EXTENDED TO MAY 15, 2019

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

Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

OMB No. 1545-0047

<u>A</u>	For the	e 2017 calendar year, or tax year beginning JUL I, ∠UI/ and	ending U	UN 30, 2018				
В	Check if applicabl	C Name of organization		D Employer identifi	cation number			
	Addres				E4.440.6			
L	Name chang	Doing business as		58-1	514406			
	Initial return Final	51/ COUNT DIVE CODEED	Room/suite	E Telephone numbe	r)908–8809			
	return/ termin ated			G Gross receipts \$	6,833,833.			
	Amend			<u> </u>				
H	lreturn □Applic			H(a) Is this a group re				
	⊥ltiön pendir	F Name and address of principal officer: SANDI SWELLZER	Λ1	for subordinates				
		¹⁹ 514 SOUTH DUKE STREET, DURHAM, NC 2770		H(b) Are all subordinates in				
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) 0	or 527	┨	list. (see instructions)			
		te: WWW.TRIANGLELAND.ORG		H(c) Group exemptio				
		organization: X Corporation Trust Association Other ►	L Year	of formation: 1983 N	State of legal domicile: NC			
P	art I	Summary						
Φ	1	Briefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$	PURPOS	SE OF TRIANG	LE LAND			
& Governance		CONSERVANCY IS TO CONSERVE LAND FOR OPEN	SPACE	E, [CONT. ON	SCHED. O],			
ű	2	Check this box if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	ssets.			
ove.	1			3	18			
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			18			
တ္		Total number of individuals employed in calendar year 2017 (Part V, line 2a)			19			
iŧie		Total number of volunteers (estimate if necessary)			441			
Activities	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
ĕ		Net unrelated business taxable income from Form 990-T, line 34			0.			
	b	Net unrelated pushiess taxable income from 1 on 1 990-1, line 34	·····					
Revenue		On the blanch and a words (Doub VIIII Bare 41)	<u> </u>	Prior Year 3,894,695.	Current Year 5,461,070.			
		Contributions and grants (Part VIII, line 1h)		10,200.				
		Program service revenue (Part VIII, line 2g)		172,766.				
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)						
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		72,822.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,150,483.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
9	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		781,718.				
us	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 210, 34	49. 🗀					
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		617,391.	658,015.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,399,109.	1,468,152.			
		Revenue less expenses. Subtract line 18 from line 12		2,751,374.	4,280,441.			
or Sec		·	Ве	ginning of Current Year	End of Year			
Net Assets or Find Balances	20	Total assets (Part X, line 16)		.06,310,379.	110,741,845.			
ASS	21	Total liabilities (Part X, line 26)		186,885.	157,583.			
Net	22	Net assets or fund balances. Subtract line 21 from line 20	······ <u> </u>	.06,123,494.	110,584,262.			
	art II	Signature Block		,				
		Ities of perjury, I declare that I have examined this return, including accompanying schedule:	s and statem	ents, and to the hest of m	v knowledge and helief it is			
	-	et, and complete. Declaration of preparer (other than officer) is based on all information of wh			y kilowidago alla bollot, it io			
uuc	, 001100	ts and complete. Declaration of proparor (other than officer) is based on an information of wi	non propuror	Thas arry knowledge.				
0:-		Signature of officer		I Date				
Sig		SANDY SWEITZER, EXECUTIVE DIRECTOR		54.0				
He	re	Type or print name and title						
		<u> </u>		Date Check	PTIN			
Da!	d	Print/Type preparer's name Preparer's signature		if				
Pai		PAUL MILLER		self-employ				
	parer	Firm's name KOONCE, WOOTEN & HAYWOOD, LLP		Firm's EIN	56-0517823			
Use Only Firm's address P. O. BOX 17806								
		RALEIGH, NC 27619-7806		Phone no.91	9-782-9265			
Ма	y the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: TRIANGLE LAND CONSERVANCY (TLC) STRIVES TO CREATE A HEALTHIER AND MORE
	VIBRANT TRIANGLE REGION BY SAFEGUARDING CLEAN WATER, PROTECTING
	NATURAL HABITATS, SUPPORTING LOCAL FARMS AND FOOD, AND CONNECTING
	PEOPLE WITH NATURE THROUGH LAND PROTECTION AND STEWARDSHIP, CATALYZING
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 320,047. including grants of \$) (Revenue \$)
	EXECUTIVE DIRECTOR UPDATE: THE RAPID PACE OF DEVELOPMENT IN THE TRIANGLE HIGHLIGHTS THE URGENCY AND IMPORTANCE OF TLC'S LAND, WATER,
	FARM, AND WILDLIFE PROTECTION WORK. INSPIRED BY THAT GROWTH AND
	COMMUNITY ENTHUSIASM FOR OUR MISSION, THE BOARD AND STAFF UPDATED TLC'S
	STRATEGIC PLAN IN FY 2018. TLC'S NEW 2025 STRATEGIC ACTION PLAN SETS
	AGGRESSIVE CONSERVATION AND COMMUNITY ENGAGEMENT GOALS, WITH INCREASED
	EMPHASIS ON SAFEGUARDING CLEAN DRINKING WATER. COMMUNITY SUPPORT
	REMAINS CRITICALLY IMPORTANT FOR THE ORGANIZATION TO DOUBLE THE PACE OF
	CONSERVATION.
	CONSERVATION STRATEGIES: SINCE 1983, TLC HAS HELPED PERMANENTLY
	CONSERVE 18,358 ACRES OF LAND AND OVER 138 MILES (730,570 STREAM FEET)
4b	(Code:) (Expenses \$ 384,579 • including grants of \$) (Revenue \$ \$ 42,700 •)
	STEWARDSHIP: AS MORE LAND IS PROTECTED AND BECAUSE TLC IS AN ACCREDITED
	LAND TRUST, OUR STEWARDSHIP RESPONSIBILITIES FOR OWNED AND EASED
	PROPERTIES ARE SIGNIFICANT AND INCREASING ANNUALLY. A TOTAL OF 12,800
	ACRES - OVER 7,800 ACRES OF CONSERVATION EASEMENTS AND OVER 5,000 ACRES
	OF OWNED LAND - MUST BE MONITORED, MANAGED, AND CARED FOR BY
	STEWARDSHIP STAFF ANNUALLY. MONITORING VISITS ARE LEGALLY REQUIRED TO
	ENSURE THAT THE CONSERVATION EASEMENT TERMS ARE NOT VIOLATED AND ALSO
	HELP INFORM OUR MANAGEMENT AND STEWARDSHIP PLANNING.
	VOLUNTEERS FOUNDED TRIANGLE LAND CONSERVANCY 35 YEARS AGO AND ARE STILL
	A VITAL PART OF OUR WORK TODAY. IN FY 2018, VOLUNTEERS DONATED A TOTAL OF 1,865 HOURS OF STEWARDSHIP ACTIVITIES INCLUDING TRAIL BUILDING,
_	000 100
4c	(Code:) (Expenses \$ 209,190 · including grants of \$) (Revenue \$ 7,882 ·) (Revenue \$ 7,882 ·) (COMMUNITY ENGAGEMENT: TRIANGLE LAND CONSERVANCY SEEKS TO SAVE LAND FOR
	TOMORROW AND ENSURE THAT FUTURE GENERATIONS WILL BE GOOD STEWARDS OF
	THAT LAND BY PROVIDING POSITIVE EXPERIENCES IN NATURE FOR TODAY'S
	YOUTH. WITH THE HELP OF THE AMERICORPS PROGRAM, TLC PROVIDED 47
	ENVIRONMENTAL EDUCATION PROGRAMS TO ORGANIZATIONS SERVING COMMUNITY
	YOUTH IN FY 2018, PROVIDING 1,574 PARTICIPANTS OPPORTUNITIES TO BUILD
	FIRST HAND EXPERIENCES WITH WILD AND WORKING LANDS. 31 OF THOSE
	PROGRAMS TOOK PLACE ON TLC OWNED OR CONSERVED PROPERTIES. PROGRAM
	TOPICS INCLUDED POLLINATORS, WATER QUALITY, WILDLIFE HABITAT, AND
	HEALTHY FOOD FROM LOCAL FARMS. CHILDREN FROM EAST DURHAM CHILDREN'S
	INITIATIVE, MERRICK MOORE ELEMENTARY, GIRLS ON THE RUN, PARTNERS FOR
	YOUTH OPPORTUNITY, DURHAM 4-H, URBAN HOPE, BOOST, BOYS AND GIRLS CLUB
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 913,816.

Form 990 (2017) TRIANGLE LAN Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		77	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
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	3		
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
J	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	•		Х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		21
9	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 temporarily restricted endowments, permanent			
	endowments, or 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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	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	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	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	40	v	
L	Schedule D, Parts XI and XII Was the experienting included in consolidated independent sudited financial attempts for the tay year?	12a	Х	
a	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	174		
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? 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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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		X

Form 990 (2017) TRIANGLE LAND CONS Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			,,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			\ ₃₇
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_ v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		37	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2017) TRIANGLE LAND CONSERVANCY, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
		ı			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		J			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r			4 -	X	
0-	(gambling) winnings to prize winners?	 I		1c	22	
Za	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	19			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	Х	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction			20		
3a				За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial		•	4a		х
b	If "Yes," enter the name of the foreign country:		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	its (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer			5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r 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 se			7a		X
	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 w			_		\ _{3,7}
	to file Form 8282?	1		7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year		10	_		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h		
h 8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			/11		
Ü	sponsoring organizations maintaining donor advised tunds. Bid a donor advised tund maintained sponsoring organization have excess business holdings at any time during the year?			8		Х
9	Sponsoring organizations maintaining donor advised funds.					
а	5111			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	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:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	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	۱				
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand			4.6 -		X
	• • • • • • • • • • • • • • • • • • • •			14a		
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	ie U		14b	000	<u> </u>

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 in 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									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1									
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									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6	Х							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a	Х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X							
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?									
а	The organization's CEO, Executive Director, or top management official	15a	X							
b	Other officers or key employees of the organization	15b	Х							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
_	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►NC									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (vailab	le							
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records:									
	CARLA NUNN - 919-908-0055									
	514 SOUTH DUKE STREET, DURHAM, NC 27701									

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

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

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

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

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

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

(A)	(B)	Γ		((C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ALAN HUGHES	1.50	ļ "						0	0	0
DIRECTOR	1 50	Х						0.	0.	0.
(2) CHRIS HITT	1.50	Į.,						0.	0.	_
DIRECTOR	1.50	Х						0.	0.	0.
(3) NORRIS COTTON	1.50	X						0.	0.	0.
OIRECTOR (4) DELPHINE SELLARS	1.50	^						0.	0.	0.
(4) DELPHINE SELLARS DIRECTOR	1.30	X						0.	0.	0.
(5) PAM HEMMINGER	1.50	^						0.	0.	· ·
VICE CHAIR	1.30	x		x				0.	0.	0.
(6) RUSSELL KILLEN	1.50	122						0.	0.	•
CHAIR	1.50	x		x				0.	0.	0.
(7) JACK CLAYTON	1.50							•		•
DIRECTOR		x						0.	0.	0.
(8) JOHN MCADAMS	1.50	 								
TREASURER		X		х				0.	0.	0.
(9) DANIELLE SPURLOCK	1.50									
DIRECTOR		Х						0.	0.	0.
(10) MAVIS GRAGG	1.50									
DIRECTOR		Х						0.	0.	0.
(11) WENDEE SMITH	1.50									
DIRECTOR		Х						0.	0.	0.
(12) DEAN URBAN	1.50									
DIRECTOR		Х						0.	0.	0.
(13) PHAIL WYNN	1.50									
DIRECTOR		Х						0.	0.	0.
(14) JENNIFER ZUCKERMAN	1.50								_	_
DIRECTOR		Х						0.	0.	0.
(15) TAHZ WALKER	1.50	l								
DIRECTOR	1	Х	_	_		_		0.	0.	0.
(16) JACK BLACKMER	1.50	٠,,						_	^	_
DIRECTOR	1 50	Х	_			_		0.	0.	0.
(17) SAM COOK	1.50	Į.,							^	_
DIRECTOR		Х						0.	0.	0.

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Section A. Officers, Directors, Tru	<u>istees, Key Em</u>	ploy	ees/	, an	d Hi	ighe	st (Compensated Employe	es (continued)				
(A)	(B)	(C)						(D)	(E)		İ	(F)	
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable			timate	
	hours per week					is bot or/trus		1	compensation		I	nount c	ρf
	(list any	H	T			T	T,	from the	from relate			other	ion
	hours for	directo						organization	organizatior (W-2/1099-MI			pensat om the	
	related	.e or 0	stee			satec		(W-2/1099-MISC)	(***2/1033-1811	30)		anizatio	
	organizations	truste	al trus		yee	mper		(** 2				d relate	
	below	Individual trustee or director	Institutional trustee	 	oldm	Highest compensated employee					orga	nizatio	กร
	line)	Indiv	Instit	Officer	Key employee	High	Former						
(18) SEAN WILSON	1.50												
DIRECTOR		X						0.		0.			0.
(19) SANDY SWEITZER	40.00												
EXECUTIVE DIRECTOR				X				89,084.		0.	:	3,12	25.
		1											
						1							
		1											
		1											
	1					T							
		1											
1b Sub-total			<u> </u>					89,084.		0.		3,12	25.
c Total from continuation sheets to Part \								0.		0.			0.
d Total (add lines 1b and 1c)								89,084.		0.		3,12	
Total number of individuals (including but) 000 of reportab	ıle.			
compensation from the organization	mot in mod to th	.000	, 1101	ou u		o,			,,000 01 10001141	,,,,			C
- San Barrell												Yes	No
3 Did the organization list any former office	r director or tri	ıste	e ke	ev er	mpla	ovee	or	highest compensated e	mplovee on	I			
line 1a? If "Yes," complete Schedule J for	,		,	,	•	,	,	•			3		Х
4 For any individual listed on line 1a, is the s													
and related organizations greater than \$1	•							•	ino organization		4		Х
5 Did any person listed on line 1a receive or			•					*******	idual for services				
rendered to the organization? If "Yes," coi	=				-	-		~			5		Х
Section B. Independent Contractors		00.	0. 0		<i>p</i> 0. 0								
Complete this table for your five highest complete.	ompensated in	dene	ende	ent c	cont	racto	ors t	that received more than	\$100,000 of cor	nnens	ation f	rom	
the organization. Report compensation fo		-										•	
(A)		-	0.10	<u>g</u> .		<u> </u>		(B)	<i>y</i> • • • • • • • • • • • • • • • • • • •		(C	2)	
Name and busines	s address	NO	CNC	E				Description of s	services	С	Comper		1
										1			
2 Total number of independent contractors	(including but r	not li	mite	ed to	tho	se li	sted	Labove) who received n	nore than				
\$100,000 of compensation from the organ						0		,					
	-											<u>aan /a</u>	047

Form 990 (2017) TRIANGLE
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ıts Its	1 a	Federated campaigns	1a					
irar oun		Membership dues						
s, G		Fundraising events						
ar J		Related organizations						
s, (Government grants (contributi		250,672.				
rigi	f	All other contributions, gifts, grant	ts, and					
the l		similar amounts not included abov	/e 1f	5,210,398.				
	g	Noncash contributions included in lines		3,191,162.				
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f		>	5,461,070.			
				Business Code				
e l	2 a	STEWARDSHIP MONITORING	FEES	541900	10,033.	10,033.		
Program Service Revenue	b	ILF USER FEES		541900	5,801.	5,801.		
Sur	С	ONSITE SCHOOL PROGRAMS	541900	5,500.	5,500.			
eve	d							
Pg	е							
<u> </u>	f	All other program service reve	nue					
		Total. Add lines 2a-2f			21,334.			
	3	Investment income (including						
		other similar amounts)	·	▶	80,306.			80,306.
	4	Income from investment of tax						
	5	Royalties	·	· ►				
		•	(i) Real	(ii) Personal				
	6 a	Gross rents	20,300					
	b	Less: rental expenses	0					
	С	Rental income or (loss)	20,300					
	d	Net rental income or (loss)			20,300.	20,300.		
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,241,875					
	b	Less: cost or other basis						
		and sales expenses	1,085,240	.				
	С	Gain or (loss)	156,635					
		Net gain or (loss)			156,635.			156,635.
۵		Gross income from fundraising						
ue		including \$	of	1 1				
eve		contributions reported on line		1 1				
<u>بر</u> ا		Part IV, line 18	6	a				
Other Rever	b	Less: direct expenses						
١	С	Net income or (loss) from fund	Iraising events					
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	8	a				
	b	Less: direct expenses						
	С	Net income or (loss) from gam	ing activities .					
	10 a	Gross sales of inventory, less	returns					
		and allowances	8	a				
	b	Less: cost of goods sold	l					
	С	Net income or (loss) from sales	s of inventory .					
		Miscellaneous Revenue		Business Code				
Ī		HUNTING LEASE INCOME		900099	5,181.	5,181.		
	b	MISC INCOME		900099	3,767.	3,767.		
	С							
	d	All other revenue						
		Total. Add lines 11a-11d			8,948.			
		Total revenue. See instructions.		▶ [5,748,593.	50,582.	0	. 236,941.

Form 990 (2017) TRIANGLE LAND Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must comp		ner organizations must co	omplete column (A)	
3001	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	02 000	F0 000	00 044	12 126
	trustees, and key employees	93,200.	59,220.	20,844.	13,136.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	577,596.	366,998.	120 170	81,420.
7	Other salaries and wages	511,590.	300,330.	129,178.	01,420.
8	Pension plan accruals and contributions (include	13,217.	8,477.	3,651.	1 090
•	section 401(k) and 403(b) employer contributions)	75,747.	49,075.	16,780.	1,089. 9,892.
9	Other employee benefits	50,377.	32,910.	10,780.	7,244.
10	Payroll taxes	30,311.	32,910.	10,223.	7,244•
11	Fees for services (non-employees):				
	Management	18,704.	18,704.		
	Legal	10,704.	10,704.		
	Accounting				
	Lobbying Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	77,119.	36,310.	14,200.	26,609.
12	Advertising and promotion	6,284.	6,191.	,	26,609. 93.
13	Office expenses	27,540.	22,158.	2,051.	3,331.
14	Information technology	15,047.	10,464.	1,255.	3,328.
15	Royalties	-	-	-	
16	Occupancy	56,324.	38,533.	5,135.	12,656.
17	Travel	28,869.	19,095.	6,792.	2,982.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	83,128.	69,959.	9,530.	3,639.
23	Insurance	15,058.	10,976.	1,166.	2,916.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	BOOKKEEPING, CONSULTING	48,560.	0.	48,560.	0.
b	MEMBERSHIPS, DUES, AND	40,754.	8,925.	14,536.	17,293.
c	APPRAISAL FEES AND CLOS	35,415.	35,415.	0.	0.
d	PROPERTY TAXES	32,284.	32,284.	0.	0.
е	All other expenses SEE SCH O	172,929.	88,122.	60,086.	24,721.
25	Total functional expenses. Add lines 1 through 24e	1,468,152.	913,816.	343,987.	210,349.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2017)

Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
				,	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			135,069.	1	247,281.
	2	Savings and temporary cash investments			955,126.	2	1,457,605.
	3	Pledges and grants receivable, net	212,535.	3	335,225.		
	4	Accounts receivable, net		4	·		
	5	Loans and other receivables from current and for					
	-	trustees, key employees, and highest compensa					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect		_			
ω		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net				7	
¥	8	Inventories for sale or use				8	
	9				19,293.	9	18,511.
	10a	Land, buildings, and equipment: cost or other	i i				
		basis. Complete Part VI of Schedule D	10a	1,227,788.			
	b	Less: accumulated depreciation	10b	1,227,788. 571,271.	641,634.	10c	656,517.
	11	Investments - publicly traded securities	3,747,841.	11	3,858,798.		
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			100,598,881.	15	104,167,908.
	16	Total assets. Add lines 1 through 15 (must equal			106,310,379.	16	110,741,845.
	17	Accounts payable and accrued expenses			75,834.	17	76,712.
	18	Grants payable		18			
	19	Deferred revenue	42,982.	19	1,913.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former					
≣		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	,	·	68,069.		70 050
		Schedule D			186,885.	25	78,958. 157,583.
	26	Total liabilities. Add lines 17 through 25	· - I	У	100,003.	26	137,303.
		Organizations that follow SFAS 117 (ASC 958		ck nere 🚩 🔼 and			
ĕ	07	complete lines 27 through 29, and lines 33 and			20,287,300.	27	20,499,225.
lan	27 28	Unrestricted net assets			3,037,772.	28	4,130,420.
I Ba	29	Temporarily restricted net assets Permanently restricted net assets			82,798,422.	29	85,954,617.
Fund Balances	29	Organizations that do not follow SFAS 117 (A		S) check here	02//30/1220	23	03/331/01/1
F		and complete lines 30 through 34.	30 330	oj, check here 🕨 🗀			
ts c	30	Capital stock or trust principal, or current funds				30	
sse	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in				32	
Š	33	Total net assets or fund balances			106,123,494.	33	110,584,262.
	34	Total liabilities and net assets/fund balances			106,310,379.	34	110,741,845.
		nab a. not accoto/faria balarioco			, ,		, , , , , , , , , , , ,

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8 9	5 1	,74 ,46 ,28	8,5 8,1 0,4 3,4	52. 41.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	-					
	column (B))	10	110	, 58	4,2	62.	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
			_		Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		I				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
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: X Separate basis Consolidated basis Both consolidated and separate basis						
Ü	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?		- 1	2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si						
	Act and OMB Circular A-133?	.9		За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud	lit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	<u></u>	3b			
				Form	990	(2017)	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization TRIANGLE LAND CONSERVANCY, INC. 58-1514406 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 in 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. 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. 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 ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2017 TRIANGLE LAND CONSERVANCY, INC. 58-15144

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8671103.	3044517.	4283961.	3894695.	5461070.	25355346.
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	0.671100	2044517	4000061	2004605	F 4 C 1 O 7 O	25255246
	Total. Add lines 1 through 3	8671103.	3044517.	4283961.	3894695.	5461070.	25355346.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						5253216.
_	column (f)						20102130.
	Public support. Subtract line 5 from line 4.						20102130.
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(a) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 4	8671103.	(b) 2014 3044517.	(c) 2015 4283961.	3894695.	5461070.	(f) Total 25355346.
	Gross income from interest,	00711001	30113170	12033010	30310331	31010700	233333101
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	188,558.	101,467.	101,153.	96,004.	105,787.	592,969.
9	Net income from unrelated business				27,222		7000
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	25,201.	9,634.	4,321.	46,335.	3,767.	89,258.
11	Total support. Add lines 7 through 10						26037573.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	80,439.
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2017 (I					14	77.20 %
	Public support percentage from 2016					15	71.46 %
16a	33 1/3% support test - 2017. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the o	-					
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac				· ·	_	
	meets the "facts-and-circumstances"	-					
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						e ▶ □
40	organization meets the "facts-and-circ		-				
ıδ	Private foundation. If the organizatio	n dia not check a	มบx ชก แก่ย 13, 16	a, 100, 1/a, 0r 1/k	ט, כחפכא נחוא box a	ına see mstructior	ıs 🟲 📖

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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services 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							
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	-						
/ 6	Amounts included on lines 1, 2, and						
,	3 received from disqualified persons Amounts included on lines 2 and 3 received						_
•	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						_
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						<u> </u>
	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
108	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2017 (I	ine 8, column (f) d	ivided by line 13, o	column (f))		15	%
16	Public support percentage from 2016	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	17 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2017. If the						
•	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2016. If the						
•	line 18 is not more than 33 1/3%, che						
20							

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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 (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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		
	3a		
	3b		
	0.0		
	3с		
	30		
	4a		
	4b		
	4c		
	_		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	134		
	10h		
~ ^	10b 90 or 99	M E2	2017
11 9	an or as	7U-EZ	2017

Pa	rt IV	Supporting Organizations (continued)			
		continuedy		Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_		the governing body of a supported organization?	11a		
h		ily member of a person described in (a) above?	11b		
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
		3. Type I Supporting Organizations	110		
000	tion L	5. Type I oupporting Organizations		Yes	No
4	Did +b	diverters twinters or membership of one or more supported examinations have the negree to		162	NO
1		e directors, trustees, or membership of one or more supported organizations have the power to			
		arly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
		ear? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		olled the organization's activities. If the organization had more than one supported organization,			
		ibe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
		izations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	organ	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	II how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
<u>Sec</u>	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 trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	pported organization(s).	1		
Sec	tion [D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	ization'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			
	organ	ization'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			
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	ason of the relationship described in (2), did the organization's supported organizations have a			
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	suppo	orted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а		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.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	s).	
2		ties Test. Answer (a) and (b) below.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	apported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer (a) and (b) below.			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-		es of each of the supported organizations? Provide details in Part VI.	За		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections 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		
Sect	ion 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 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting org	ganization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2017

Par	rt V │ Type III Non-Functionally Integrated 50	9(a)(3) Supporting Org	anizations _(continued)	
Secti	ion D - Distributions		•	Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exen			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organizatior	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive	е	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Schedule A	(Form 990 or 990-E2	Z) 2017 TKI.	ANGLE LAI	ND CONSERV	/ANCY, IN	C.	58-1514406 Pag	ge 8
Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sect Section D, lines 5, 0	Information lines 1, 2, 3b, 3 tion D, lines 2 a	n. Provide the ex 3c, 4b, 4c, 5a, 6, and 3; Part IV, Se	xplanations require 9a, 9b, 9c, 11a, 11 ction E, lines 1c, 2	d by Part II, line 1 lb, and 11c; Part a, 2b, 3a, and 3b	10; Part II, line 17a or IV, Section B, lines 1	17b; Part III, line 12; and 2; Part IV, Section C, Section B, line 1e; Part V,	
	(See instructions.)							

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

TRIANGLE LAND CONSERVANCY, INC.

Employer identification number 58-1514406

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?	······································	Yes No
Par	t II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) X Preservation of a his	torically important land area
	X Protection of natural habitat		tified historic structure
	X Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a 92
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶ 0		
4	Number of states where property subject to conservation ea	asement is located ▶ 1	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	it holds?	X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cor	nservation easements during the year
	▶ 814		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	▶\$ <u>21,760.</u>		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
	conservation easements.		
Par		•	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of po	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

	t III Organizations Maintaining C	collections of A			or Other	Simila		ts/contin		ige Z
	Using the organization's acquisition, accessi									
Ū	(check all that apply):	on, and other record	is, check any or the	Tollowing tha	it are a sign	illioant (350 01 113	CONCOLIO	i itemi	3
а	Public exhibition	d	L can or exc	hange progra	me					
b	Scholarly research	e		nange progra	11113					
c	Preservation for future generations	Č								
4	Provide a description of the organization's co	ollections and explain	n how they further th	he organizati	on's exem	nt nurnc	se in Par	XIII		
5	During the year, did the organization solicit o						oo iiii ai	. 7		
	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, Par		3-				,,	,		
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other as	sets not in	ncluded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:							
		•	· ·					Amount		
С	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
	Ending balance					1f		_		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ustodial acco	unt liability	y?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete i	f the organization an	swered "Yes" on Fo	rm 990, Part						
		(a) Current year	(b) Prior year	(c) Two year		•	ears back			
	Beginning of year balance	2,110,602.	1,971,442.		5,998.		65,228.			272.
b	Contributions	36,793.	45,426.		1,091.		30,643.			511.
	Net investment earnings, gains, and losses	106,934.	212,983.	-44	1,195.		13,163.		139,	075.
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	86,897.	119,249.	84	1,452.		83,036.		52,	630.
	Administrative expenses	0.165.430	0 110 600	1 000	1.440		05 000	1	0.65	000
-	End of year balance	2,167,432.	2,110,602.		L,442.	2,0	25,998.	1,	865,	228.
2	Provide the estimated percentage of the curr			a)) held as:						
	Board designated or quasi-endowment ► Permanent endowment ► 53.00	4.00	_%							
		3.0 % %								
С	The percentages on lines 2a, 2b, and 2c sho									
22	Are there endowment funds not in the posse	•	ation that are hold a	nd administa	rad for the	organiz	ation			
Ja	by:	SSION OF THE Organiza	ation that are neid a	nu auministe	red for the	Organiz	ation	Г	Yes	No
	(i) unrelated organizations							3a(i)	X	110
	(ii) related organizations							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza							3b		
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 990), Part IV, line 11a. S	See Form 990), Part X, liı	ne 10.				
	Description of property	(a) Cost or o	ther (b) Cost	or other	(c) Acc	umulate	d	(d) Book	value	
		basis (investr		(other)		eciation				
1a	Land									
	Buildings		46	1,902.	24	47,52	LO.	214	<u>,</u> 3	92.
	Leasehold improvements									
	Equipment			4,878.		53,13				68.
_	Othor		5.8	1 008.	1'	70 6'	51 .T	410) 3	57.

Schedule D (Form 990) 2017

656,517.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII	Investments	- Other Securiti	e

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" (
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.		•	
Complete if the organization answered "Yes" of	on Form 990, Part IV	, line 11c. See Form 990,	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 000 Part IV	line 11d See Form 900	Part V line 15
	Description	, lille 11d. See 1 Oilli 990,	(b) Book value
(1) OTHER RECEIVABLES			20,316.
(2) CONSERVATION LAND AND EASI	EMENTS		102,187,297.
(3) AGENCY ENDOWMENT ACCOUNTS			1,955,307.
(4) DEPOSITS AND OTHER			4,987.
(5)			<u> </u>
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)		▶ 104,167,908.
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV		n 990, Part X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes		60 610	
(2) ACCRUED COMPENSATION		69,649.	
(3) DEFERRED RENT		7,409.	
(4) TENANT DEPOSITS		1,900.	
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (b) must equal Form 990, Part Y, col. (B) line	25)	78,958.	
Total. (Column (b) must equal Form 990, Part X, col. (B) line Liability for uncertain tax positions. In Part XIII. provide			nancial statements that reports the
2. Liability for uncertain tax positions. In Part XIII, provide	THE TENT OF THE HOOTH	ote to the organization's fi	nanciai statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

JOI TO GGIO D	(1 01111 000) =011			· · · · · · · · · · · · · · · · · ·	
Part XI	Reconciliation of	of Revenue per A	udited Financia	al Statements With R	Revenue per Return.

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	5,909,579.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	180,327.		
b	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	180,327.
3	Subtract line 2e from line 1			3	5,729,252.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,341.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	19,341.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,748,593.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts W	ith Expenses per	Retu	rn.
,	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	1,448,811.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,448,811.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,341.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	19,341.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,468,152.
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b	4b			19,341. 1,468,152.

Part XIII Supplemental Information.

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

PART II, LINE 9:

THE ORGANIZATION REPORTS DONATED CONSERVATION EASEMENTS AS CONTRIBUTIONS

OF LAND IN ITS STATEMENT OF ACTIVITIES (REVENUE AND EXPENSE STATEMENT),

WITH AN OFFSETTING RECORDING OF A LAND ASSET ON THE BALANCE SHEET, USING

THE FAIR MARKET VALUE (APPRAISED VALUE) OF THE CONSERVATION EASEMENT.

PURCHASED CONSERVATION EASEMENTS ARE RECORDED ON THE BALANCE SHEET AT COST

AND ARE CLASSIFIED AS LAND ASSETS. THE FOLLOWING EXCERPT FROM THE

ORGANIZATION'S AUDITED FINANCIAL STATEMENTS DESCRIBES ITS ACCOUNTING

POLICY FOR CONSERVATION EASEMENTS <CONSERVATION LAND AND EASEMENTS ARE

RECORDED AT COST IF PURCHASED OR, IF DONATED, AT APPRAISED VALUE AT THE

DATE OF DONATION.>

Part XIII Supplemental Information (continued)
PART V, LINE 4:
TRIANGLE LAND CONSERVANCY'S ENDOWMENT FUNDS PROVIDE LONG-TERM SUPPORT FOR
THE STEWARDSHIP OF ITS CONSERVATION LAND AND EASEMENTS. ENDOWMENT FUNDS
HELD AND ADMINISTERED FOR THE ORGANIZATION BY UNRELATED ORGANIZATIONS ARE
PRIMARILY USED TO FULFILL STEWARDSHIP RESPONSIBILITIES OR FOR THE
CONSERVANCY'S GENERAL OPERATING PURPOSES.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

TRIANGLE LAND CONSERVANCY, INC. Employer identification number 58-1514406

р.	TRIANGLE LAN	ID CONS	ERVANCY,	INC.	30-1	514406
Рa	rt I Types of Property	1-1	(I-)	163		
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	•
1	Art - Works of art					
2	Art - Historical treasures					
3	Art - Fractional interests					
ŀ	Books and publications					
,	Clothing and household goods					
	Cars and other vehicles					
	Boats and planes					
	Intellectual property					
	Securities - Publicly traded	X	10	48,602.		
)	Securities - Closely held stock					
	Securities - Partnership, LLC, or					
	trust interests					
	Securities - Miscellaneous					
	Qualified conservation contribution -					
	Historic structures					
	Qualified conservation contribution - Other	X	3	3,103,300.	APPRAISAL	
	Real estate - Residential					
	Real estate - Commercial					
	Real estate - Other	X	1	29,084.	APPRAISAL	
	Collectibles					
1	Food inventory					
	Drugs and medical supplies					
	Taxidermy					
	Historical artifacts					
	Scientific specimens					
	Archeological artifacts					
,	Other (VARIOUS)	X	5	10,176.	FAIR VALUE	
	Other (
	Other (
	Other (
	Number of Forms 8283 received by the organ	ization durin	g the tax vear for c	contributions		
	for which the organization completed Form 82		•			2
		,, -		9		Yes
a	During the year, did the organization receive b	ov contributio	on any property rei	norted in Part L lines 1 throu	gh 28 that it	1.55
_	must hold for at least three years from the dat					
	exempt purposes for the entire holding period					30a
h	If "Yes," describe the arrangement in Part II.					304
D	Does the organization have a gift acceptance	nolicy that re	equires the review	of any nonstandard contribu	ıtions?	31 X
	Does the organization have a gift acceptance					
d						32a
h	•••••					JZd
	If "Yes," describe in Part II.	oolumn (a) f-	ratuma of near and	y for which column (a) is the	alkad	
3	If the organization didn't report an amount in o	column (c) fo	r a type of propert	y for which column (a) is che	eckea,	
_	describe in Part II.					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

Schedule M	(Form 990) 2017	TRIANGLE	LAND	CONSERVANCY	, INC.	58-1514406	Page 2
Part II	Supplemental	I Information.	Provide th	ne information required b	y Part I, lines	30b, 32b, and 33, and whether the organizacceived, or a combination of both. Also com	ation
-							

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

2017
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

TRIANGLE LAND CONSERVANCY, INC.

Employer identification number 58-1514406

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CLEAN WATER, NATURAL HABITAT, AGRICULTURAL USES, OUTDOOR RECREATION,

AND SCENIC VIEWS IN CHATHAM, DURHAM, JOHNSTON, LEE, ORANGE, AND WAKE

COUNTIES IN NORTH CAROLINA, INCLUDING PURCHASED AND DONATED LAND AND

CONSERVATION EASEMENTS. CONSERVATION LAND HELD BY TRIANGLE LAND

CONSERVANCY IS MANAGED TO PROTECT ITS NATURAL RESOURCES AND IS OFTEN

AVAILABLE FOR SCIENTIFIC AND EDUCATIONAL PURPOSES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITY ACTION, AND COLLABORATION. SINCE 1983, TLC HAS PROTECTED OVER

18,000 ACRES, INCLUDING 138 MILES OF STREAMS, THROUGH PURCHASE AND

CONSERVATION EASEMENTS IN CHATHAM, DURHAM, JOHNSTON, LEE, ORANGE, AND

WAKE COUNTIES IN NORTH CAROLINA. TLC OWNS AND MANAGES 7 PRESERVES

ACROSS THE REGION: 6 ARE OPEN TO THE PUBLIC DAILY AND IRVIN FARM IS

USED BY HUNDREDS OF CHILDREN AND REFUGEE FARMERS EACH YEAR. TLC LED THE

EFFORT TO PROTECT THREE MORE PRESERVES THAT ARE NOW OWNED AND MANAGED

BY LOCAL GOVERNMENTS. FINALLY, AN 8TH PRESERVE IN WAKE COUNTY IS

CURRENTLY BEING PREPARED FOR FREE, PUBLIC USE IN THE NEAR FUTURE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

IN OUR SIX-COUNTY REGION. IN FY 2018, TLC REALIZED ITS MISSION BY

PROTECTING AN ADDITIONAL 224 ACRES OF PRIORITY CONSERVATION LAND,

COMPRISED OF 30 ACRES PURCHASED OUTRIGHT AND 194 ACRES PROTECTED BY

CONSERVATION EASEMENTS. SAFEGUARDING LOCAL FARMS AND FOOD AND

PROTECTING CLEAN WATER ARE CONSERVATION PRIORITIES FOR TLC, AND TO THAT

END, 101 OF THE 224 ACRES PROTECTED THIS YEAR WERE FARMLAND AND ALMOST

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization **Employer identification number** TRIANGLE LAND CONSERVANCY, INC. 58-1514406 2 MILES OF STREAMS WERE PROTECTED (OVER 9,684 FEET). CONSERVATION EASEMENTS ARE LEGAL AGREEMENTS BETWEEN A LANDOWNER AND A LAND TRUST THAT LIMITS USES OF THE LAND IN ORDER TO PROTECT ITS CONSERVATION VALUES IN PERPETUITY. SPECIFIC TERMS OF INDIVIDUAL EASEMENTS VARY, BUT IN GENERAL THEY RESTRICT PROPERTIES FROM BEING SUBDIVIDED, DEVELOPED, PAVED, OR EXPLOITED IN OTHER WAYS. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: MAINTENANCE, TREE PLANTING, AND INVASIVE SPECIES REMOVAL. TLC STAFF AND VOLUNTEERS BUILT AND OPENED TO THE PUBLIC MORE THAN 3.5 MILES OF HIKING TRAILS AT OUR BRUMLEY FOREST NATURE PRESERVE AND 3.5 MILES OF NEW HIKING TRAIL AT OUR WHITE PINES NATURE PRESERVE THAT WILL OPEN IN FALL OF 2018. VOLUNTEERS WHO SERVE REGULARLY WITH TLC THROUGH THE CONSERVATION CORPS OR WALNUT WEDNESDAY PROGRAM CONTRIBUTED 777 HOURS TO STEWARDSHIP ACTIVITIES THIS YEAR. AN ADDITIONAL 1,088 HOURS WERE DONATED DURING CORPORATE WORKDAYS, WEEKEND SERVICE EVENTS, AND PARTNERSHIP PROJECTS. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: OF DURHAM AND ORANGE COUNTIES AND OTHERS PARTICIPATED IN THESE PROGRAMS. AS PART OF OUR EFFORTS TO EXPAND OUR AUDIENCE AND CELEBRATE CONSERVATION FOR EVERYONE, WE HELD 3 WILD IDEAS PROGRAMS IN FY 2018. "WILD IDEAS FOR WALNUT HILL" INTRODUCED THE RALEIGH COMMUNITY TO OUR NEXT FARM AND NATURE PRESERVE, SARAH AND BAILY WILLIAMSON FARM PRESERVE AT WALNUT HILL IN WAKE AND JOHNSTON COUNTIES. 160 ATTENDEES HEARD FROM

SPEAKERS ABOUT THEIR EXPERIENCES AND PLANS FOR THE PROPERTY, THEN

Name of the organization

Employer identification number

TRIANGLE LAND CONSERVANCY, INC. 58-1514406

VISITED 15 EXPO ORGANIZATIONS AND HAD THE OPPORTUNITY TO ANSWER 5

COMMUNITY INPUT QUESTIONS, RESULTING IN 138 SUGGESTIONS. "WILD IDEAS

FOR CLEAN CREEKS" CELEBRATED THE 10TH ANNIVERSARY OF DURHAM CREEK WEEK

WITH 6 SPEAKERS, 20 EXPO ORGANIZATIONS, AND 196 ATTENDEES LEARNING HOW

TO CLEAN AND CONSERVE OUR WATERWAYS. FINALLY WE HOSTED OUR FIRST "WILD

IDEAS ON THE GO," DESIGNED TO EDUCATE EMPLOYEES OF OUR CORPORATE

PARTNERS ABOUT WHERE AND HOW THEY CAN GET OUTSIDE IN THE TRIANGLE.

IN TOTAL, TLC HOSTED 63 EVENTS FOR THE PUBLIC, WHICH 890 PEOPLE

ATTENDED; ALL BUT 3 OF THESE WERE HELD ON PROPERTIES OWNED OR MANAGED

BY TLC TO BEST REPRESENT OUR WORK. 8 PROGRAMS WERE SPECIFICALLY

DESIGNED AND MARKETED FOR FAMILIES AS PART OF OUR GET WILD! SERIES AND

WERE ATTENDED BY 111 PEOPLE. PRIVATE EVENTS FOR MEMBERS HELP KEEP

STAKEHOLDERS APPRISED OF ORGANIZATIONAL ACTIVITIES, ACCOMPLISHMENTS,

AND GOALS.

IN ADDITION TO STEWARDSHIP VOLUNTEERS, OTHER DEDICATED VOLUNTEERS

SERVING ON THE TLC BOARD AND GOVERNANCE COMMITTEES CONTRIBUTED

APPROXIMATELY 436 VOLUNTEER HOURS, SETTING THE COURSE OF OUR

CONSERVATION WORK FOR THIS AND FUTURE YEARS. VOLUNTEERS HELPING IN THE

OFFICE, TEACHING ENVIRONMENTAL EDUCATION PROGRAMS, LEADING HIKES,

REPRESENTING TLC AT EVENTS AND OTHER OUTREACH ACTIVITIES DONATED 340.5

HOURS OF TIME. IN TOTAL, VOLUNTEERS CONTRIBUTED 2,641.5 HOURS TO THE

MISSION OF SAVING WILD AND WORKING LANDS FOR TOMORROW THROUGH

STEWARDSHIP, CATALYZING COMMUNITY ACTION, AND COLLABORATION.

COMMUNICATIONS: TLC CONTINUES TO INCREASE PUBLIC AWARENESS ABOUT

CONSERVATION IN OUR REGION AND ALL OF THE ORGANIZATION'S PROGRAMMATIC

Name of the organization TRIANGLE LAND CONSERVANCY, INC.

Employer identification number 58-1514406

WORK IN A NUMBER OF WAYS OTHER THAN PROGRAMS AND SPECIAL EVENTS,

INCLUDING AT LEAST 2 MONTHLY EMAIL NEWSLETTERS, WHICH WERE SENT TO MORE

THAN 7,000 SUBSCRIBERS. TLC MAINTAINS A ROBUST WEBSITE THAT IS FULLY

INTEGRATED WITH ITS STRONG SOCIAL MEDIA CHANNELS INCLUDING A FACEBOOK

FOLLOWING OF OVER 7,000. THE WEBSITE'S BLOG IS UPDATED THROUGHOUT THE

YEAR WITH ORGANIZATIONAL NEWS AND ALSO INCLUDES AN EVENTS CALENDAR WITH

REGISTRATION FEATURES.

IN FY 2018, TLC ISSUED PRESS RELEASES, MEDIA ADVISORIES, LETTERS TO THE EDITOR, AND EARNED MEDIA COVERAGE FOR ORGANIZATIONAL WORK, SOME EXAMPLES OF WHICH INCLUDE:

HTTPS://WWW.INDYWEEK.COM/INDYWEEK/BEST-OF-THE-TRIANGLE-2018-LOCAL-COLOR
HTTPS://WWW.CBS17.COM/NEWS/TRIANGLE-LAND-CONSERVANCY-WORKS-TO-PRESERVEHTTPS://WWW.OURSTATE.COM/HUNTING-WILD-BEER/.

TLC'S BIANNUAL 16-PAGE PRINT NEWSLETTER HAS BEEN REFRESHED WITH A NEW

NAME FOR FY 2018: CONFLUENCE. ALONG WITH THE ORGANIZATION'S ANNUAL

REPORT, EACH ISSUE IS DISTRIBUTED TO MORE THAN 2,500 MEMBERS ACROSS THE

REGION AND SHARED AT EVENTS THROUGHOUT THE YEAR.

RADIO ANNOUNCEMENTS WERE STRATEGICALLY BROADCAST OVER THE COURSE OF 4
WEEKS THROUGHOUT FY 2018 TO PROMOTE TLC AND ITS PROGRAMS. TLC ALSO
LEVERAGED SUPPORT FROM PARTNER ORGANIZATIONS TO ENGAGE A MEDIA FIRM TO
BEGIN WORK ON A SHORT FILM THAT HIGHLIGHTS THE CITY OF RALEIGH'S
WATERSHED PROTECTION PROGRAM AND OUR WORK TO PROTECT OUR REGION'S
WATERSHED. THE FILM WILL PREMIER IN THE FALL OF 2018. ADDITIONALLY, WE
UTILIZE OUR PUBLICALLY ACCESSIBLE PROPERTIES TO COMMUNICATE ABOUT
CONSERVATION WITH SIGNAGE AND KIOSKS.

Name of the organization TRIANGLE LAND CONSERVANCY, INC.

Employer identification number 58-1514406

USING PRINT AND DIGITAL COMMUNICATIONS CHANNELS, TLC DESIGNED AND

DEPLOYED SEVERAL THEMATIC FUNDRAISING CAMPAIGNS THROUGHOUT THE YEAR

THAT MET OR EXCEEDED PUBLISHED GOALS, INCLUDING THE GIVING TUESDAY

CAMPAIGN, THE BRUMLEY CHALLENGE, AND 10 DAYS OF TLC.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERSHIP IN TLC IS OPEN TO ALL INDIVIDUALS WHO, OR ENTITIES THAT, MEET
THE CRITERIA FOR MEMBERSHIP ESTABLISHED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7A:

MEMBERS OF TLC SHALL ELECT THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS
SHALL NOMINATE A SLATE OF CANDIDATES AND SUBMIT IT TO THE MEMBERSHIP WITH
AT LEAST TWENTY (20) DAYS NOTICE. MEMBERS SHALL VOTE FOR INDIVIDUAL
CANDIDATES ON THIS SLATE. MEMBERS MAY PROPOSE CANDIDATES BY A PETITION OF
TEN (10) OR MORE MEMBERS ADDRESSED TO THE BOARD OF DIRECTORS AT ANY TIME.

IF RECEIVED MORE THAN TWENTY (20) DAYS BEFORE A SCHEDULED VOTE, THE NAMES
OF THE PROPOSED CANDIDATES SHALL BE INCLUDED ON THE BALLOT. IF A PETITION
IS RECEIVED LESS THAN TWENTY (20) DAYS OF A SCHEDULED VOTE, THE BOARD OF
DIRECTORS MAY, AT ITS SOLE DISCRETION, SEND A REVISED BALLOT TO THE MEMBERS
THAT INCLUDES THE NAMES ON THE PETITION, OR HOLD THE NAMES TO BE INCLUDED
ON THE BALLOT FOR THE IMMEDIATELY FOLLOWING ELECTION CYCLE, OR IGNORE THE
LATE SUBMISSION.

FORM 990, PART VI, SECTION B, LINE 11B:

PRIOR TO FILING FORM 990, THE ORGANIZATION'S FINANCE AND INVESTMENT

COMMITTEE REVIEW A COPY OF THE RETURN AND THEN FORWARD IT TO THE BOARD OF

DIRECTORS FOR THEIR APPROVAL.

Name of the organization TRIANGLE LAND CONSERVANCY, INC.

Employer identification number 58-1514406

FORM 990, PART VI, SECTION B, LINE 12C:

OFFICERS AND DIRECTORS REVIEW THE CONFLICT OF INTEREST POLICY AT EACH BOARD AND COMMITTEE MEETING. THE ORGANIZATION'S POLICIES ARE MADE KNOWN TO INCOMING OFFICERS AND DIRECTORS DURING BOARD MEMBER ORIENTATION.

ADDITIONALLY, OFFICERS, DIRECTORS, AND EMPLOYEES ARE PROVIDED WITH A COPY OF THE POLICY EACH YEAR AND MUST SIGN AN ACKNOWLEDGEMENT THAT THEY HAVE READ AND AGREE TO ABIDE BY THE POLICY. CONFLICTS OF INTEREST RELATED TO BOARD DECISIONS, IF ANY, ARE DULY NOTED IN THE WRITTEN BOARD MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION'S PROCESS FOR DETERMINING EXECUTIVE COMPENSATION INCLUDES
THE FOLLOWING:

(1) OBTAINS COMPENSATION DATA FROM THREE SIMILAR POSITIONS IN SIMILAR

COMMUNITIES, (2) COMPENSATION MUST BE APPROVED BY THE EXECUTIVE COMMITTEE,

EXCLUSIVE OF VOTING PARTICIPATION BY THE EXECUTIVE, AND (3) THE EXECUTIVE

COMMITTEE MUST DOCUMENT THE BASIS FOR ITS DETERMINATION OF COMPENSATION,

INCLUDING THE TERMS AND DATE OF THE APPROVED COMPENSATION, THE COMMITTEE

MEMBERS PRESENT DURING THE DISCUSSION AND THOSE WHO APPROVED THE TERMS, THE

COMPARABILITY DATA THAT WAS RELIED UPON BY THE COMMITTEE AND HOW THE DATA

WAS OBTAINED, AND ANY ACTIONS BY A MEMBER OF THE COMMITTEE HAVING A

CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION PUTS ITS GOVERNING DOCUMENTS AND FORM 990 ON ITS WEBSITE.

IN ADDITION, THE ORGANIZATION PRODUCES AN ANNUAL REPORT THAT INCLUDES

FINANCIAL INFORMATION, WHICH IS MAILED TO ITS CONTRIBUTORS. THE CONFLICT

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization TRIANGLE LAND CONSERVANCY, INC.	Employer identification number 58-1514406
OF INTEREST POLICY IS SHARED WITH THE BOARD OF DIRECTORS	AND ORGANIZATION
STAFF IN THE APPROPRIATE MANUALS, AT ORIENTATION, AND AND	NUALLY. THE
ORGANIZATION'S FORM 1023 IS AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSE	ES:
PRINTING AND PUBLICATIONS:	
PROGRAM SERVICE EXPENSES	17,970.
MANAGEMENT AND GENERAL EXPENSES	129.
FUNDRAISING EXPENSES	7,907.
TOTAL EXPENSES	26,006.
BANK AND INVESTMENT FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	20,095.
FUNDRAISING EXPENSES	5,884.
TOTAL EXPENSES	25,979.
STAFF TRAINING AND DEVELOPMENT :	
PROGRAM SERVICE EXPENSES	3,444.
MANAGEMENT AND GENERAL EXPENSES	16,677.
FUNDRAISING EXPENSES	677.
TOTAL EXPENSES	20,798.
CONFERENCES AND MEETINGS:	_
PROGRAM SERVICE EXPENSES	13,735.
MANAGEMENT AND GENERAL EXPENSES	5,319.
FUNDRAISING EXPENSES	753.
TOTAL EXPENSES	19,807.
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Name of the organization TRIANGLE LAND CONSERVANCY, INC.	Employer identification number 58-1514406
OMITED .	
OTHER :	0.201
PROGRAM SERVICE EXPENSES	
MANAGEMENT AND GENERAL EXPENSES	4,195.
FUNDRAISING EXPENSES	1,169.
TOTAL EXPENSES	13,755.
TELEPHONES, INTERNET AND WEBSITE :	
PROGRAM SERVICE EXPENSES	8,948.
MANAGEMENT AND GENERAL EXPENSES	1,728.
FUNDRAISING EXPENSES	2,324.
TOTAL EXPENSES	13,000
CONTRIBUTIONS AND IN-KIND :	
PROGRAM SERVICE EXPENSES	344.
MANAGEMENT AND GENERAL EXPENSES	9,977.
FIINDDATCING FYDENCEC	0.
TOTAL EXPENSES	10,321.
UTILITIES :	
PROGRAM SERVICE EXPENSES	8,391.
MANAGEMENT AND GENERAL EXPENSES	419.
FUNDRAISING EXPENSES	1,049.
TOTAL EXPENSES	9,859.
VEHICLE EXPENSE :	
PROGRAM SERVICE EXPENSES	9,744.
MANAGEMENT AND GENERAL EXPENSES	0.
732212 09-07-17	Schedule O (Form 990 or 990-EZ) (2017

Name of the organization TRIANGLE LAND CONSERVANCY, INC.	Employer identification number 58-1514406
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	9,744.
POSTAGE AND MAILING COSTS :	
PROGRAM SERVICE EXPENSES	4,694.
MANAGEMENT AND GENERAL EXPENSES	145.
FUNDRAISING EXPENSES	4,360.
TOTAL EXPENSES	9,199.
EQUIPMENT RENTAL AND MAINTENANCE :	
PROGRAM SERVICE EXPENSES	6,661.
MANAGEMENT AND GENERAL EXPENSES	1,402.
FUNDRAISING EXPENSES	598.
TOTAL EXPENSES	8,661.
OTHER LAND AND BUILDING EXPENSES :	
PROGRAM SERVICE EXPENSES	5,800.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,800.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, O	COL A 172,929.