LANCASTER COUNTY AND ALONG ITS STREAMS AND RIVERS THIS EFFORT ALSO TAKES US INTO YORK, CHESTER AND DAUPHIN COUNTIES WITH A FOCUS ON LAND, WATER AND COMMUNITY

Table with 3 columns: Description, 3, 4, 5, 6, 7a, 7b. Rows include: 2 Check this box, 3 Number of voting members, 4 Number of independent voting members, 5 Total number of individuals employed, 6 Total number of volunteers, 7a Total unrelated business revenue, 7b Net unrelated business taxable income.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants, 9 Program service revenue, 10 Investment income, 11 Other revenue, 12 Total revenue, 13 Grants and similar amounts paid, 14 Benefits paid to or for members, 15 Salaries, other compensation, 16a Professional fundraising fees, 16b Total fundraising expenses, 17 Other expenses, 18 Total expenses, 19 Revenue less expenses.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets, 21 Total liabilities, 22 Net assets or fund balances.

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 PHILIP WENGER PRESIDENT/CEO
Date 2020-07-29

Paid Preparer Use Only
Print/Type preparer's name Preparer's signature Date
Firm's name MCKONLY & ASBURY LLP Firm's EIN 23-1909723
Firm's address 415 FALLOWFIELD ROAD Phone no (717) 761-7910
CAMP HILL, PA 17011

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

THE MISSION OF THE LANCASTER COUNTY CONSERVANCY IS "PROVIDING WILD AND FORESTED LANDS AND CLEAN WATERWAYS FOR OUR COMMUNITY FOREVER" THE CHARITABLE PURPOSES OF THE LANCASTER COUNTY CONSERVANCY INCLUDE PRESERVATION OF NATURAL LANDS, ECOSYSTEMS, LANDSCAPES AND WATERWAYS FOR FUTURE GENERATIONS CONSERVANCY PRESERVES ARE OPEN TO THE PUBLIC 365 DAYS A YEAR, SUN UP TO SUN DOWN OUR WORK RESULTS IN PROTECTION OF CRITICAL WILDLIFE CORRIDORS, RECREATION LANDS, WATER RESOURCES, AND PRESERVES MATURE FORESTS THAT CLEAN OUR AIR AND WATER WE WORK WITH NATIONAL, REGIONAL AND LOCAL PARTNERS TO PROTECT THE SPECIAL PLACES WITHIN LANCASTER COUNTY AND ALONG ITS STREAMS AND RIVERS THIS EFFORT ALSO TAKES US INTO YORK, CHESTER AND DAUPHIN COUNTIES WITH A FOCUS ON LAND, WATER AND COMMUNITY

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 \$ 312,069 including grants of \$) (Revenue \$ 18,836)
See Additional Data

4b (Code) (Expenses \$ 676,267 including grants of \$ 54,739) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ 262,209 including grants of \$) (Revenue \$)
See Additional Data

(Code) (Expenses \$ 219,131 including grants of \$) (Revenue \$)

PROGRAM 4 - CLEAN WATER PROGRAM FORESTS RECHARGE GROUNDWATER RESOURCES AND REDUCE EROSION ON UNPROTECTED OR DEVELOPED SOIL, WHICH IN TURN REDUCES RUNOFF INTO OUR STREAMS AND WATERWAYS TREE CANOPY ALSO HELPS SLOW RAINDROPS BEFORE THEY HIT THE GROUND, WHICH KEEPS THE SOIL INTACT TREE ROOTS ABSORB AND FILTER WATER BEFORE RELEASING IT BACK INTO THE AIR PROTECTING FORESTS PREVENTS LAND FROM BECOMING A SOURCE OF POLLUTION LANCASTER WATER WEEK IN ITS THIRD YEAR BROUGHT TOGETHER OVER 30 PARTNERS AND SPONSORS FOR A COMMUNITY CLEAN WATER FESTIVAL THE GOAL FROM THE BEGINNING HAS BEEN TO CREATE AWARENESS AROUND THE IMPORTANCE OF CLEAN WATER IN OUR 1,400 MILES OF STREAMS AND RIVERS LANCASTER CONSERVANCY 2019 WATER WEEK HIGHLIGHTS- TURKEY HILL DAIRY PRESENTING SPONSOR- 30 PARTNERS & SPONSORS- 22 WATER WEEK EVENTS- 5,500 COMMUNITY PARTICIPANTS- 1,200 NATIVE TREES DISTRIBUTED- 30 ESTABLISHMENTS SOLD CRICK OR CREEK IPA BY ST BONIFACE BREWING CO - \$50,000 OF SPONSORSHIP DOLLARS WENT TO THE CLEAN WATER FUND AT LANCASTER COUNTY COMMUNITY FOUNDATION, IN PARTNERSHIP WITH LANCASTER CLEAN WATER PARTNERS

4d Other program services (Describe in Schedule O)
(Expenses \$ 219,131 including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 1,469,676

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	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		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		No
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		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		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	Yes	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		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	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	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		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		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		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		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		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		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		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)		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	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		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding organizational reporting and compliance.

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 []

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding IRS filings and gaming.

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

<p>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</p>	<p>2a _____ 19</p>	<p>2b</p>	<p>Yes</p>
<p>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)</p>		<p>2b</p>	<p>Yes</p>
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>		<p>3a</p>	<p>No</p>
<p>b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O</p>		<p>3b</p>	
<p>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)?</p>		<p>4a</p>	<p>No</p>
<p>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)</p>			
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>		<p>5a</p>	<p>No</p>
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>		<p>5b</p>	<p>No</p>
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>		<p>5c</p>	
<p>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?</p>		<p>6a</p>	<p>No</p>
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>		<p>6b</p>	
<p>7 Organizations that may receive deductible contributions under section 170(c).</p>			
<p>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?</p>		<p>7a</p>	<p>Yes</p>
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>		<p>7b</p>	<p>Yes</p>
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>		<p>7c</p>	<p>No</p>
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	<p>7d _____</p>		
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>		<p>7e</p>	<p>No</p>
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>		<p>7f</p>	<p>No</p>
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>		<p>7g</p>	
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>		<p>7h</p>	
<p>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?</p>		<p>8</p>	
<p>9 Sponsoring organizations maintaining donor advised funds.</p>			
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>		<p>9a</p>	
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>		<p>9b</p>	
<p>10 Section 501(c)(7) organizations. Enter</p>			
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	<p>10a _____</p>		
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<p>10b _____</p>		
<p>11 Section 501(c)(12) organizations. Enter</p>			
<p>a Gross income from members or shareholders</p>	<p>11a _____</p>		
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	<p>11b _____</p>		
<p>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</p>			
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	<p>12b _____</p>	<p>12a</p>	
<p>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</p>			
<p>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</p>		<p>13a</p>	
<p>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</p>	<p>13b _____</p>		
<p>c Enter the amount of reserves on hand</p>	<p>13c _____</p>		
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>		<p>14a</p>	<p>No</p>
<p>b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O</p>		<p>14b</p>	
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>		<p>15</p>	<p>No</p>
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>		<p>16</p>	<p>No</p>

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 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	18	
1b	Enter the number of voting members included in line 1a, above, who are independent	18	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		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?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	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	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	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?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed PA
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024-A 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
 PHILLIP R WENGER PRESIDENT & CEO 117 S WEST END AVENUE LANCASTER, PA 17603 (717) 392-7891

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.

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

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

(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			
(1) ANDREA CAMPBELL BOARD MEMBER/SECRETARY	5 00	X					0	0	0	
(2) ALAN S PETERSON MD BOARD MEMBER	5 00	X					0	0	0	
(3) JENNIFER LAUVER BOARD MEMBER	5 00	X					0	0	0	
(4) CARL PIKE PHD BOARD MEMBER	5 00	X					0	0	0	
(5) ANDRES ZORILLA BOARD MEMBER	5 00	X					0	0	0	
(6) CURTIS L MILLER BOARD MEMBER/TREASURER	5 00	X		X			0	0	0	
(7) MARK W KAISER BOARD MEMBER	5 00	X					0	0	0	
(8) JOHN MCGRANN BOARD MEMBER/ PAST BOARD CHAIR	5 00	X		X			0	0	0	
(9) CHRISTOPHER GINDER BOARD MEMBER	5 00	X					0	0	0	
(10) JULIE L JONES MD BOARD MEMBER	5 00	X					0	0	0	
(11) DAVID SHENK BOARD MEMBER	5 00	X					0	0	0	
(12) JAMIE MORRISON BOARD MEMBER	5 00	X					0	0	0	
(13) JAMIE ROTTMUND BOARD MEMBER	5 00	X					0	0	0	
(14) JOHN F PYFER JR BOARD MEMBER/ BOARD CHAIR	5 00	X		X			0	0	0	
(15) J MICHAEL FLANAGAN BOARD MEMBER	5 00	X					0	0	0	
(16) SPIKE BRANT BOARD MEMBER	5 00	X					0	0	0	
(17) DR SARA LAMICHANE BOARD MEMBER	5 00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
(18) ALEX SNYDER ESQUIRE BOARD MEMBER	5 00	X						0	0	0
(19) PHILIP R WENGER PRESIDENT/CEO	40 00			X				141,500	0	10,491
(20) KATHIE S GONICK IN-HOUSE COUNSEL/SVP LAND PROTECTION	40 00					X		123,200	0	5,067
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								264,700	0	15,558

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? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **0**

Part VIII Statement of Revenue

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

		(A) 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	390,310		
	d Related organizations	1d			
	e Government grants (contributions)	1e	925,097		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,308,187		
	g Noncash contributions included in lines 1a - 1f \$	1g	655,020		
	h Total. Add lines 1a-1f		7,623,594		

Program Service Revenue			(A)	(B)	(C)	(D)
		Business Code				
2a PRESERVE MANAGEMENT IN		900099	18,836	18,836		
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f.			18,836			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		178,038			178,038		
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	6a	(i) Real					
			(ii) Personal					
			b Less rental expenses	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss)							
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities					
			(ii) Other					
			b Less cost or other basis and sales expenses	7b				
			c Gain or (loss)	7c				
	d Net gain or (loss)							
	8a Gross income from fundraising events (not including \$ 390,310 of contributions reported on line 1c) See Part IV, line 18	8a		120,265				
			b Less direct expenses	8b	212,406			
			c Net income or (loss) from fundraising events		-92,141		-92,141	
	9a Gross income from gaming activities See Part IV, line 19	9a						
			b Less direct expenses	9b				
			c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	10a						
b Less cost of goods sold			10b					
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	Business Code							
11a OTHER REVENUE	900099	44,416	44,416					
b								
c								
d All other revenue								
e Total. Add lines 11a-11d		44,416						
12 Total revenue. See instructions		7,772,743	63,252	0	85,897			

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	54,739	54,739		
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	280,258	208,216	26,384	45,658
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	661,828	491,701	62,306	107,821
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	171,326	127,308	15,934	28,084
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	15,853		15,853	
c Accounting	82,115	31,900	50,215	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	18,328		18,328	
14 Information technology				
15 Royalties				
16 Occupancy	73,761	73,761		
17 Travel	323		323	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	201	201		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	73,202	63,671	9,531	
23 Insurance	22,475	14,305	8,170	
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 MISCELLANEOUS	124,384	121,871	1,830	683
b LUFC	83,038	83,038		
c OTHER EXPENSES	70,390			70,390
d HOUSE EXPENSE	56,034	56,034		
e All other expenses	192,412	142,931	39,122	10,359
25 Total functional expenses. Add lines 1 through 24e	1,980,667	1,469,676	247,996	262,995
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,545	1	1,545
	2 Savings and temporary cash investments	1,134,793	2	862,246
	3 Pledges and grants receivable, net	2,404,407	3	2,784,703
	4 Accounts receivable, net		4	
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	15,222	9	34,893
	10a Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	10a 44,835,045		
	b Less accumulated depreciation	10b 616,494	37,030,817	10c 44,218,551
	11 Investments—publicly traded securities	5,468,510	11	6,301,672
	12 Investments—other securities—See Part IV, line 11	1,162,016	12	1,277,827
	13 Investments—program-related—See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets—See Part IV, line 11	1,281,669	15	303,048
16 Total assets. Add lines 1 through 15 (must equal line 34)	48,498,979	16	55,784,485	
Liabilities	17 Accounts payable and accrued expenses	73,593	17	91,456
	18 Grants payable		18	
	19 Deferred revenue	413,302	19	277,920
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability—Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	219,894	23	820,000
	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	6,345	25	5,450
	26 Total liabilities. Add lines 17 through 25	713,134	26	1,194,826
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	40,051,714	27	46,523,958
	28 Net assets with donor restrictions	7,734,131	28	8,065,701
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	47,785,845	32	54,589,659	
33 Total liabilities and net assets/fund balances	48,498,979	33	55,784,485	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,772,743
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,980,667
3	Revenue less expenses Subtract line 2 from line 1	3	5,792,076
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	47,785,845
5	Net unrealized gains (losses) on investments	5	1,001,009
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	10,729
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	54,589,659

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain 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?
- 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

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

Additional Data

Software ID:

Software Version:

EIN: 23-7046908

Name: LANCASTER COUNTY CONSERVANCY

Form 990 (2019)

Form 990, Part III, Line 4a:

PROGRAM 1 - LAND PROTECTION AND ACQUISITION PROTECTING OUR LAND FOREVER SOME LANDS ARE SO BEAUTIFUL, SO RARE, AND SO NATURAL THAT THEY MUST BE PROTECTED FOR ALL TO ENJOY THE CONSERVANCY HAS BEEN INCREDIBLY BUSY PROTECTING LAND THIS YEAR MANY OF THESE PROJECTS TOOK OVER SEVEN YEARS TO GET TO THE FINISH LINE WE ARE REALLY EXCITED THAT OUR TEAM COMPLETED PROJECTS THAT INCREASED OUR LANDS FOR PUBLIC USE BY NEARLY 20% TO A TOTAL OF 6,346 ACRES OF PUBLICLY ACCESSIBLE OPEN SPACE IN 2019, WE ACQUIRED 966 ACRES OF NEW NATURAL LANDS WORTH \$6.5 MILLION DOLLARS PROTECTING FRAGMENTS OF REMNANT FORESTS AND WEAVING THEM INTO A TAPESTRY OF CORRIDORS FOR WILDLIFE AND RECREATION CONOY WETLANDS NATURE PRESERVE 49 ACRE ADDITION THIS 49-ACRE TRACT HUGS THE NORTHWEST RIVER TRAIL AND PROVIDES A BEAUTIFUL WOODED BACKDROP FOR AN EASY HIKE OR BIKE RIDE THE TRAIL CONNECTS THIS NEW PROPERTY TO THE 22-ACRE CONOY WETLANDS NATURE PRESERVE IT HOSTS ABOUT 20 ACRES OF MITIGATED WETLANDS, PROVIDING HABITAT FOR NUMEROUS NATIVE SPECIES FUNDING PARTNERS-PA DCNR, PINE TREE CONSERVATION SOCIETY, BROOKFIELD RENEWABLE, HIGH FOUNDATION, AND LCSWMA WELSH MOUNTAIN NATURE PRESERVE 23 ACRE ADDITION THIS ENTIRELY FORESTED 23-ACRE ADDITION INCREASES OUR LARGEST PRESERVE TO 940 BEAUTIFUL ACRES WELSH MOUNTAIN NATURE PRESERVE SITS IN THE PENNSYLVANIA HIGHLANDS REGION, PART OF THE FEDERALLY-RECOGNIZED HIGHLANDS GREENBELT THE NEW ACQUISITION BORDERS BOTH THE PRESERVE AND MONEY ROCKS COUNTY PARK FUNDING PARTNERS-PA DCNR, WELSH MOUNTAIN FUND (WITH CONTRIBUTIONS FROM CAERNARVON, EAST EARL, AND SALISBURY TOWNSHIPS, CHESTER COUNTY SOLID WASTE AUTHORITY, AND PRIVATE DONORS), RESSLER MILL FOUNDATION, LANCASTER COUNTY, LANCASTER COUNTY COMMUNITY FOUNDATION, AND PENN'S WOODS FUND KELLYS RUN NATURE PRESERVE 10 ACRE ADDITION LOCATED ON THE NORTH SIDE OF KELLYS RUN NATURE PRESERVE, THIS 10-ACRE ADDITION MAKES UP A CRITICAL BUFFER BETWEEN THE INTERIOR FOREST AND PINNACLE RD W IT CONTAINS TWO BEAUTIFUL STREAMS AND A MIXED OAK FOREST FUNDED BY PRIVATE DONORS, THIS PROPERTY IS PART OF A PA DCNR GRANT APPLICATION TO PROTECT ADDITIONAL LANDS WITHIN THE CONSERVATION LANDSCAPE FUNDING PARTNERS-HIGH FOUNDATION, 2019 DINE ON HARVEST MOON SPECIAL APPEAL, PART OF A 2020 PA DCNR GRANT WIZARD RANCH 246 ACRE THE 246-ACRE WIZARD RANCH PROPERTY IS PART OF THE HELLAM HILLS CONSERVATION AREA THIS FORMER BOY SCOUT CAMP HOSTS 1.5 MILES OF STREAMS AND A MIX OF FORESTED AND MEADOW HABITAT STAY TUNED AS WE CONTINUE TO RESTORE HABITAT AND MAKE IMPROVEMENTS FOR RECREATION ACQUISITION AND STEWARDSHIP FUNDING WAS PROVIDED BY THE CONSERVATION FUND THROUGH A WILLIAMS FUNDED MITIGATION GRANT THIS PROPERTY WILL SERVE AS A MATCH FOR A 2020 DCNR GRANT TO PROTECT AN ADDITIONAL 270 ACRES HELLAM HILLS NATURE PRESERVE 576 ACRE ADDITION TALK ABOUT A LEGACY - THIS 576-ACRE FORESTED TRACT'S FOR-SALE SIGN SPARKED THE INITIATIVE TO PRESERVE OVER 1,000 ACRES OF THE HELLAM HILLS' WITH ITS ACQUISITION IN DECEMBER 2019, HELLAM HILLS NATURE PRESERVE GREW TO 724 ACRES, PRESERVING DUGAN RUN, WILDCAT RUN, AND ALL THE CRITICAL HABITAT WITHIN FUNDING PARTNERS-THE CONSERVATION FUND, PA DCNR, CLARK FOUNDATION, POWDER MILL FOUNDATION, J WILLIAM WAREHIME FOUNDATION, HANOVER FOUNDATION, ANN BARSHINGER, YORK COUNTY, DON & INGRID GRAHAM, DON NIKOLAUS, HIGH FOUNDATION, YORK COUNTY COMMISSIONER DOUG HOKE, SUSAN BYRNES, MEG SWARTZ, AND MORE! OTTER CREEK NATURE PRESERVE 2 ACRES SEEING FIRSTHAND THE DAMAGE OF FLASH FLOODING, WHEN THIS 2-ACRE PROPERTY ALONG OTTER CREEK CAME ON THE MARKET LAST YEAR WE KNEW HOW CRITICAL IT WAS TO PRESERVE DESPITE ITS SMALL SIZE, THIS PROPERTY PACKS IN THE CONSERVATION VALUE IT CONTAINS HEMLOCKS AND MATURE SASSAFRAS AND EXCELLENT STREAM ACCESS FUNDING FOR THIS WAS THROUGH PRIVATE DONATIONS AS PART OF THE PENN'S WOODS FUND BROOKFIELD/PPL PROJECT CELEBRATION 60 ACRES (485 ACRES WILL BE COMPLETED IN 2020) ALMOST 30 YEARS AGO, AN AMBITIOUS EFFORT BEGAN TO RECOGNIZE AND PROTECT THE SUSQUEHANNA RIVERLANDS CONSERVATION LANDSCAPE, WITH A STUDY CONDUCTED BY THE CONSERVATION FUND (TCF) AND PA DCNR AS A RESULT OF THAT STUDY ALMOST 20 YEARS AGO, A PARTNERSHIP FORMED INCLUDING TCF, PA DCNR, THE CONSERVANCY, LANCASTER COUNTY, YORK COUNTY, PPL, FEDERAL, STATE, AND LOCAL AGENCIES AND NON-PROFITS, AND SUSQUEHANNA HERITAGE THIS YEAR THE PARTNERS GATHERED AT PINNACLE OVERLOOK, NOW PERMANENTLY PROTECTED BY THIS PROJECT, TO CELEBRATE THIS WORK AND THE LANDSCAPE IT PROTECTS THAT NOW INCLUDES 4,596 ACRES OF PROTECTED PUBLIC LANDS PARTNERS AND FUNDING-PA DCNR, THE CONSERVATION FUND, BROOKFIELD RENEWABLE, PPL, TALEN ENERGY, LANCASTER COUNTY, AND YORK COUNTY

Form 990, Part III, Line 4b:

PROGRAM 2 - LAND STEWARDSHIP RESTORE OUR LAND OUR JOB DOES NOT END ONCE THE LAND IS PURCHASED THAT IS JUST THE BEGINNING OUR STEWARDSHIP TEAM UNDERTAKES THE VERY DELIBERATE AND TIME-CONSUMING PROCESS OF INCORPORATING EACH NEW TRACT OF LAND INTO AN OVERALL LAND MANAGEMENT PLAN FOR OUR PRESERVES THIS IS A GREAT RESPONSIBILITY, ESPECIALLY IN A FRAGMENTED LANDSCAPE SUCH AS LANCASTER COUNTY WHERE ONLY 16% OF OUR LAND REMAINS FORESTED AND WHERE OUR TRAILHEAD PARKING AREAS FILL UP AS THE DEMAND FOR BEAUTIFUL NATURAL PLACES TO ESCAPE TO TESTS THE CAPACITY OF OUR PRESERVES THE CONSERVANCY, IN ACTIVELY MANAGING OUR 6,346 ACRES OF NATURAL LANDS, UNDERSTANDS THE RESPONSIBILITY AND ITS CHALLENGES THOROUGHLY INVESTING IN PROJECTS THAT SPAN THE SPECTRUM FROM HABITAT RESTORATION TO VISITOR READINESS, THE CONSERVANCY HOPES TO HAVE THE POWER TO INSPIRE BOTH A RESPECT FOR NATURE AND A PASSION FOR CONSERVATION THE CONSERVANCY'S 46 NATURE PRESERVES ON OVER 6,346 ACRES ARE OPEN TO THE PUBLIC 365 DAYS OF THE YEAR FROM SUNRISE TO SUNSET, FOREVER WELSH MOUNTAIN INVASIVE MANAGEMENT WELSH MOUNTAIN IS A RELIC OF PENN'S WOODS, A DEFINING LANDMARK IN EASTERN LANCASTER COUNTY AS A LONE FOREST RISING ABOVE AN EXPANSE OF BUCOLIC FARMLAND IN RESPECTS TO HABITAT AND SPECIES DIVERSITY, WELSH MOUNTAIN IS AN ISLAND AND ITS ISOLATION IS ITS UNIQUENESS BUT ALSO ITS WEAKNESS THE CONSERVANCY IS ADDRESSING AN ONSLAUGHT OF NATIVE AND INVASIVE PATHOGENS, INCLUDING OAK DECLINE AND SPOTTED LANTERN FLY, SNOWBALLING INTO A FORMIDABLE OPPONENT OF A FORESTED ISLAND MOUNTAIN TOP PARTNERS & FUNDING- USDA, PA BUREAU OF FORESTRY, PENN STATE UNIVERSITY, LANCASTER COUNTY PARKS AND RECREATION PGC COOPERATIVE AGREEMENT CONSERVANCY NATURE PRESERVES ARE ONLY OPEN TO HUNTING ONCE THEY ARE ENROLLED WITHIN COOPERATIVE AGREEMENT WITH THE PENNSYLVANIA GAME COMMISSION (PGC). IN 2019, THE CONSERVANCY AND PGC NEGOTIATED A SERIES OF NEW CONTRACTS THAT ALLOWED FOR 4,340 ACRES ACROSS 28 NATURE PRESERVES TO BE OPENED JUST IN TIME FOR WHITE-TAILED DEER SEASON THE CONSERVANCY HAS AT LEAST ONE PRESERVE OPEN FOR PUBLIC HUNTING IN EVERY PGC DISTRICT IN WHICH IT OWNS LAND PARTNER-PENNSYLVANIA GAME COMMISSION TROTTER CREEK NATURE PRESERVE CLEAN UP 2019 PROGRESS -100 CUBIC YARDS OF DEBRIS-4 DUMPSTERS-800 VOLUNTEER HOURS WE'RE ALL FAMILIAR WITH THE EVENT ISOLATED STORM-CELLS DROPPING AN UNPRECEDENTED AMOUNT OF RAIN IN A MATTER OF MINUTES AND WE'RE ALL FAMILIAR WITH THE STORY FLASHFLOODS PILED HIGH BEHIND DEBRIS DAMS RAGED THROUGH THE HOMES OF A SMALL HOLLOW IN SOUTHERN YORK COUNTY HUNDREDS OF CONSERVANCY VOLUNTEERS ARE INTIMATELY FAMILIAR WITH THE AFTERMATH THE EVERYDAY ITEMS OF PEOPLE'S LIVES STREWN ACROSS THREE MILES OF PRISTINE FLOODPLAIN WITH SEVERELY LIMITED AND GRAVELY CHALLENGING ACCESS MAKING CLEAN-UP SOLELY A HANDS-ON TASK WE ARE ONLY HALF-WAY COMPLETE AND WILL NEED YOUR HELP MONTHLY AS SOON AS VOLUNTEER DAYS RESUME PPL EARTH DAY EVENT AT POLLINATOR PARK FOR THE SECOND YEAR IN A ROW, PPL BROUGHT 50 OF ITS EMPLOYEES OUT ON EARTH DAY TO ASSIST WITH THE RESTORATION PROJECT KNOWN AS THE POLLINATOR PARK AT KELLYS RUN THE POLLINATOR PARK IS THE TRAILHEAD TO THE POPULAR KELLYS RUN TRAIL AND A SIGNIFICANT GATEWAY FOR THE 66-MILE LONG CONESTOGA TRAIL FROM HERE THE CONESTOGA TRAIL RUNS, UNINTERRUPTED BY ROADS OR DEVELOPMENT, FOR NINE STUNNINGLY-BEAUTIFUL MILES OF SINGLE-TRACK TRAIL PPL'S HEAVY EQUIPMENT OPERATORS REMOVED DILAPIDATED INFRASTRUCTURE, THEIR SAWYERS PRUNED LANDSCAPE TREES AND FELLED HAZARD TREES, AND THEIR OFFICE STAFF PLANTED AN ADDITIONAL 150 SAPLINGS OF FLOWERING, UNDERSTORY TREES PARTNER & FUNDING-PPL ELECTRIC UTILITIES TURKEY HILL TRAIL WORK THE CONSERVANCY HOSTED A HIGH-SCHOOL-AGED CONSERVATION CREW FROM THE OUTDOOR CORPS, A COLLABORATION BETWEEN THE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES AND THE STUDENT CONSERVATION ASSOCIATION THE CREW JOINED CONSERVANCY STAFF FOR EIGHT DAYS OF HANDS-ON LEARNING TOGETHER WE ADDRESSED EROSION THROUGH BUILDING TRAIL INFRASTRUCTURE INCLUDING CRIB STEPS, CHECK STEPS, AND WATER BARS ON THE FIRST SECTION OF THE TURKEY HILL TRAIL TRAIL ENTHUSIASTS AND CONSERVANCY SUPPORTERS TOOK NOTICE AND FLOCKED TO OUR SOCIAL MEDIA WITH SMILEY FACES, THUMBS UP, AND HEARTS PARTNERS & FUNDING-PA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES, THE STUDENT CONSERVATION ASSOCIATION SALVAGE HARVEST AT DONEGAL HIGHLANDS & BELLAIRE WOODS ASH TREES ARE SUCCUMBING TO THE INVASIVE EMERALD ASH BORER (EAB) AT A RAPID PACE THESE STANDING SNAGS BECOME HAZARDS IN POPULAR PRESERVES BUT DECAYING TREES ARE TYPICALLY NOT MARKETABLE AND A GOOD MARKET VALUE FOR AN ASH TREE AFFECTED BY EAB IS A VERY BRIEF WINDOW THE CONSERVANCY QUICKLY ASSESSED ITS PORTFOLIO OF PRESERVES AND PURSUED SALVAGE HARVESTS (OF ONLY ASH) ON THE DONEGAL HIGHLANDS AND BELLAIRE WOODS NATURE PRESERVES THE CONSERVANCY HOSTED A TIMBER HARVESTING WORKSHOP ON SITE TO EDUCATE THE COMMUNITY ABOUT THE PROCESS THE INCOME GENERATED FROM THE SALVAGE HARVESTS IS RESERVED FOR SUPPORTING THE NEXT GENERATION OF TREES WITH HIGH-HABITAT VALUE AND INCREASED SPECIES DIVERSITY ON THE VERY PRESERVES IN WHICH IT CAME PARTNERS & FUNDING-ALLIANCE FOR THE CHESAPEAKE BAY MASON-DIXON TRAIL REROUTE EVEN BEFORE THE CONSERVANCY ACQUIRED OWNERSHIP OF THE FORMER MARIETTA GRAVITY WATER COMPANY PROPERTY, IT WAS WORKING WITH THE CONSERVATION FUND AND THE MASON-DIXON TRAIL SYSTEM TO PREPARE TO BRING VISITORS ONTO THE PROPERTY A NEW SECTION OF THE MASON-DIXON TRAIL NOW TRAVERSES THE NEW NATURE PRESERVE FROM THE SHORE OF THE RIVER TO THE HIGHLIGHTS OF THE RIDGELINE, THIS FOUR-MILE LONG SECTION TAKES THE MASON-DIXON TRAIL OFF OF THE ROAD AND PUTS IT INTO THE HEART OF THE HELLAM HILLS PARTNERS & FUNDING | THE CONSERVATION FUND, MASON DIXON TRAIL SYSTEMS SUSQUEHANNA RIVERLANDS STRATEGIC PLAN IN 2019, THE SUSQUEHANNA RIVERLANDS PARTNERSHIP, LED BY THE CONSERVANCY, COMPLETED A STRATEGIC PLANNING PROCESS WHICH HONED THE SCOPE OF THE PARTNERSHIP TO THREE AREAS LAND PROTECTION, ACCESS, STEWARDSHIP, AND CONNECTIVITY, AND OUTREACH THE PLAN BROUGHT FORWARD THE ADDITIONAL LAND- PLANNING AND LAND-MANAGEMENT PARTNERS NEEDED TO ADVANCE COMPREHENSIVE CONSERVATION GOALS ACROSS THE SUSQUEHANNA RIVER CORRIDOR PARTNERS & FUNDING | PA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES

Form 990, Part III, Line 4c:

PROGRAM 3 - EDUCATION AND COMMUNITY ENGAGEMENT ENGAGING OUR COMMUNITY OVER THE PAST SEVERAL YEARS THE CONSERVANCY HAS DELIBERATELY CULTIVATED COMMUNITY FOCUSED EVENTS THAT SERVE AS A WAY TO BRING MANY OF OUR NON-PROFIT AND FOR-PROFIT PARTNERS TOGETHER TO ENGAGE THE GENERAL PUBLIC AND EXPAND AWARENESS ABOUT THE CONSERVANCY'S WORK BEYOND OUR TRADITIONAL LAND TRUST SUPPORTERS ALL OF OUR COMMUNITY ENGAGEMENT WORK LEADS US BACK TO OUR PRESERVES AND IN 2019 WE FOCUSED ON CREATING MORE OPPORTUNITIES TO INVITE YOU TO PARTICIPATE, LEARN, AND VOLUNTEER IN THESE WILD PLACES VOLUNTEERS IN ACTION NATURE PRESERVE VOLUNTEER WORKDAYS - 217 VOLUNTEERS- 20 VOLUNTEER WORKDAYS- 1,184 HOURS OF VOLUNTEER SERVICE FROM HAULING DEBRIS OUT OF OTTER CREEK NATURE PRESERVE TO PULLING UP INVASIVE GARLIC MUSTARD AT SHENKS FERRY, THE SUPPORT OF OUR VOLUNTEERS IS CRITICAL TO THE CARE OF OUR PRESERVES WE'RE GRATEFUL FOR ALL THE VOLUNTEERS, ORGANIZATIONS AND GROUPS WHO GOT OUTSIDE, GOT DIRTY AND GOT WORK DONE THIS PAST YEAR! THANK YOU! WATER QUALITY VOLUNTEER COALITION- 30 VOLUNTEERS- 1,070 HOURS OF VOLUNTEER SERVICE- 18 STREAM TESTING SITES EVERY MONTH, TRAINED VOLUNTEERS GATHER DATA FROM MULTIPLE TESTING SITES AT STREAMS THROUGHOUT SOUTHERN LANCASTER COUNTY THEIR WORK PROVIDES MUCH NEEDED INFORMATION TO OUR PARTNERS AT THE LANCASTER COUNTY CONSERVATION DISTRICT, WHO LEAD THE COUNTY WIDE STREAM TESTING EFFORT THANK YOU, VOLUNTEERS, FOR YOUR COMMITMENT TO HEALTHY STREAMS AND RIVERS! PARTNER - LANCASTER COUNTY CONSERVATION DISTRICT COMMUNITY WILDLIFE HABITAT- 38 TRAINED VOLUNTEERS- 143 SITE ASSESSMENTS- 55 PROPERTIES CERTIFIED THROUGH NATIONAL WILDLIFE FEDERATION COMMUNITY WILDLIFE HABITAT STEWARDS WORK WITH LOCAL PROPERTY OWNERS, SCHOOLS AND COMMUNITIES TO ENCOURAGE THE PLANTING OF NATIVE PLANTS AND TREES AS WELL AS GARDENS THAT REDUCE STORMWATER RUNOFF WHILE PROVIDING HABITAT THAT WILL BENEFIT WILDLIFE AND ATTRACT POLLINATORS ONCE INSTALLED THESE GARDENS CAN BE CERTIFIED BY THE NATIONAL WILDLIFE FEDERATION WITH A CRITICAL MASS OF CERTIFIED GARDENS THE GOAL IS TO CREATE CORRIDORS FOR WILDLIFE TO THRIVE AND HAVE THE ENTIRE COUNTY OF LANCASTER CERTIFIED AS A COMMUNITY WILDLIFE HABITAT PARTNER - NATIONAL WILDLIFE FEDERATION WELSH MOUNTAIN BIO BLITZ- 24 HOURS OF SCIENCE- 333 SPECIES IDENTIFIED DEDICATED SCIENCE TEAMS COMPRISED OF EXPERTS AND STUDENTS FROM MILLERSVILLE UNIVERSITY AND MANY OF OUR COMMUNITY PARTNERS SPENT 24 HOURS SEARCHING OUR BEAUTIFUL 940 ACRE WELSH MOUNTAIN NATURE PRESERVE FOR SPECIES OF PLANTS, FUNGI, AND ANIMALS! THE EVENT ALSO INCLUDED FAMILY-FRIENDLY ACTIVITIES TO LEARN MORE ABOUT THE RICH BIOLOGY OF THIS NATURE PRESERVE PARTNERS - MILLERSVILLE UNIVERSITY, PA MASTER NATURALISTS, DONEGAL TROUT UNLIMITED, ALLIANCE FOR THE CHESAPEAKE BAY EDUCATIONAL PROGRAMMING AT CLIMBERS RUN- 1,020 MIDDLE SCHOOL STUDENT VISITORS- 80 TIMBERNOOK SUMMER CAMP PARTICIPANTS- 3 BOY SCOUT SERVICE PROJECTS CLIMBERS RUN NATURE CENTER AND PRESERVE SERVE AS THE HUB FOR OUR ENGAGEMENT AND OUTREACH EFFORTS THROUGH INCREDIBLE EDUCATION PARTNERS FROM THE RESTORED TROUT STREAM, TO WOODED TRAILS, AND FLOURISHING RAIN GARDENS, THIS IS A SPECIAL PLACE FOR OUR COMMUNITY TO PLAY, DISCOVER, AND LEARN ABOUT NATURE! PARTNERS - SCHOOL DISTRICT OF LANCASTER, NORTH BAY, EXCENTIA TIMBERNOOK OF LANCASTER, BOY SCOUTS OF AMERICA, CHESAPEAKE BAY FOUNDATION, PENN MANOR SCHOOL DISTRICT, LANCASTER COUNTRY DAY SCHOOL WORKSHOPS & HIKES- 13 HIKES & WORKSHOPS AT CONSERVANCY NATURE PRESERVES- 242 PARTICIPANT FROM WINTER TREE IDENTIFICATION TO BUILDING BAT BOXES TO THE HISTORY OF WELSH MOUNTAIN, OUR COMMUNITY JOINED US FOR IMMERSIVE EXPERIENCES AT OUR NATURE PRESERVES TO CONNECT AND LEARN ABOUT NATURE! WE'RE GRATEFUL TO THE MANY LOCAL EXPERTS AND PARTNERS WHO SHARED THEIR KNOWLEDGE AND PASSION ALONG THE WAY! PARTNERS - ALLIANCE FOR THE CHESAPEAKE BAY, MILLERSVILLE UNIVERSITY, PA MASTER NATURALIST, WATER QUALITY VOLUNTEER COALITION, BAT CONSERVATION AND MANAGEMENT INC SUSQUEHANNA RIVERLANDS 2019 MINI-GRANTS PROGRAM IN 2019, THE SUSQUEHANNA RIVERLANDS PARTNERSHIP WAS PLEASED TO AWARD \$50,000 IN MINI-GRANTS TO FIVE ORGANIZATIONS ENGAGED IN PROJECTS THAT ADVANCE THE MISSION, VISION AND GOALS OF THE PARTNERSHIP THESE PROJECTS RANGE FROM ENHANCED RAIL-TRAIL ACCESS HUBS TO HISTORIC PRESERVATION TO WATER QUALITY IMPROVEMENT WE LOOK FORWARD TO SEEING THESE PROJECTS REACH COMPLETION IN 2020 PARTNERS & FUNDING - PA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
LANCASTER COUNTY CONSERVANCY

Employer identification number
23-7046908

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 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 agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - 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- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	1,251,941	7,394,182	3,529,483	3,511,403	7,623,594	23,310,603
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	1,251,941	7,394,182	3,529,483	3,511,403	7,623,594	23,310,603
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)						2,716,923
6	Public support. Subtract line 5 from line 4						20,593,680

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	1,251,941	7,394,182	3,529,483	3,511,403	7,623,594	23,310,603
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	131,854	123,972	138,112	168,310	178,038	740,286
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	56,828	78,533	36,626	22,671	44,416	239,074
11	Total support. Add lines 7 through 10						24,289,963
12	Gross receipts from related activities, etc. (see instructions)					12	323,240

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 2019 (line 6, column (f) divided by line 11, column (f))	14	84.780 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	79.600 %

16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. 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 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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 12a or 12b 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	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 I of Schedule L (Form 990 or 990-EZ).		
	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 9a) 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 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	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		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (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? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
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 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 23-7046908

Name: LANCASTER COUNTY CONSERVANCY

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

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2019

Open to Public Inspection

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

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
LANCASTER COUNTY CONSERVANCY

Employer identification number
23-7046908

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

	(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	71
b Total acreage restricted by conservation easements	888 00
c Number of conservation easements on a certified historic structure included in (a)	0
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	0

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0
- 4** Number of states where property subject to conservation easement is located ▶ 1
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 100 00
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 6,000
- 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**

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

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	35,936	40,141	36,424	35,462	37,610
b Contributions				1,010	
c Net investment earnings, gains, and losses	5,075	-2,708	5,172	1,376	-196
d Grants or scholarships	1,785	1,497	1,455	1,424	1,402
e Other expenditures for facilities and programs					
f Administrative expenses					550
g End of year balance	39,226	35,936	40,141	36,424	35,462

- 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 ▶ 100 000 %
- 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

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)	Yes	
3a(ii)		No
3b		

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		43,699,095		43,699,095
b Buildings				
c Leasehold improvements				
d Equipment		256,679	176,301	80,378
e Other		879,271	440,193	439,078
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				44,218,551

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	5,450

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	8,784,481
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	1,001,009
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	10,729
e	Add lines 2a through 2d	2e	1,011,738
3	Subtract line 2e from line 1	3	7,772,743
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	7,772,743

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	1,980,667
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	1,980,667
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	1,980,667

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
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 23-7046908
Name: LANCASTER COUNTY CONSERVANCY

Supplemental Information

Return Reference	Explanation
PART II, LINE 9	THE CONSERVANCY HOLDS CONSERVATION EASEMENTS ON VARIOUS PROPERTIES IN LANCASTER COUNTY THA T ARE DESIGNED TO PROHIBIT THE DEVELOPMENT OR ALTERATION OF THE PROPERTY IN ANY WAY INCONS ISTENT WITH THE EASEMENT ALTHOUGH CONSERVATION EASEMENTS BRING SIGNIFICANT VALUE TO THE C ONSERVANCY'S PURPOSE, THEY HAVE NO FINANCIAL VALUE, OTHER THAN THE DIRECT ACQUISITION COST S FOR THIS REASON, ONLY DIRECT COSTS INCURRED TO ACQUIRE EASEMENTS ARE CAPITALIZED, WHERE AS DONATED CONSERVATION EASEMENTS ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS THE CONSE RVANCY ALSO HOLDS A CONSERVATION INTEREST IN THE FORM OF A LEASE THE LEASE IS BEING RENEW ED ON A YEAR-TO-YEAR BASIS AND PAYMENTS ARE EXPENSED AS THEY ARE PAID THE CONSERVANCY HAS THE ONGOING COMMITMENT TO ENSURE THE PRESERVATION AND MAINTENANCE OF ITS CONSERVATION INT ERESTS ALTHOUGH THE AMOUNTS FOR LAND HELD IN FEE ARE SHOWN AS UNRESTRICTED NET ASSETS IN THE STATEMENT OF FINANCIAL POSITION, IT IS THE CONSERVANCY'S INTENTION TO HOLD THEM INDEFI NITELY IN MOST CASES, THE CONSERVANCY WOULD NEED TO OBTAIN THE PERMISSION OF THE ORIGINAL FUNDER FROM WHICH THE GRANT OR CONTRIBUTION PROCEEDS USED TO PURCHASE THE LAND HELD IN FE E WERE RECEIVED BEFORE SELLING A PARCEL OF LAND AS OF DECEMBER 31, 2019, THE CONSERVANCY HELD THE FOLLOWING CONSERVATION INTERESTS CARRYING AMOUNT ACREAGE LAND HELD IN FEE \$43,69 9,095 6,367 CONSERVATION EASEMENTS HELD DIRECTLY 35,525 559 INDIRECTLY 23,938 379 TOTAL \$4 3,758,558 LEASES, CONSERVATION LAND USE 67 TOTAL ACRES HELD IN FEE OR EASEMENTS 7,372

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	<p>THE CONSERVANCY ACQUIRES CONSERVATION INTERESTS IN LAND, INCLUDING LAND HELD IN FEE, CONSERVATION EASEMENTS, AND LEASEHOLD INTERESTS IN LAND BY DONATION AND PURCHASE. LAND PURCHASED AND HELD IN FEE IS RECORDED AT COST. LAND HELD IN FEE THAT IS RECEIVED BY DONATION IS RECORDED AT FAIR VALUE AT THE DATE OF DONATION. DONATED LAND, TOTALING APPROXIMATELY 88 ACRES, RECEIVED PRIOR TO DECEMBER 31, 1991, IS NOT RECORDED IN THE FINANCIAL STATEMENTS BECAUSE NO APPRAISAL WAS PERFORMED AT THE TIME OF THE DONATION TO OBTAIN THE FAIR MARKET VALUE OF THE PROPERTY. THE CONSERVANCY HOLDS CONSERVATION EASEMENTS ON VARIOUS PROPERTIES IN LANCASTER COUNTY THAT ARE DESIGNED TO PROHIBIT THE DEVELOPMENT OR ALTERATION OF THE PROPERTY IN ANY WAY INCONSISTENT WITH THE EASEMENT. ALTHOUGH CONSERVATION EASEMENTS BRING SIGNIFICANT VALUE TO THE CONSERVANCY'S PURPOSE, THEY HAVE NO FINANCIAL VALUE, OTHER THAN THE DIRECT ACQUISITION COSTS. FOR THIS REASON, ONLY DIRECT COSTS INCURRED TO ACQUIRE EASEMENTS ARE CAPITALIZED, WHEREAS DONATED CONSERVATION EASEMENTS ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS. THE CONSERVANCY ALSO HOLDS A CONSERVATION INTEREST IN THE FORM OF A LEASE. THE LEASE IS BEING RENEWED ON A YEAR-TO-YEAR BASIS AND PAYMENTS ARE EXPENSED AS THEY ARE PAID. THE CONSERVANCY HAS THE ONGOING COMMITMENT TO ENSURE THE PRESERVATION AND MAINTENANCE OF ITS CONSERVATION INTERESTS. ALTHOUGH THE AMOUNTS FOR LAND HELD IN FEE ARE SHOWN AS UNRESTRICTED NET ASSETS IN THE STATEMENT OF FINANCIAL POSITION, IT IS THE CONSERVANCY'S INTENTION TO HOLD THEM INDEFINITELY. IN MOST CASES, THE CONSERVANCY WOULD NEED TO OBTAIN THE PERMISSION OF THE ORIGINAL FUNDER FROM WHICH THE GRANT OR CONTRIBUTION PROCEEDS USED TO PURCHASE THE LAND HELD IN FEE WERE RECEIVED BEFORE SELLING A PARCEL OF LAND.</p>

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE CONSERVANCY IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) THE CONSERVANCY ADHERES TO THE PROVISIONS OF FASB ASC 740, INCOME TAXES ASC 740 ESTABLISHES RULES FOR RECOGNIZING AND MEASURING TAX POSITIONS TAKEN IN AN INCOME TAX RETURN, INCLUDING DISCLOSURES OF UNCERTAIN TAX POSITIONS (UTPS) ASC 740 MANDATES THAT COMPANIES EVALUATE ALL MATERIAL INCOME TAX POSITIONS FOR PERIODS THAT REMAIN OPEN UNDER APPLICABLE STATUTES OF LIMITATION, AS WELL AS POSITIONS EXPECTED TO BE TAKEN IN FUTURE RETURNS THE UTP RULES THEN IMPOSE A RECOGNITION THRESHOLD ON EACH TAX POSITION A COMPANY CAN RECOGNIZE AN INCOME TAX BENEFIT ONLY IF THE POSITION HAS A "MORE LIKELY THAN NOT" (I E , MORE THAN 50 PERCENT) CHANCE OF BEING SUSTAINED ON THE TECHNICAL MERITS FOR THE YEARS ENDED DECEMBER 31, 2019 AND 2018, THE CONSERVANCY HAS TAKEN NO MATERIAL TAX POSITIONS ON ITS APPLICABLE TAX FILINGS THAT DO NOT MEET THE "MORE LIKELY THAN NOT" THRESHOLD AS A RESULT, NO AMOUNT FOR UTPS HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS MANAGEMENT BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2016

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 10,729

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

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
LANCASTER COUNTY CONSERVANCY

Employer identification number
23-7046908

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.
- | | |
|---|---|
| <p>a <input type="checkbox"/> Mail solicitations</p> <p>b <input type="checkbox"/> Internet and email solicitations</p> <p>c <input type="checkbox"/> Phone solicitations</p> <p>d <input type="checkbox"/> In-person solicitations</p> | <p>e <input type="checkbox"/> Solicitation of non-government grants</p> <p>f <input type="checkbox"/> Solicitation of government grants</p> <p>g <input type="checkbox"/> Special fundraising events</p> |
|---|---|
- 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 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
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

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

		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events
		<u>DINNER/AUCTION</u> (event type)	<u>EXTRAORDINARY GIVE</u> (event type)	(total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	208,525	302,050		510,575
	2 Less Contributions	88,260	302,050		390,310
	3 Gross income (line 1 minus line 2)	120,265			120,265
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	25,402	18,720		44,122
	8 Entertainment				
	9 Other direct expenses	126,914	41,370		168,284
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				212,406
11 Net income summary Subtract line 10 from line 3, column (d) ▶				-92,141	

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))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶					

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

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

b If "No," explain _____

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

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in
- | | | |
|----------|-----------------------------|---|
| a | The organization's facility | % |
| b | An outside facility | % |

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 provide any additional information. See instructions.

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

OMB No 1545-0047

2019

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Name of the organization
LANCASTER COUNTY CONSERVANCY

Employer identification number
23-7046908

Part I General Information on Grants and Assistance

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference

Explanation

Additional Data

Software ID:
Software Version:
EIN: 23-7046908
Name: LANCASTER COUNTY CONSERVANCY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LANCASTER COUNTY REDEVELOPMENT AUTHORITY 28 PENN SQUARE SUITE 200 LANCASTER, PA 17603	23-6050625		14,759				MARIETTA TRAILHEAD
MARIETTA RESTORATION ASSOCIATES PO BOX 3 MARIETTA, PA 17547			7,260				SUSQUEHANNA RIVERLANDS VIDEO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DONEGAL TROUT UNLIMITED PO BOX 8001 LANCASTER, PA 17604			20,970				DRUMORE TWP PARK REMEDICATION
DELTA BOROUGH 101 COLLEGE AVE DELTA, PA 17314			5,000				HISTORIC PARK BUILDING ASSESSMENT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

Name of the organization
LANCASTER COUNTY CONSERVANCY

Employer identification number
23-7046908

Part I Questions Regarding Compensation

	Yes	No								
<p>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</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	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 on Line 1a?	2									
<p>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</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization										
a Receive a severance payment or change-of-control payment?	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? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No								
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? If "Yes," on line 5a or 5b, describe in Part III	5b	No								
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? If "Yes," on line 6a or 6b, describe in Part III	6b	No								
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 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 accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	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 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
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2019

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
LANCASTER COUNTY CONSERVANCY

Employer identification number
23-7046908

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other	X	4	655,020	APPRAISAL
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

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

	Yes	No
30a		No
31		No
32a		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 nonstandard contributions?

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

b If "Yes," describe in Part II

33 If the organization didn't 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
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SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

**Open to Public
Inspection**

Department of the Treasury

Name of the organization

LANCASTER COUNTY CONSERVANCY

Employer identification number

23-7046908

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	MEMBERS ARE DEFINED IN THE BYLAWS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS VOTE ON CHANGES TO THE BY-LAWS AND ELECTION OF THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	CHANGES TO THE BY-LAWS ONLY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	A COPY OF THE FORM 990 AND RELATED SCHEDULES IS REVIEWED BY THE AUDIT COMMITTEE, THE BOARD AND PRESIDENT & CEO BEFORE IT IS FILED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS MUST MAKE ANY CONFLICT KNOWN AND REFRAIN FROM DISCUSSIONS AND VOTING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	AVAILABLE PUBLIC DATA WAS RESEARCHED, A HUMAN RESOURCE PROFESSIONAL WAS CONSULTED AND COMPENSATION WAS REVIEWED WITH AND APPROVED BY THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 10,729