# "PUBLIC INSPECTION COPY"

# DO NOT FILE WITH THE INTERNAL REVENUE SERVICE

## Form **990**

EXTENDED TO NOVEMBER 15, 2024

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.

and ending

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning

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

Open to Public

B	Check if applicable	C Name of organization		D Employer identif	ication number
	□Addre		<b>17</b>		
F	chang Name chang		Y	36-37274	176
F	lnitial return		Room/suite	E Telephone number	
F	Final return	D O BOX 352	1100111/3ulto	815-337-	
	termin ated			G Gross receipts \$	1,208,342.
	Ameno			H(a) Is this a group	
	Applic			for subordinate	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates	
T	Гах-ех	empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) 4947(a)(1) of the status is $(3.5)$	or 527	1 ' '	a list. See instructions
	Websit			H(c) Group exemption	
K	orm of	organization: X Corporation Trust Association Other	<b>L</b> Year	of formation: 1990	M State of legal domicile: IL
Pa	art I	Summary			
ģ	1	Briefly describe the organization's mission or most significant activities: ${ t TO}$ ${ t Wo}$	ORK WI	TH STAKEHOI	DERS TO
Governance		PRESERVE OPEN, NATURAL AND AGRICULTURAL	LAND R	RESOURCES IN	MCHENRY
ern	2	Check this box if the organization discontinued its operations or dispos	sed of more	e than 25% of its net a	
ઠ્ઠ				3	
∞ಶ		Number of independent voting members of the governing body (Part VI, line 1b)			14 17
ties		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			150
Activities		Total number of volunteers (estimate if necessary)			
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			
	Ь	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····	7b	Current Year
	8	Contributions and grants (Part VIII, line 1h)	-	2,710,409.	
Jue	1	- (D 1) (W 1) (D 1)		75,077.	
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		93,242.	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,128.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,887,856.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		12,501.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		462,816.	527,113.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
хbе		Total fundraising expenses (Part IX, column (D), line 25) 67, 4	02.		
Ω̈́	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		298,074.	292,418.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		773,391.	
	19	Revenue less expenses. Subtract line 18 from line 12		2,114,465.	
Net Assets or Fund Balances			Ве	ginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		7,446,129.	
et nd E	21	Total liabilities (Part X, line 26)		292,090.	
ᄝᇎ	22	Net assets or fund balances. Subtract line 21 from line 20		7,154,039.	7,519,344.
	art II	Signature Block	o and atatam	anta and to the best of n	ay knowledge and balish it is
		Ities of perjury, I declare that I have examined this return, including accompanying schedule t, and complete. Declaration of preparer (other than officer) is based on all information of wh			ly knowledge and beller, it is
ue	, 001160	t, and complete. Declaration of preparer (other than officer) is based on all information of wi	non preparei	lias ally kilowieuge.	_
ei~	_	Signature of officer		I Date	
Sig Her		KAREN LAVIN, PRESIDENT			
He	•	Type or print name and title			
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN
Paid	d	RON MARKLUND RON MARKLUND	lo	9/23/24 if self-emplo	P01985511
	parer	Firm's name DUGAN & LOPATKA, CPA'S PC		Firm's EIN 3	66-2886485
	Only	Firm's address 4320 WINFIELD ROAD SUITE 450			
		WARRENVILLE, IL 60555-4036		Phone no. 63	30-665-4440
May	y the If	RS discuss this return with the preparer shown above? See instructions			X Yes No
					= 000 (aaaa)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	х	
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Λ	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			.,
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
ь	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		,	
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

	990 (2023) THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727	476	Р	age 4
Pai	T IV Checklist of Required Schedules (continued)		1,,	·
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
<b>2</b> 4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
Ь	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			3,7
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?// "Yes," complete Schedule L, Part IV	00-		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
00	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		X
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		22
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			_ <u>-</u> _
_ <b>_</b>	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

Page **5** 

Form 990 (2023) THE LAND CONSERVANCY OF MCHENRY COUNTY

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	_		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities 10b	_		
		_		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	-		
b				
12a	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	iza		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

332005 12-21-23

Form 990 (2023)

THE LAND CONSERVANCY OF MCHENRY COUNTY

36-3727476

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14		100	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
h	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		3		х
4	of officers, directors, trustees, or key employees to a management company or other person?	4		X
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	ь		-22
/a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	<b>.</b> .		Х
	more members of the governing body?	7a		Λ
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<b>_</b>		Х
_	persons other than the governing body?	7b		Λ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		X	
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		\ <u>'</u>	
40-	Did the consequence is the second sec	40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		-25
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	40h		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	па	21	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	100	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	21	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	400	х	
40	on Schedule O how this was done	12c 13	X	
13	Did the organization have a written whistleblower policy?	14	X	
14	Did the organization have a written document retention and destruction policy?	14	21	
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?	45-		Х
	The organization's CEO, Executive Director, or top management official	15a		X
D	Other officers or key employees of the organization	15b		Λ
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		Х
	taxable entity during the year?	16a		21
D	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?	16h		
800	exempt status with respect to such arrangements? tion C. Disclosure	16b		
	T-T			
17 18	List the states with which a copy of this Form 990 is required to be filed  List the states with which a copy of this Form 990 is required to be filed  List the states with which a copy of this Form 990 is required to be filed  List the states with which a copy of this Form 990 is required to be filed  List the states with which a copy of this Form 990 is required to be filed  List the states with which a copy of this Form 990 is required to be filed	e only	) avail	able
10	for public inspection. Indicate how you made these available. Check all that apply.	3 Orliy	, avalli	ADIC
	Own website Another's website X Upon request Other (explain on Schedule O)			
10	• • •	d fina	ncial	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u iirial	ıcıdı	
20	statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records			
20	JENNIFER LUNIEWICZ-MARTINS - 815-337-9502			
	P.O. BOX 352. WOODSTOCK. IL 60098			

332006 12-21-23

Form 990 (2023)

THE LAND CONSERVANCY OF MCHENRY COUNTY

36-3727476

Page 7

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

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

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

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

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

Check this box if neither the organi	ization nor any related	orga	aniza	ation	COI	npe	nsat		director, or trustee.	
(A)	(B)			_ ((	<b>C)</b>			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	itior more	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		Coran		1 0010	)/ ii us	100)	from	from related	other 
	(list any hours for	or director						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	10001120)	and related
	below	Individual trustee	Institutional trustee	<u></u>	Key employee	Highest compensated employee	-e	,		organizations
	line)	Indiv	Instit	Officer	Key e	High empl	Former			
(1) LISA HADERLEIN	40.00									
EXECUTIVE DIRECTOR				Х				72,074.	0.	10,124.
(2) KAREN LAVIN	2.00							_	_	_
PRESIDENT		Х		Х				0.	0.	0.
(3) RANDY SCHIETZELT	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(4) MARK NEWTON	2.00	ļ								
TREASURER		Х		Х				0.	0.	0.
(5) SHAWN KINGZETTE	2.00	ļ								
SECRETARY		Х		Х				0.	0.	0.
(6) DERS ANDERSON	1.00									
DIRECTOR		Х						0.	0.	0.
(7) DAVID HALL	1.00	ļ								•
DIRECTOR	1 00	Х						0.	0.	0.
(8) MELISSA COONEY	1.00	۱								•
DIRECTOR	1 00	Х						0.	0.	0.
(9) STEVE WENZEL	1.00	۱								•
DIRECTOR	1 00	Х						0.	0.	0.
(10) KURT TAYLOR	1.00	۱								•
DIRECTOR	1 00	Х						0.	0.	0.
(11) ROB MCCORMICK	1.00	١,,								•
DIRECTOR	1 00	Х						0.	0.	0.
(12) KATHY REILAND	1.00	ļ ,,								0
DIRECTOR	1 00	Х						0.	0.	0.
(13) SANDRA SCHEINFELD	1.00	٠,								0
DIRECTOR	1 00	Х			$\vdash$			0.	0.	0.
(14) CHRISTINE NYE	1.00	<b>₩</b>						0.	0.	_
DIRECTOR	1.00	Х		$\vdash$				0.	<u> </u>	0.
(15) TERRY WILLCOCKSON	1.00	x						0.	0.	0
DIRECTOR		^		$\vdash$	$\vdash$			0.	0.	0.
		1								
					$\vdash$					
		1								
	1	1	1		ı		1	i	1	

332007 12-21-23

Page **8** 

rar	Section A. Officers, Directors, Trus		ploy	ees			ıghe	st C	compensated Employe	es (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		ገ e than	one	Reportable	Reportable		Est	imate	d
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation		am	ount c	of
		week	_	cer ar	a a a	irecto	or/trus	itee)	from	from related		C	other	
		(list any	Individual trustee or director						the	organizations			ensat	
		hours for	or dir	a)			ated		organization	(W-2/1099-MISC	)/		m the	
		related	stee	ruste			suac		(W-2/1099-MISC/	1099-NEC)		•	ınizatio	
		organizations below	al tru	Institutional trustee		key employee	Highest compensated employee		1099-NEC)				relate	
		line)	livid	stituti	Officer	/emb	ploy	Former				orga	nizatio	ns
		11110)	Ĕ	Ë	₽	Ş.	훈	요			_			
							_				_			
											一			
1h	Subtotal	1			<u> </u>				72,074.		0.	10	,12	24.
C	Total from continuation sheets to Part V	I Section A						• •	0.		0.		, ,	0.
									72,074.		0.	1 (	,12	
	Total (add lines 1b and 1c)										<u> </u>		,, _ 2	<u> </u>
2	Total number of individuals (including but n	iot iiriitea to tr	iose	IISLE	eu a	DOV	e) wi	10 1	eceived more than \$100	,000 of reportable				0
	compensation from the organization												Yes	No
•	B: 1.11												163	NO
3	Did the organization list any <b>former</b> officer,	•		•		•		_		•				v
_	line 1a? If "Yes," complete Schedule J for s											3		<u>X</u>
4	For any individual listed on line 1a, is the su	•		•					·	the organization				37
	and related organizations greater than \$15			•								4		X
5	Did any person listed on line 1a receive or a													77
	rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	ıch	pers	son .					5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co										ensa	ation fr	om	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithir	n the organization's tax	year.				
	(A)				_				(B)		_	(C	)	
	Name and business	address	N	INC	<u> </u>				Description of s	ervices	Co	ompen	sation	1
								T						
2	Total number of independent contractors (i	includina but n	ot li	mite	d to	tho	se li	ster	d above) who received m	ore than				
_	\$100,000 of compensation from the organi				<u>.</u>		0							
	The organical formation and organical formation and organic											Form <b>9</b>	90 (2	U33)
												OI III C	(2	U_U)

Pa	rt VI	II Statement of Revenue					
		Check if Schedule O contains a response of	or note to any lin		<b>(D)</b>	(0)	
				(A) Total revenue	<b>(B)</b> Related or exempt	(C) Unrelated	( <b>D</b> ) Revenue excluded
				Total revenue	function revenue	business revenue	from tax under
<u> </u>							sections 512 - 514
nts	1 a	Federated campaigns 1a					
95 E		Membership dues1b					
A,	C	Fundraising events 1c	23,810.				
ia i	C	Related organizations 1d					
ns,		Government grants (contributions)	74,523.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and	777 222				
탈된		···	777,233.				
ng u	_	Noncash contributions included in lines 1a-1f 1g \$	7,602.	075 566			
a C	h	Total. Add lines 1a-1f		875,566.			
_		<u>1</u>	Business Code 110000	72,581.	72,581.		
/ice	2 a		110000	14,501.	72,561.		
Jer Iue	b						
Men S	C	. —————————————————————————————————————					
gra Re	C						
Program Service Revenue	e						
		All other program service revenue		72,581.			
$\overline{}$	3	Investment income (including dividends, interes		72,301.			
	3	other similar amounts)		25,217.			25,217.
	4	Income from investment of tax-exempt bond pr	Ī				
	5	Royalties	ŀ				
	_	(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	c	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 207,933.					
	b	Less: cost or other basis					
une		and sales expenses 76 190,818.					
Revenue		Gain or (loss) 7c 17,115.		17 115			17 115
er B		Net gain or (loss)		17,115.			17,115.
Oth	8 a	Gross income from fundraising events (not including \$ 23,810 • of					
١							
		contributions reported on line 1c). See Part IV, line 18	25,624.				
	h	Less: direct expenses 8b	24,307.				
				1,317.			1,317.
		Gross income from gaming activities. See					•
		Part IV, line 199a					
	b	Less: direct expenses 9b					
		Not income ou (loca) forms manning activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	b	Less: cost of goods sold 10b					
$\blacksquare$	C	Net income or (loss) from sales of inventory					
sn			Business Code	1 401	1 401		
ne eo		OTHER REVENUE	900099	1,421.	1,421.		
lar Ven	b						
Miscellaneous Revenue	C						
Ξ		All other revenue		1,421.			
	12	Total. Add lines 11a-11d		993,217.	74,002.	0.	43,649.
	14	. G. G. TOTOHOU. COO HIGH GOROHO		,	. = , 0020		,

Form 990 (2023)

THE LAND CONSERVANCY OF MCHENRY COUNTY

36-3727476 Page 10

#### 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 (D) (C) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, 82,198. 65,760. 8,219. 8,219. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 395,027. 316,021. 39,503. 39,503. 7 Other salaries and wages Pension plan accruals and contributions (include 6,419 5,135 642 642. section 401(k) and 403(b) employer contributions) 9,317. 7,453. 932. 932. Other employee benefits 9 3,415.34,152. 27,322. 3,415. Payroll taxes 10 Fees for services (nonemployees): a Management ..... 6,265. 6,265. Legal 11,015. 11,015. Accounting Lobbying Professional fundraising services. See Part IV, line 17 12,498. 12,498. Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 11,982. 38,618. 24,233. 2,403. Office expenses 13 14 Information technology Royalties 15 3,297. 3,537. 120. 120. 16 Occupancy 5,658. 4,526. 566. 566. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials ... 9,244. 9,244. Conferences, conventions, and meetings 19 7,684. 7,684. 20 Payments to affiliates \_\_\_\_\_ 21 42,882. 42,882. Depreciation, depletion, and amortization ..... 22 35,418. 3,542. 31,876. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 96,120. 96,120. STEWARDSHIP MISCELLANEOUS EXPENSE 15,922. 12,738. 1,592. 1,592. 4,308. MEMBERSHIP DUES 3,446. 431. <u>431.</u> 3,249 3,249. **OUTSIDE SERVICES** e All other expenses 819,531. 624,369. 127,760 67,402. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			21,083.	1	130,760.
	2	Savings and temporary cash investments			544,900.	2	470,276.
	3	Pledges and grants receivable, net			98,790.	3	120,274.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial c	contributor, or 35%			
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqua	ılified per	rsons (as defined			
		under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			0.	9	400.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	6,177,257.			
	b	Less: accumulated depreciation	10b	79,853.	5,978,094.	10c	6,097,404.
	11	Investments - publicly traded securities			803,262.	11	882,225.
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line	e 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must eq			7,446,129.	16	7,701,339.
	17	Accounts payable and accrued expenses			16,086.	17	33,937.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			46 202	20	F 4 4 4 7
	21	Escrow or custodial account liability. Complete			46,323.	21	54,447.
ies	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub					
Ei.		controlled entity or family member of any of the			102 000	22	92 000
_	23	Secured mortgages and notes payable to unre			193,000. 36,681.	23	83,000. 10,611.
	24	Unsecured notes and loans payable to unrelat			30,001.	24	10,011.
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line				0.5	
	00	of Schedule D			292,090.	25 26	181,995.
	26	Total liabilities. Add lines 17 through 25	a als bar	e X	272,070.	26	101,000.
es		Organizations that follow FASB ASC 958, chand complete lines 27, 28, 32, and 33.	eck ner	- L41			
anc	27	• • • • • •			6,086,715.	27	6,379,822.
3al	28	Net assets without donor restrictions  Net assets with donor restrictions			1,067,324.	28	1,139,522.
<u>B</u>	20	Organizations that do not follow FASB ASC			1,001,521.	20	1,133,322.
Ξ		and complete lines 29 through 33.	930, CHE	eck liefe			
ō	29	Capital stock or trust principal, or current fund	e			29	
ets	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated		F		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			7,154,039.	32	7,519,344.
Z	33	Total liabilities and net assets/fund balances			7,446,129.	33	7,701,339.
	, 55	Total habilitios and not assets/fund balances			., = = = , = = = =	_ 55	Form <b>990</b> (2023)

orm	990 (	2023)	THE	LAND	CONSERVANC	Y OF	MCHENRY	COUNTY	36-372	7476	Pa	ge <b>12</b>
Par	rt XI	Reconciliation	of Ne	t Assets	3							
		Check if Schedule	O contai	ins a respo	onse or note to any lin	e in this	Part XI					
1	Total	revenue (must equa	al Part VI	II, column	(A), line 12)				1			17.
2	Total	expenses (must equ	ual Part I	IX, column	(A), line 25)				2			31.
3	Reve	nue less expenses.	Subtract	t line 2 fror	m line 1				3			86.
4	Net a	ssets or fund baland	ces at be	eginning of	f year (must equal Pai	t X, line	32, column (A))		4	7,15		
5	Net u	ınrealized gains (loss	ses) on ir	nvestment	S				5	3	9,6	19.
6	Dona	ted services and us	e of facil	ities					6			
7									7			
8									8	15	2,0	00.
9									9			0.
10	Net a	ssets or fund baland	ces at er	nd of year.	Combine lines 3 thro	ugh 9 (n	nust equal Part	X, line 32,				
	colur	nn (B))							10	7,51	9,3	44.
Par	rt XII	Financial State	ement	s and Re	eporting							
		Check if Schedule	O contai	ins a respo	onse or note to any lin	e in this	Part XII					X
											Yes	No
1	Acco	unting method used	l to prep	are the Fo	rm 990: L Cash		Accrual L	Other				
		-			-	-		•	le O.			
2a	Were	the organization's f	inancial	statement	s compiled or reviewe	d by an	independent a	ccountant?		2a		X
	If "Y∈	es," check a box belo	ow to inc	dicate whe	ther the financial stat	ements	for the year wer	e compiled or reviewe	d on a			
	sepa	rate basis, consolida	ated bas	is, or both								
		Separate basis		Consolidate	ed basis 🔲 Bo	th cons	solidated and se	parate basis				
b		-			•					2b	X	
	If "Y∈	es," check a box belo	ow to inc	dicate whe	ther the financial stat	ements	for the year wer	e audited on a separa	te basis,			
			oth:									
	X	Separate basis		Consolidate	ed basis 🔲 Bo	th cons	solidated and se	parate basis				
С				-			•	•				
	revie	w, or compilation of	its finan	cial statem	ents and selection of	an inde	pendent accou	ntant?		2c	X	
		-				-	-	•	hedule O.			
3а	As a	result of a federal av	vard, wa	s the orga	nization required to u	ndergo a	an audit or audit	ts as set forth in the				
2 Total expenses (must equal Part IX, column (A), line 25) 2 8.  3 Revenue less expenses. Subtract line 2 from line 1 3 1 1  4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 7, 1  5 Net unrealized gains (losses) on investments 5  6 Donated services and use of facilities 6  7 Investment expenses 7  8 Prior period adjustments 8 1 1  9 Other changes in net assets or fund balances (explain on Schedule O) 9  10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9  10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 7, 5  Part XIII 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 X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 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, or both: Beth consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant? 2a 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: Beth consolidated and separate basis  c 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: Press to line 2 a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight proce			3a		X							
b		· ·		-	equired audit or audits	? If the	organization did	d not undergo the requ	uired audit			
	or au	dits, explain why on	Schedu	le O and d	escribe any steps tak	en to ur	ndergo such auc	dits		3b		

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Inspection

OMB No. 1545-0047

Employer identification number Name of the organization THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 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).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, 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). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990) 2023

THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 Page 2

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sed	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and	` ,	, ,	` ,	` ,	, ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	823,163.	979,335.	608,810.	2,710,409.	875,566.	5,997,283.
2	Tax revenues levied for the organ-						
	ization'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	823,163.	979,335.	608,810.	2,710,409.	875,566.	5,997,283.
	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)						471,364.
6	Public support. Subtract line 5 from line 4.						5,525,919.
	ction B. Total Support			•			
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	(a) 2019 823, 163.	(b) 2020 979,335.	608,810.	2,710,409.	875,566.	5,997,283.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	22,601.	22,501.	26,148.	26,450.	25,217.	122,917.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on				3,292.	1,317.	4,609.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	98.	27.	2,110.	5,836.	1,421.	9,492.
11	<b>Total support.</b> Add lines 7 through 10						6,134,301.
12	Gross receipts from related activities,	etc. (see instruction	ons)	•		12	350,431.
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 5	501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	90.08 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	86.79 %
	33 1/3% support test - 2023. If the o					nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop here	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances to	est. The organization	on qualifies as a pu	ublicly supported o	rganization		
b	10% -facts-and-circumstances tes	t - 2022. If the org	anization did not o	heck a box on line			
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and <b>sto</b>	<b>p here.</b> Explain ir	n Part VI how the	
	organization meets the facts-and-circle	umstances test. Th	ne organization qu	alifies as a publicly	supported organ	ization	
18	Private foundation. If the organization						
							(Form 990) 2023

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 Page 3

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						
•	1 ,					
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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 $\dots$						
6 Total. Add lines 1 through 5						
${f 7a}$ Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
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) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(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>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is						
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital						
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)		irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)	he organization's fi	irst, second, third,	•	•	. , . ,	ion,
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here	he organization's fi		•	•	. , . ,	ion,
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub	he organization's fi	rcentage	······		. , . ,	ion,
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the sale of the	he organization's fi lic Support Pe (line 8, column (f), co	ercentage divided by line 13,	······			
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (19)	he organization's fi lic Support Pe (line 8, column (f), c 2 Schedule A, Part	ercentage divided by line 13,	column (f))		15	%
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (16 Public support percentage from 2023)  Section D. Computation of Inve	he organization's fi lic Support Pe (line 8, column (f), c 2 Schedule A, Part stment Incom	ercentage divided by line 13, III, line 15	column (f))		15	%
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (16 Public support percentage from 2023)  Section D. Computation of Inve	he organization's filic Support Pe (line 8, column (f), c 2 Schedule A, Part estment Incom 023 (line 10c, colur	ercentage divided by line 13, III, line 15 De Percentage mn (f), divided by li	column (f)) ne 13, column (f))		15 16	% %
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (16 Public support percentage from 2023 (16 Public support percentage from 2023 (17 Investment income percentage from 2021 (18 Investment Income perc	he organization's filic Support Pe (line 8, column (f), c2 Schedule A, Part stment Incom 023 (line 10c, colur 2022 Schedule A,	ercentage divided by line 13, III, line 15 EPercentage mn (f), divided by li Part III, line 17	column (f)) ne 13, column (f))		15 16 17 18	% % %
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (16 Public support percentage from 2022)	he organization's filic Support Pe (line 8, column (f), column (f)	crcentage divided by line 13, III, line 15 E Percentage mn (f), divided by li Part III, line 17 not check the box	ne 13, column (f))	e 15 is more than	15 16 17 18 33 1/3%, and line	% % %
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (16 Public support percentage from 2025 Section D. Computation of Inve  17 Investment income percentage from 19a 33 1/3% support tests - 2023. If the	he organization's filic Support Pe (line 8, column (f), column (f)	ercentage divided by line 13, III, line 15 E Percentage mn (f), divided by li Part III, line 17 not check the box organization quali	ne 13, column (f)) on line 14, and line fies as a publicly s	e 15 is more than supported organiz	15 16 17 18 33 1/3%, and line	% % % 17 is not
acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the check this box and stop here  Section C. Computation of Pub  15 Public support percentage for 2023 (16 Public support percentage from 2025 Section D. Computation of Inve  17 Investment income percentage from 19a 33 1/3% support tests - 2023. If the more than 33 1/3%, check this box as	he organization's filic Support Pe (line 8, column (f), column (f)	ercentage divided by line 13, III, line 15 E Percentage mn (f), divided by li Part III, line 17 not check the box organization qualinot check a box or	ne 13, column (f)) on line 14, and line fies as a publicly so line 14 or line 19	e 15 is more than supported organiza, and line 16 is m	15 16 17 18 33 1/3%, and line ation ore than 33 1/3%,	% % % 17 is not

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#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	2		
	За		
	3b		
	3с		
	4a		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	3		
	9a		
	9b		
	9c		
	90		
	10a		
duta	10b A (Forr	n 000	2022
Jule	A (FUI)	11 990	2023

Pai	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	$oxed{oxed}$	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	tion 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 yea(see instructions)	•		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	Structio		N <sub>a</sub>
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
h	·	Za		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	2.0		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
ч	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2023 THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 Page 6

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgai	nizations	Ŭ
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrat	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 Page 7

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ued)	<u> </u>
Sect	ion D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported			
	organizations, in excess of income from activity			2	
_3_	Administrative expenses paid to accomplish exempt purpos	es of supported organization	IS	3	
_4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ns	(iii) Distributable Amount for 2023
_1_	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
<u>_i</u>	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				

Schedule A (Form 990) 2023

**b** Applied to 2023 distributable amount

Part VI. See instructions.

and 4c.

8 Breakdown of line 7:
 a Excess from 2019
 b Excess from 2020
 c Excess from 2021
 d Excess from 2022
 e Excess from 2023

c Remainder. Subtract lines 4a and 4b from line 4.
 5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater

than zero, explain in Part VI. See instructions.
 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2024. Add lines 3j

36-3727476 Page 8 THE LAND CONSERVANCY OF MCHENRY COUNTY Schedule A (Form 990) 2023 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.) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: MISC. REVENUE 2019 AMOUNT: \$ 98. 2020 AMOUNT: 27. 2021 AMOUNT: 2,110. 2022 AMOUNT: 5,836. 2023 AMOUNT: 1,421.

332028 12-21-23 Schedule A (Form 990) 2023

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

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

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

OMB No. 1545-0047

2023

Open to Public

Open to Public Inspection

Name of the organization

THE LAND CONSERVANCY OF MCHENRY COUNTY

Employer identification number 36-3727476

Pai		d Funds or Other Similar Fund	s or Account	S.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		(h) Funda (	and other accounts
		(a) Donor advised funds	(b) Funds a	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	_		
•	are the organization's property, subject to the organization's			Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of		•	
Pai		ranization answered "Ves" on Form 900		Yes No
1	Purpose(s) of conservation easements held by the organizat		, raitiv, iiie 7.	
'	Preservation of land for public use (for example, recrea	`	of a historically imp	portant land area
	X Protection of natural habitat	· —	of a historically imp	
	X Preservation of open space	Preservation	of a certified histor	ic structure
2		find concervation contribution in the for	n of a consonyation	n accoment on the last
2	Complete lines 2a through 2d if the organization held a qualiday of the tax year.	ned conservation contribution in the for		Id at the End of the Tax Year
а	Total number of conservation easements			97
b				2,268.00
	Number of conservation easements on a certified historic str	usturo included on line 22		2/200100
	Number of conservation easements included on line 2c acqu			
u			2d	
3	on a historic structure listed in the National Register Number of conservation easements modified, transferred, re			uring the tay
3	year	leased, extilliguished, or terminated by t	ne organization du	ining the tax
4	Number of states where property subject to conservation ea	sement is located 1		
5	Does the organization have a written policy regarding the pe	· · · · · · · · · · · · · · · · · · ·	- f	
J	violations, and enforcement of the conservation easements i			X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
•	260	Thanks of Violations, and emoroting of	noorvation cacom	orno daring the your
7	Amount of expenses incurred in monitoring, inspecting, hand 400.	dling of violations, and enforcing conser	ation easements	during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170	)(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			X Yes No
9	In Part XIII, describe how the organization reports conservati			••••
	balance sheet, and include, if applicable, the text of the footi	·		es the
	organization's accounting for conservation easements.	<u> </u>		
Pai		f Art, Historical Treasures, or	Other Similar	Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statemen	and balance shee	et works
	of art, historical treasures, or other similar assets held for pul	olic exhibition, education, or research in	furtherance of put	olic
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these it	ems.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement an	d balance sheet w	orks of
	art, historical treasures, or other similar assets held for public			
	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 tre			
_	the following amounts required to be reported under FASB A	,	g, p. 0 vido	
а	Revenue included on Form 990, Part VIII, line 1		\$	
	Assets included in Form 990, Part X		· · · · · · · · · · · · · · · · · · ·	
	For Paperwork Reduction Act Notice, see the Instruction			nedule D (Form 990) 2023

	dule D (Form 990) 2023 THE LAN:	D CONSERVA								Page <b>2</b>
3	Using the organization's acquisition, accessi									
•	collection items (check all that apply).	ori, aria otrior rocort	40, 01100	it arry or tire	Tollowing the	at mano o	grimoarie	400 01 110		
а	Public exhibition	C	. L	Loan or exc	hange progr	am				
b	Scholarly research				90  2.09.					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	nev further tl	he organizat	ion's exen	not purpo	se in Par	t XIII.	
5	During the year, did the organization solicit o	•		•	ū					
	to be sold to raise funds rather than to be ma		,		,				Yes	☐ No
Par	t IV Escrow and Custodial Arran									
	reported an amount on Form 990, Pai			· ·				•		
1a	Is the organization an agent, trustee, custodi	ian, or other interme	ediary for	contribution	ns or other a	ssets not	included			
	on Form 990, Part X?								Yes	X No
b	If "Yes," explain the arrangement in Part XIII									
									Amount	
С	Beginning balance						1c			
	Additions during the year									
е	Distributions during the year						. 1e			
f	Ending balance								_	
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	ount liabili	ty?	L <u>X</u>	Yes	No
	If "Yes," explain the arrangement in Part XIII.									X
Par	t V Endowment Funds Complete if		1					aara baak	(-) Four	vooro book
		(a) Current year	(b) P	rior year	(c) Two yea	is back (	a) Tillee y	ears Dack	(e) Four y	ears back
	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
_	End of year balance		/!: 1	l /-	\\   -					
2	Provide the estimated percentage of the curr			g, column (a	a)) neid as:					
	Board designated or quasi-endowment Permanent endowment	%	%							
		<sup>70</sup> %								
С	Term endowment									
32	Are there endowment funds not in the posse	•	ation the	at are held a	nd administ	ered for th	16			
ou	organization by:	obolori or the organiz	ation the	at are freid a	ira aarriiriiot	ored for an			ΓY	es No
	(i) Unrelated organizations?								3a(i)	_
	(ii) Related organizations?								· <del>- · ·</del>	
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a. S	See Form 990	0, Part X, I	line 10.			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	d	(d) Book	value
		basis (investi	ment)	basis	(other)	dep	reciation			
1a	Land				8,854.					,854.
	Buildings			28	8,688.		33,80	07.	254	,881.
	Leasehold improvements									
d	Equipment			7	9,715.		46,0	46.	33	,669.
	Other									0.
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, line 1	0c, column	(B))				6,097	,404.

Schedule D (Form 990) 2023

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

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

332054 09-28-23

Schedule D (Form 990) 2023 THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 Page 5  Part XIII Supplemental Information (continued)
PART X, LINE 2:
THE ORGANIZATION FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION
AND ILLINOIS. WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT
TO U.S. FEDERAL, STATE AND LOCAL OR NON-U.S. INCOME TAX EXAMINATIONS BY
TAX AUTHORITIES FOR YEARS BEFORE 2020. THE ORGANIZATION DOES NOT EXPECT A
MATERIAL NET CHANGE IN UNRECOGNIZED TAX BENEFITS IN THE NEXT TWELVE
MONTHS.

332055 09-28-23

#### SCHEDULE G (Form 990)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

THE LAN	D CONSERVANCY OF M	CHE	NRY	COUNTY	36-3727	476
	Complete if the organization answer				line 17. Form 990-E2	I filers are not
1 Indicate whether the organization rais a	sed funds through any of the following e Solicitars f Solicitars g Special or oral agreement with any individual cart VII) or entity in connection with providuals or entities (fundraisers) pursured	tion of tion of fundra (inclu- irofess	non-g gover aising ding o ional t	overnment grants rnment grants events  fficers, directors, tru fundraising services?	stees, or Yes	
(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	on is registered or licensed to solicit			s or has been notified	d it is exempt from r	egistration
or licensing.	or is registered of licensed to solicit	COTTUIN	- Control is	s of thas been flotilled	a it is exempt from to	egistration
For Paperwork Reduction Act Notice, se	ee the Instructions for Form 990 o	990-1	EZ.		Schedule	G (Form 990) 2023

LHA 332081 09-13-23

Schedule G (Form 990) 2023

THE LAND CONSERVANCY OF MCHENRY COUNTY 36-3727476 Page 2

Pa			ne organization answered		t IV, line 18, or reported	
		or ramananang or an eer macanana and gr	(a) Event #1 ANNUAL CELEBRATION	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
en			(event type)	(event type)	(total number)	COI. (C))
Revenue	1	Gross receipts	18,654.	30,780.		49,434.
	2	Less: Contributions	3,705.	20,105.		23,810.
	3	Gross income (line 1 minus line 2)	14,949.	10,675.		25,624.
	4	Cash prizes		770.		770.
	5	Noncash prizes	7,602.			7,602.
penses						
Direct Expenses	7	Food and beverages	6,137.	6,600.		12,737.
	8	Entertainment	308.	600.		908.
	9	Other direct expenses		713.		2,290.
	10	Direct expense summary. Add lines 4 throug	. ,			24,307. 1,317.
	11	<u> </u>				1,317.
Pa	ırt I	<b>Gaming.</b> Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Forn	1 990, Part IV, line 19, or	reported more than	
Revenue		\$10,000 0111 0111 000 <u>LL</u> , III10 00.	(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
а	En:	ter the state(s) in which the organization condithe organization licensed to conduct gaming a	ucts gaming activities: _ ctivities in each of these			Yes No
		ere any of the organization's gaming licenses r Yes," explain:	evoked, suspended, or to	erminated during the tax	year?	Yes No

Schedule G (Form 990) 2023

332082 09-13-23

Schedule G (Form 990) 2023 THE LAND CONSERVANCY OF MCHENRY COUNTY 36-	3727	476	Page 3
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?	LJY	Yes	└─ No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility			<u>%</u>
<b>b</b> An outside facility	. 13b		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name			
Address			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
<b>b</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>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	Dort III lin	00.0	0h 10h
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, IIII	les 9,	<i>3</i> 0, 100,
Tob, 100, 10, and 175, de applicable. Also provide any additional montation. Coo motivotione.			

332083 09-13-23 Schedule G (Form 990) 2023

Schedule G	(Form 990)	THE	LAND	CONSERVANCY	OF	MCHENRY	COUNTY	36-3727476	Page 4
Part IV	(Form 990) <b>Supplemental</b>	Information	(continue	d)					Ĭ
_									
								Schedule G (F	orm 990)

332084 04-01-23

#### SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2023

Open to Public

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization **Employer identification number** 36-3727476 THE LAND CONSERVANCY OF MCHENRY COUNTY FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COUNTY, ILLINOIS FORM 990, PART VI, SECTION B, LINE 11B: THE BOARD REVIEWS FORM 990 AT A BOARD MEETING PREVIOUS TO FILING FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD SIGNS AN ANNUAL CONFLICT OF INTEREST POLICY AND BOARD MEMBERS WILL RECUSE THEMSELVE FROM DISCUSSION AND VOTING ON ANY MATTER WHERE IT APPLIES FORM 990, PART VI, SECTION B, LINE 15: EVERY MARCH BOARD MEETING THE BOARD CONDUCTS A PERFORMANCE REVIEW AND SALARY IS DISCUSSED AT THAT TIME ALSO FORM 990, PART VI, SECTION C, LINE 19: ALL DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST FORM 990, PART XII, LINE 2C: THE PROCESS HAS NOT CHANGED FROM PREVIOUS YEARS.

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

Schedule O (Form 990) 2023