EXTENDED TO MAY 15, 2023

Return of Organization Exempt From Income Tax

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

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

Open to Public

OMB No. 1545-0047

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. 2022 A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, Check if applicable: C Name of organization D Employer identification number Address change TRIANGLE LAND CONSERVANCY, INC. Name change 58-1514406 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 514 SOUTH DUKE STREET (919)908-8809 24,496,827. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 27701 DURHAM, NC H(a) Is this a group return Applica-tion pending F Name and address of principal officer: SANDRA SWEITZER for subordinates? Yes X No 514 SOUTH DUKE STREET, DURHAM, NC 27701 H(b) Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.TRIANGLELAND.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > L Year of formation: 1983 M State of legal domicile: NC ☐ Trust Part I Summary Briefly describe the organization's mission or most significant activities: THE PURPOSE OF TRIANGLE LAND **Activities & Governance** CONSERVANCY IS TO CONSERVE LAND FOR OPEN SPACE, [CONT. ON SCHED. O] if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 29 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. **Prior Year Current Year** 10,343,631. 14,777,783. Contributions and grants (Part VIII, line 1h) 8 5,628,953. 3,401,609. Program service revenue (Part VIII, line 2g) 253,737. 504,890. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 24,398. 28,799. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 $\overline{18,713,081}$ 16,250,719. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 25,000. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,478,691. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,170,661. 16a Professional fundraising fees (Part IX, column (A), line 11e) 53,898. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,002,017. 1,233,404. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,172,678. 2,790,993. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 14,078,041. 15,922,088. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 138,707,628. 152,779,230. 20 Total assets (Part X, line 16) 3,131,726. 3,141,596. 21 Total liabilities (Part X, line 26) 三年 135,575,902. 149,637,634 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign SANDRA SWEITZER, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature P00166372 PAUL B. MILLER Paid self-employed Firm's name DEAN DORTON ALLEN FORD, Firm's EIN ▶ 27 – 3858252 Preparer

RALEIGH, NC 27609

Firm's address ► 4060 BARRETT DRIVE

May the IRS discuss this return with the preparer shown above? See instructions

Use Only

No

X Yes

Phone no. 919-782-9265

	990 (2021) TRIANGLE LAND CONSERVANCY, INC.	58-1514406	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	Х
1	Briefly describe the organization's mission: TRIANGLE LAND CONSERVANCY (TLC) STRIVES TO CREATE A HEA	TURLED YND MO.	DE
	VIBRANT TRIANGLE REGION BY SAFEGUARDING CLEAN WATER, PR		KE
	NATURAL HABITATS, SUPPORTING LOCAL FARMS AND FOOD, AND		
	PEOPLE WITH NATURE THROUGH LAND PROTECTION AND (CONT. O		
2	Did the organization undertake any significant program services during the year which were not listed on the	i benind o	
2	prior Form 990 or 990-EZ?	Ves	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program 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, a	as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$	venue \$ 3,269,	212.
	TLC CONTINUES TO MAKE HEADWAY TOWARDS MEETING THE GOALS	FOR 2025 LAI	D
	OUT IN OUR STRATEGIC ACTION PLAN, EVEN AS IT IS GETTING	HARDER. LAND	IS
	GETTING MORE EXPENSIVE AND DISAPPEARING FASTER, FEWER L		
	ABLE OR WILLING TO DONATE EVEN A SMALL PART OF THE VALU		
	PROPERTY, AND THE IMPACT OF CLIMATE CHANGE AND RELATED		S
	IS BEING FELT ACROSS THE REGION. IN FY22 TLC INCREASED	CAPACITY BY	
	HIRING MORE STAFF.		
	MODITING WITHIN THROUGH GODDONARD AND DOUBLE TON DOUGH	<u> </u>	3.3TD
	WORKING WITH INDIVIDUAL, CORPORATE AND FOUNDATION DONOR		AND
	STATE GOVERNMENTS, IN FY22 WE PROTECTED OVER 1,200 ACRE		
	TRAILS, ENGAGED MORE PEOPLE, AND MONITORED THOUSANDS OF (CONTINUED ON SCHEDULE O)	ACKES.	
	722 000	venue \$ 161,	196
4b	(Code:) (Expenses \$		
	IN FY22: CURRENTLY TLC HOLDS 168 CONSERVATION EASEMENTS		
	AND OWNS OVER 7,500 ACRES OF LAND. AS AN ACCREDITED LAN		
	17,057 ACRES MUST BE MONITORED, MANAGED, AND CARED FOR		P
	STAFF ANNUALLY TO ENSURE THAT THE EASEMENT TERMS ARE NO		
	THIS FY, TLC OPENED 7.6 MILES OF NEW HIKING AND MOUNTAI	N BIKING TRAI	LS;
	4 MILES AT WILLIAMSON PRESERVE, AND 3.6 MILES AT BRUMLE	Y PRESERVE. I	N
	TOTAL TLC PROVIDES MORE THAN 60 MILES OF TRAIL AT OUR P	UBLIC NATURE	
	PRESERVES WHICH THOUSANDS OF PEOPLE ENJOY EVERY MONTH.		
	AND WILLIAMSON PRESERVES CONTINUED TO SEE INCREASED USA		
	3,500 AND 2,200 VISITORS PER MONTH, RESPECTIVELY. (CONT	. ON SCHED. O)
4c	(Code:) (Expenses \$	venue \$	
	COMMUNITY ENGAGEMENT: OUR COMMUNITY OF 329 VOLUNTEERS C		066
	HOURS WHICH HELPED TLC REACH OUR GOAL TO CONSERVE WILD		
	LANDS AND ENGAGE MORE PEOPLE OUTDOORS. VOLUNTEERS COMPL		
	TASKS, TAUGHT ENVIRONMENTAL EDUCATION PROGRAMS, LED HIK	· ·	NTT C
	SUPPORTED STEWARDSHIP EFFORTS. TLC HELD 67 VIRTUAL AND		
	IN FY22, ENGAGING 1,965 PEOPLE. FORTY-THREE OF THESE EV		KĽ
	MADE POSSIBLE BY OUR VOLUNTEERS. TLC HAS IMPLEMENTED A		
	TRAINING PROGRAM, AND WE NOW RELY ON 63 VOLUNTEER HIKE	יפעים רעים ריים	
	TLC HAS A GOAL TO EXPAND OUR AUDIENCE AND CELEBRATE CON	SERVATION FOR	

TLC HAS A GOAL TO EXPAND OUR AUDIENCE AND CELEBRATE CONSERVATION FOR EVERYONE SOMETHING THAT WOULD NOT BE POSSIBLE WITHOUT OUR PARTNERS. WE COLLABORATED IN 67 UNIQUE COMMUNITY PARTNERSHIPS (CONT. ON SCHED. O)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$

4e Total program service expenses ► 1,815,386.

Form 990 (2021) TRIANGLE LAND CONSERVANCY, INC. 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)?		37	
	If "Yes," complete Schedule A	1	X	├
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	├
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		37
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_		3,7
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		. v
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			₩
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	v	
_	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			₩
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			_ v
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
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,		х	
	Part VI	11a	Λ	-
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		
C		11c		x
ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		1
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	\vdash
f		116		\vdash
•	the organization's separate of consolidated financial statements for the tax year monde a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	izu		
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	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		Х
20a	•	20a		Х
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	Х	

Form 990 (2021) TRIANGLE LAND CONSERVANCY, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			۱
	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			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
h	transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		-25
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			۱
	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			37
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		x
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	55a		<u> </u>
	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?	002		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Ta 24 Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable			
b	Enter the harmon of Fermi W Ze included of time 1a. Enter of inflot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-	Х	
	(gambling) winnings to prize winners?	1c	000	

Form 990 (2021) TRIANGLE LAND CONSERVANCY, INC.

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

			Yes	No					
2 a	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		37						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X						
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			v					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
h	If "Yes," enter the name of the foreign country	4 a							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х					
	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 the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?								
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.	0							
a Did the sponsoring organization make any taxable distributions under section 4966?									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120							
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a							
h	Enter the amount of reserves the organization is required to maintain by the states in which the								
~	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any								
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

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

	Cneck if Schedule O contains a response or note to any line in this Part VI			Δ
Sec	tion A. Governing Body and Management		I	Ι
	1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 17	-		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 17	_		
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, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
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	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	- ra		
b		76		x
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
8			v	
a	The governing body?	8a	X	
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			٠.,
	organization's mailing address? If "Yes," provide the names and addresses on 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	X	
b	Describe on 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	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
b	Other officers or key employees of the organization	15b	Х	
~	If "Yes" to line 15a or 15b, describe the process on 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		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16h		
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b	l	<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed NC		0.45!!-!	ale.
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	avallal	oie
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	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			
	AYANNA SMITH - 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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box if neither the organization (A)	(B)						isate	(D)	(F)	
Name and title	Average	(C) Position						Reportable	(E) Reportable	(F) Estimated
Name and the	hours per	box	, unles	ss per	son i	than o	n an	compensation	compensation	amount of
	week	offi	officer and a director/trustee)				tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	au			rted		organization	(W-2/1099-MISC/	from the
	related	stee	truste		au au	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	ional		ploye	t com		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SANDRA SWEITZER	40.00									
EXECUTIVE DIRECTOR				Х				115,600.	0.	5,200.
(2) CLARENDA STANLEY	1.50									
DIRECTOR		Х						0.	0.	0.
(3) ANUPAMA JOSHI	1.50									
DIRECTOR		Х						0.	0.	0.
(4) JENNY BO	1.50									
DIRECTOR		Х						0.	0.	0.
(5) ALBERT FISHER	1.50									
DIRECTOR		Х						0.	0.	0.
(6) JACK BLACKMER	1.50									
DIRECTOR		Х						0.	0.	0.
(7) TONI WYCHE JONES	1.50									
SECRETARY		Х		Х				0.	0.	0.
(8) DAVID MORRIS	1.50									
DIRECTOR		Х						0.	0.	0.
(9) REBECCA BALTER	1.50									
TREASURER		Х		Х				0.	0.	0.
(10) MARLENA BYRNE	1.50									
VICE CHAIR		Х		Х				0.	0.	0.
(11) JAY MCLEOD	1.50									
DIRECTOR		Х						0.	0.	0.
(12) SEAN WILSON	1.50									
DIRECTOR		Х						0.	0.	0.
(13) MAVIS GRAGG	1.50									
EX-OFFICIO		Х						0.	0.	0.
(14) WILL MORGAN	1.50									
CHAIR		Х		Х				0.	0.	0.
(15) NICOLLETE L CAGLE	1.50									
DIRECTOR		Х						0.	0.	0.
(16) CONNOR JARVIS	1.50									
DIRECTOR		Х						0.	0.	0.
(17) PATRICK MATEER	1.50	1								_
DIRECTOR		Х						0.	0.	0.

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Section A. Officers, Directors, Trust	tees, Key Em	ploy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(0				(D)	(E)			(F)	
Name and title	Average	(do		Posi heck i			one	Reportable	Reportable		Est	imate	d
	hours per	box	, unle	ss per	rson i	is botl	h an	compensation	compensation	า	am.	ount o	of
	week		Cei ai	lu a u	liecto	Titus	T	from	from related	- 1	l .	other	
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MIS		comp	ensat m the	
	related	eord	tee			sated		(W-2/1099-MISC/	1099-NEC)	٠/		nizati	
	organizations	Individual trustee or director	Institutional trustee		/ee	mpen		1099-NEC)	1033 (120)			relate	
	below	idual	ution	7.	oldm	sst co	La	,			orgar		
	line)	Indivi	Instit	Officer	Key employee	Highest compensated employee	Former						
(18) CINDY PACCHIANA	1.50												
DIRECTOR		Х						0.		0.			0.
]											
						_							
		1											
		1											
						_							
		1											
						_							
		1											
		<u> </u>				_							
		1											
						-				\dashv			
		-											
4. 0							L	115,600.		0.		, 20	10
1b Subtotal								0.		0.		, 4	
c Total from continuation sheets to Part VII								115,600.		0.		,20	0.
d Total (add lines 1b and 1c)							<u> </u>					, 4	, , ,
2 Total number of individuals (including but no	ot ilmited to th	iose	liste	a ac	ove	e) wn	io re	eceived more than \$100,	000 of reportable				1
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director truct	ا مم	·0\/ ·	mnl	01/0		hia	shoet componented omn	lovoo on	ſ		103	140
,	,		•	•	•		_		•		3		Х
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	•							•	•		4		Х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	•				,			J			5		Х
Section B. Independent Contractors	Diete Genedan	001	0/ 30	<u>ici ,</u>	<i>J</i> C/3	OH						-	
Complete this table for your five highest cor	mpensated inc	depe	nde	nt cc	ontra	acto	rs th	nat received more than \$	100,000 of comp	ensa ¹	tion from	n	
the organization. Report compensation for t													
(A)	_							(B)			(C))	
Name and business	address	NO	INC	3				Description of s	ervices	С	compen		1
							_						
					_								
2 Total number of independent contractors (in		ot lin	nited	d to t	_	_	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	zation >				()					C	an (c	2004

1 0		Check if Cahadula Caa	entaine e reenance	ar note to envilin	o in this Dort VIII			
		Check if Schedule O co	ontains a response o	or note to any lin	e in this Part VIII	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
					Total Tovolido	function revenue	business revenue	from tax under
								sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
r z	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	1c					
ifts ar A	d	Related organizations	1d					
nig.		Government grants (contrib		3,943,016.				
Sir		All other contributions, gifts, gr						
uti Je	•	similar amounts not included a		10,834,767.				
ĢË	~			6,232,633.				
o d	g		`		14,777,783.			
Oa	n	Total. Add lines 1a-1f		Business Code	14,777,703.			
	_	EAGENENE AGOUTGIETON	CONTENT A CITE		2 241 240	2 241 240		
<u>8</u>	2 a			541900	3,241,348.	3,241,348.		
er v	b			541900	70,900.	70,900.		
S c	С			541900	47,162.	47,162.		
ran Sev	d	BASELINE & OTHER REPO	DRTS (LAND)	541900	27,864.	27,864.		
Program Service Revenue	е	OTHER STEWARDSHIP		541900	10,585.	10,585.		
4	f	All other program service re	evenue	541900	3,750.	3,750.		
	g	Total. Add lines 2a-2f			3,401,609.			
	3	Investment income (includir	ng dividends, intere	st, and				
		other similar amounts)		•	71,763.			71,763.
	4							
	5	Royalties						
	_	[(i) Real	(ii) Personal				
	6 a	Gross rents	6a 9,700.					
			6b 0.					
		· · · · · · · · · · · · · · · · · · ·	6c 9,700.					
		` ′ =	<u> </u>		9,700.	9,700.		
		Net rental income or (loss)	(i) Securities	(ii) Other	3,100.	3,700.		
	/ a	Gross amount from sales of	.,	` ,				
			7a 5,961,873.	255,000.				
	b	Less: cost or other basis	_ F FF0 F36	024 040				
one			7b 5,552,736.	231,010.				
Revenue		٠ , ـ	7c 409,137.	23,990.				
	d	Net gain or (loss)			433,127.			433,127.
her	8 a	Gross income from fundraising	g events (not					
₹		including \$	of					
		contributions reported on li	ne 1c). See					
		Part IV, line 18	8a					
	b	Less: direct expenses						
	С	Net income or (loss) from fu	indraising events					
	9 a	Gross income from gaming	activities. See					
		Part IV, line 19						
	b	Lanca d'acceptance de la constance de la const	9b					
		Net income or (loss) from ga						
			-					
	.o u	and allowances 10a						
	h		401					
\dashv	С	Net income or (loss) from sa	ales of inventory	Business Code				
ဋ		SALES - TIMBER		900099	10 013	10 012		
eo e	11 a				10,913.	10,913.		
Miscellaneous Revenue	b	HUNTING LEASE INCOME		900099	8,186.	8,186.		
3ev	С							
Mis	d	All other revenue						
	е	Total. Add lines 11a-11d .			19,099.	-		
	12	Total revenue. See instruction	S		18,713,081.	3,430,408.	0.	504,890.

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Part IX | Statement of Functional Expenses

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

<u> </u>	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon:		-	ipiete column (A).	
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	lotal expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		•		·
	and domestic governments. See Part IV, line 21	25,000.	25,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	122,515.	77,442.	24,551.	20,522.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,088,390.	687,964.	218,111.	182,315.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	23,822.	11,737.	6,212.	5,873.
9	Other employee benefits	150,473.	94,387.	31,067.	5,873. 25,019. 14,332.
10	Payroll taxes	93,491.	60,476.	18,683.	14,332.
11	Fees for services (nonemployees):				
а	Management	10.010			
b	Legal	69,342.	69,342.		
	Accounting				
	Lobbying	F2 000			<u> </u>
е	Professional fundraising services. See Part IV, line 17	53,898.		20.000	53,898.
f	Investment management fees	30,022.		30,022.	
g	Other. (If line 11g amount exceeds 10% of line 25,	104 167	05 760	26 021	1 404
	column (A), amount, list line 11g expenses on Sch 0.)	124,167. 11,321.	95,762. 11,321.	26,921.	1,484.
12	Advertising and promotion	11,321.	11,321.		
13	Office expenses	34,796.	21 004	6 072	E 020
14	Information technology	34,730.	21,994.	6,973.	5,829.
15	Royalties	81,359.	51,427.	16,304.	13,628.
16	Occupancy	01,339.	JI,447.	10,304.	13,020.
17	Payments of travel or entertainment expenses				
18					
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings	53,493.	53,493.		
21	Payments to affiliates	55, 455	33,433.		
22	Depreciation, depletion, and amortization	141,391.	128,213.	11,868.	1,310.
23		30,460.	15,669.	13,612.	1,179.
24	Other expenses. Itemize expenses not covered	00,200			= 7 = 1 = 0
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	SMALL EQUIPMENT AND SUP	172,960.	92,420.	41,444.	39,096.
b	APPRAISAL FEES AND CLOS	156,663.	156,663.	0.	0.
С	BOOKKEEPING, CONSULTING	84,680.	0.	84,680.	0.
d	STAFF DEVELOPMENT AND T	53,327.	31,467.	12,365.	9,495.
е	All other expenses	189,423.	130,609.	47,393.	11,421.
25	Total functional expenses. Add lines 1 through 24e	2,790,993.	1,815,386.	590,206.	385,401.
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)				5 990 (2224)

Form 990 (2021)
Part X Balance Sheet

Pai	τx	Balance Sneet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			802,429.	1	696,041.
	2	Savings and temporary cash investments			657,706.	2	653,327.
	3	Pledges and grants receivable, net			167,026.	3	1,584,606.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or f					
		trustee, key employee, creator or founder, substa	ntial c	ontributor, or 35%			
		controlled entity or family member of any of these	perso	ons		5	
	6	Loans and other receivables from other disqualified	ed per	sons (as defined			
		under section 4958(f)(1)), and persons described	tion 4958(c)(3)(B)		6		
ß	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	B			38,983.	9	46,828.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	2,269,865.			
	b	Less: accumulated depreciation	10b	1,032,077.			
	11	Investments - publicly traded securities		6,524,098.	11	4,958,197.	
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		129,322,826.	15	143,602,443.	
	16	Total assets. Add lines 1 through 15 (must equal			138,707,628.	16	152,779,230.
	17	Accounts payable and accrued expenses			146,080.	17	84,423.
	18	Grants payable	12 000	18	10 044		
	19	Deferred revenue	13,929.	19	10,944.		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Pa				21	
es	22	Loans and other payables to any current or forme					
Liabilities		trustee, key employee, creator or founder, substa					
Liak		controlled entity or family member of any of these			2,875,960.	22	2,929,453.
_	23	Secured mortgages and notes payable to unrelate			2,073,900.	23	2,323,433.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pays					
		parties, and other liabilities not included on lines of Schedule D	17-24)	. Complete Part X	95,757.	25	116,776.
	26				3,131,726.	26	3,141,596.
	20	Organizations that follow FASB ASC 958, chec		<u> </u>	3,131,720.	20	3,141,350.
Se		and complete lines 27, 28, 32, and 33.	K HEI				
unc	27	• • • • • • • • • • • • • • • • • • • •			29,542,116.	27	36,185,599.
3ale	28	Net assets with donor restrictions			106,033,786.	28	113,452,035.
Jd E		Organizations that do not follow FASB ASC 95					
Fur		and complete lines 29 through 33.	- ,				
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equ				30	
Ass	31	Retained earnings, endowment, accumulated incompared in the compared in the co				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			135,575,902.	32	149,637,634.
~	33	Total liabilities and net assets/fund balances			138,707,628.	33	152,779,230.
					•		

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Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18	,71	3,0	<u>81.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		79			
3	Revenue less expenses. Subtract line 2 from line 1	3		,92			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		5,575,902			
5							
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B)) 10 149						
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						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	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		
	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						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O).				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc	lit				
	Act and OMB Circular A-133?			За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed aud	it				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5461070.	7146978.	5193563.	10343631.	<u> 14777783.</u>	42923025.
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	5464050	7116070	5400560	1001001	4.55550	4000000
	Total. Add lines 1 through 3	5461070.	7146978.	5193563.	10343631.	14777783.	42923025.
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,						11554600
	column (f)						11554680.
	Public support. Subtract line 5 from line 4.						<u>31368345.</u>
	etion B. Total Support		# N = 0 + 0		T () 2222	() 222/	
	ndar year (or fiscal year beginning in)	(a) 2017 5461070.	(b) 2018 7146978.	(c) 2019 5103563	(d) 2020 10343631.	(e) 2021	(f) Total
	Amounts from line 4	3401070.	/1409/0.	3133303.	10343031.	14////03.	42923023.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	105,787.	97 620	110,547.	94,180.	89,649.	497,783.
_	and income from similar sources	103,767.	91,020.	110,547.	94,100.	09,049.	491,103.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)	3,767.	2,220.	1,000.	500.	10,913.	18,400.
11	Total support. Add lines 7 through 10	3,707.	2,220.	1,000.	300.		43439208.
	Gross receipts from related activities,	etc (see instruction	ne)				,084,856.
	First 5 years. If the Form 990 is for th			fourth or fifth tax			,001,0301
.0	organization, check this box and stop	-					
Sec	ction C. Computation of Publi						
	Public support percentage for 2021 (li			column (f))		14	72.21 %
	Public support percentage from 2020					15	73.47 %
	33 1/3% support test - 2021. If the o					ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ X
b	33 1/3% support test - 2020. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		>
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	nstances test, chec	ck this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	>
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s >

Schedule A (Form 990) 2021 TRIANGLE LAND CONSERVANCY, INC 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.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.1	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of	one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's or	fficers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporting organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
Seci				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructions).		
а				
b				
C	5 The gradual of the state of the stat	tity (see instructior	l ' l	NI-
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
b	that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	24		
IJ	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
.	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	32		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Sche	dule A (Form 990) 2021 TRIANGLE LAND CONSERVA		iC.	58-1514406 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain ir</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ist complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3	4		

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

5

6

Schedule A (Form 990) 2021

Income tax imposed in prior year

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

10

10 Line 8 amount divided by line 9 amount

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2021 from Section C, line 6

10	Line o amount divided by line 9 amount	Т	10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2021 distributable amount			
i_	Carryover from 2016 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
c	Excess from 2019			
d	Excess from 2020			
<u>e</u>	Excess from 2021			

Schedule A (Form 990) 2021

132028 01-04-22 Schedule A (Form 990) 2021

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

Inspection

Name of the organization

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

		(a) Donor advised funds	(b) Funds a	nd other acco	unts
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 wr	riting that the assets held in donor adv	ised funds	3		
	are the organization's property, subject to the organization's ex	xclusive legal control?			Yes	No
6	Did the organization inform all grantees, donors, and donor adv	visors in writing that grant funds can be	e used on	ly		
	for charitable purposes and not for the benefit of the donor or o	donor advisor, or for any other purpose	e conferrir	g		
					Yes	No
Part	t II Conservation Easements. Complete if the orga	anization answered "Yes" on Form 990	, Part IV, I	ine 7.		
1	Purpose(s) of conservation easements held by the organization	· · · · · · · · · · · · · · · · · · ·				
	Preservation of land for public use (for example, recreation	on or education) X Preservation	of a histor	ically imp	ortant land are	а
	Protection of natural habitat	Preservation	of a certifi	ed historic	c structure	
	X Preservation of open space					
	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	n of a con			
	day of the tax year.			Hel	d at the End of t	
а	Total number of conservation easements			2a		168
				2b	9,49	
С	Number of conservation easements on a certified historic struc	cture included in (a)		2c		0
	Number of conservation easements included in (c) acquired aft	•				_
	listed in the National Register		L	2d		0
	Number of conservation easements modified, transferred, release 9 Number of states where property subject to conservation ease.		ie organiz	ation dum	ig the tax	
	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·	_ •			
	Does the organization have a written policy regarding the perio				X Yes	□ N
	violations, and enforcement of the conservation easements it h Staff and volunteer hours devoted to monitoring, inspecting, ha				—	
	<u>2549</u>					ear
	Amount of expenses incurred in monitoring, inspecting, handlin \$\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ng of violations, and enforcing conserv	ation ease	ements du	ıring the year	
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170	0(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?				Yes	□ No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens	e stateme	nt and		
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's financial stater	nents that	describe	s the	
	organization's accounting for conservation easements.					
Part	Organizations Maintaining Collections of A		ther Si	milar As	ssets.	
	Complete if the organization answered "Yes" on Form 9					
	If the organization elected, as permitted under FASB ASC 958,	, not to report in its revenue statement	and balar	ice sheet	works	
1a			furtherand	e of publi	С	
	of art, historical treasures, or other similar assets held for public	c exhibition, education, or research in				
	of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financ	·	ms.			
	•	ial statements that describes these ite		sheet wor		
b	service, provide in Part XIII the text of the footnote to its finance	ial statements that describes these ite, to report in its revenue statement and	balance :		ks of	
b	service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items:	ial statements that describes these ite, to report in its revenue statement and exhibition, education, or research in fur	d balance : therance (ks of	
b	service, provide in Part XIII the text of the footnote to its financ If the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public e	ial statements that describes these ite, to report in its revenue statement and exhibition, education, or research in fur	d balance : therance (of public s	ks of service,	
b	service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1	ial statements that describes these ite, to report in its revenue statement and exhibition, education, or research in fur	therance	of public s	ks of	
b	service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1	ial statements that describes these ite, to report in its revenue statement and exhibition, education, or research in fur	therance	of public s	ks of service,	
b 2	service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treas the following amounts required to be reported under FASB ASC	sial statements that describes these ite, to report in its revenue statement and exhibition, education, or research in fur sures, or other similar assets for financing 958 relating to these items:	therance of the therance of th	of public s	ks of service,	
b 2	service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958, art, historical treasures, or other similar assets held for public exprovide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasure.	sial statements that describes these ite, to report in its revenue statement and exhibition, education, or research in fur sures, or other similar assets for financing 958 relating to these items:	therance of the therance of th	of public s	ks of service,	

	dule D (Form 990) 2021 TRIANGI t III Organizations Maintaining O	E LAND CONS	SERVANCY,	INC.	r Cin	58-15	14406	Page 2
	· · ·						(continu	ed)
3	Using the organization's acquisition, access	ion, and other record	s, check any of the f	ollowing that make s	ignitic	ant use of its		
	collection items (check all that apply):							
а	Public exhibition	d		nange program				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's of	•	•	J		•	XIII.	
5	During the year, did the organization solicit		,	,		_	_	
	to be sold to raise funds rather than to be m						Yes	No
Par	t IV Escrow and Custodial Arran		ete if the organization	n answered "Yes" or	n Form	n 990, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custoo		•				_	
	on Form 990, Part X?					L	Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:		_			
					L		Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance				L	1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or cu	stodial account liabi	lity?		Yes	L No
	If "Yes," explain the arrangement in Part XIII						<u></u>	
Par	t V Endowment Funds. Complete							
		(a) Current year	(b) Prior year	(c) Two years back	(d) T	hree years back		
	Beginning of year balance	3,049,252.	2,268,189.	2,267,917.		2,167,432.		110,602.
b	Contributions	651,630.	306,722.	70,269.		54,061.		36,793.
С	Net investment earnings, gains, and losses	-372,847.	568,573.	24,880.		73,374.	1	106,934.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	23,280.	94,232.	94,877.		26,950.		86,897.
f	Administrative expenses							
g	End of year balance	3,304,755.	3,049,252.	2,268,189.		2,267,917.	2,1	L67,432.
2	Provide the estimated percentage of the cur		e (line 1g, column (a)) held as:				
а	Board designated or quasi-endowment	28.0000	_%					

b Permanent endowment ► 42.0000 %
c Term endowment ► 30.0000 %

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

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

Yes by: (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

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

Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1a	Land						
b	Buildings		696,680.	405,896.	290,784.		
С	Leasehold improvements						
d	Equipment		305,807.	240,110.	65,697.		
е	Other		1,267,378.	386,071.	881,307.		
	Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						

Schedule D (Form 990) 2021

No

Schedule D (Form 990) 2021 TRIANGLE LA	ND CONSERVANO	CY, INC.	58-1514406 Page 3
Part VII Investments - Other Securities.			TT
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X	(, line 12.
(a) Description of security or category (including name of security)	(b) Book value		on: Cost or end-of-year market value
(4) = 1111111		<u> </u>	•
(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"	on Form 990. Part IV. line	e 11c. See Form 990. Part X	(. line 13.
(a) Description of investment	(b) Book value	1	on: Cost or end-of-year market value
(1)	()	(-)	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(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 990. Part IV. line	e 11d. See Form 990. Part X	Cline 15.
	Description		(b) Book value
(1) CONSERVATION LAND AND EASI	<u> </u>		140,487,427.
(2) AGENCY ENDOWMENT ACCOUNTS	21121110		2,390,905.
(3) LAND OPTIONS AND DEPOSITS			11,687.
(4) OTHER RECEIVABLES			712,424.
(5)			,12,121
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		▶ 143,602,443.
Part X Other Liabilities.	: 10.)		113/002/1130
Complete if the organization answered "Yes"	on Form 990. Part IV. line	e 11e or 11f. See Form 990.	Part X. line 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) ACCRUED COMPENSATION			93,136.
(3) DEFERRED RENT			7,540.
(4) TENANT DEPOSITS			1,100.
(5) REFUNDABLE ADVANCES			15,000.
(6)			<u> </u>

(4) TENANT DEPOSITS

(5) REFUNDABLE ADVANCES

(6)

(7)

(8)

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

1,100.

15,000.

15,000.

116,776.

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

Pai	rt XI Reconciliation of Revenue per Audited Financial Statem	nents Wit	th Revenu	ıe per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.					
1	Total revenue, gains, and other support per audited financial statements				1	16,822,7	03.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•				
а	Net unrealized gains (losses) on investments	2a	-1,86	0,356.			
b	Donated services and use of facilities	2b					
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIII.)	2d					
е	Add lines 2a through 2d				2e	-1,860,3	
3	Subtract line 2e from line 1				3	18,683,0	<u>59.</u>
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	3	0,022.			
b	Other (Describe in Part XIII.)	4b					
_	Add lines 4a and 4b				4c	30,0	<u>22.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			·····	5	18,713,0	81.
Pa	rt XII Reconciliation of Expenses per Audited Financial State		ith Expen	ses per F	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12						
1	Total expenses and losses per audited financial statements				1	2,760,9	<u>71.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1				
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	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	2,760,9	<u>71.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1 -				
	Investment expenses not included on Form 990, Part VIII, line 7b		3	<u>0,022.</u>			
b	Other (Describe in Part XIII.)	4b					
	Add lines 4a and 4b				4c	30,0	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	2,790,9	93.
	rt XIII Supplemental Information.						
	vide the descriptions required for Part II, lines 3, 5, and 0: Part III, lines 1a and 4: Pr	art IV/ liman	1h and 2h. F	Port V line 1	· Dort	V line 2: Dort VI	

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.>

Schedule D (Form 990) 2021 TRIANGLE LAND CONSERVANCY, INC. 58-1514406 Page 5 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 G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

TRIANGLE LAND CONSERVANCY, INC.

Employer identification number 58-1514406

	ID DAND CONDURVANCE	,	10.		30 1314	1 00
Part I Fundraising Activities required to complete this part	 Complete if the organization answert. 	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais		na activ	ities (Check all that apply		
a Mail solicitations				overnment grants		
b Internet and email solicitations				nment grants		
c Phone solicitations	g L Special	Tunara	using	events		
d In-person solicitations						
2 a Did the organization have a written of						
	Part VII) or entity in connection with p			ŭ	X Yes	
b If "Yes," list the 10 highest paid indi		ant to	agreer	ments under which th	ne fundraiser is to be)
compensated at least \$5,000 by the	e organization.					
		(iii)	Did		(v) Amount paid	
(i) Name and address of individual	(ii) Activity	(iii) fundr have c	aiser	(iv) Gross receipts	to (or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(ii) Activity	or con	trol of	from activity	fundraiser listed in col. (i)	organization
REATIVE FUNDRAISING ADVISORS	ASSESSMENT OF FUNDRAISING	Yes	No		iisted iii coi. (i)	
1041 GRAND AVE, SUITE 225,	CAPACITY/CONSULTING		Х	0.	0.	50,000.
	•	•				
otal			•			50,000.
3 List all states in which the organization	on is registered or licensed to solicit	contrib	utions	or has been notified	it is exempt from re-	gistration
or licensing.	Ç				•	

TRIANGLE LAND CONSERVANCY, INC. 58-1514406 Page 2 Schedule G (Form 990) 2021 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) 1 Gross receipts 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain:

Sch	edule G (Form 990) 2021 TRIANGLE LAND CONSERVANCY, INC. 58-1	<u> 1514406</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	,,,
17	Effect the flame and address of the person who prepares the organization's garning/special events books and records.		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	s If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
SC:	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	<u>}:</u>	
(I) NAME OF FUNDRAISER: CREATIVE FUNDRAISING ADVISORS		
	,		
(I) ADDRESS OF FUNDRAISER: 1041 GRAND AVE, SUITE 225, ST. PAUL, M	<u>4N 551</u>	05
<u>(I</u>	I) ACTIVITY: ASSESSMENT OF FUNDRAISING CAPACITY/CONSULTING SERV	/ICES	

Schedule G	(Form 990)	TRIANGLE	LAND	CONSERVANCY,	INC.	58-1514406	Page 4
Part IV	(Form 990) Supplemental Infor	mation _{(continue}	d)				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

➤ Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection Name of the organization **Employer identification number** 58-1514406 TRIANGLE LAND CONSERVANCY, INC. Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) URBAN COMMUNITY AGRI-NOMICS (UCAN) RENOVATION OF OFFICE AND 505 CRESTVIEW DR MEETING SPACE AT CATAWBA 81-0691944 501(C)(3) DURHAM, NC 27712 0 TRAIL FARM 25,000. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information	on required in Part I, lin	e 2; Part III, columr	n (b); and any other ad	ditional information.	
PART I, LINE 2:					
THE ORGANIZATION'S GENERAL LEDG	ER ACCOUNTIN	G SYSTEM	ALLOWS FOR	THE USE OF	
DISTINCT PROJECT CODES IN ORDER	TO TRACK FU	NDS RECET	VED AND FUN	DS	
DISBURSED. PERIODIC GRANTOR REPO	ORTING IS PR	EPAKED US.	ING THESE D	ISTINCT	
PROJECT CODES.					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public . Inspection

Department of the Treasury Internal Revenue Service

▶ 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 instructions and the latest information.

Name of the organization TRIANGLE LAND CONSERVANCY, INC. Employer identification number 58-1514406

Pai	TI Types of Property							
		(a) Check if applicable	(b) Number of contributions or litems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1q	(d) Method of de noncash contribu	etermin	_	3
1	Art - Works of art		recinic continuation	7 3111 333, 7 412 711, 1113 19				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
	Clothing and household goods							
5 6	Cars and other vehicles							
7								
	Boats and planes							
8	Intellectual property	X	19	155 747	FAIR VALUE			
9	Securities - Publicly traded		13	133,747.	FAIR VALUE			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures	77	4	4 474 000	3 D D D 3 T G 3 T			
14	Qualified conservation contribution - Other	X	4	4,474,000.	APPRAISAL			
15	Real estate - Residential							
16	Real estate - Commercial			4 550 064				
17	Real estate - Other	X	7	1,573,264.	APPRAISAL			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (<u>VARIOUS</u>)	X	11	29,622.	FAIR VALUE			
26	Other							
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organization which the organization completed Form 828							
	· ·	, ,	J				Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 through	h 28, that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?		,	•		30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance po	olicy that re	equires the review o	of any nonstandard contribut	tions?	31	х	
32a		-	· ·	•		<u> </u>		
	contributions?		•			32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is che	cked,			
	describe in Part II.							
ΙЦΔ	For Panerwork Reduction Act Notice see t	he Instruct	tions for Form 990	1	Schedule N	/ (Earn	000	2021

Schedule M	1 (Form 990) 2021	TRIANGLE	LAND CO	ONSERVAN	ICY, I	INC.		58-1514406	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information.	Provide the in number of cor	formation requ ntributions, the	ired by P number	art I, lines 30b of items receiv	, 32b, and 33, ared, or a combi	and whether the organation of both. Also	

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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

▶ Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

Internal Revenue Service

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:
STEWARDSHIP, CATALYZING COMMUNITY ACTION, AND COLLABORATION. SINCE
1983, TLC HAS PROTECTED OVER 22,700 ACRES, INCLUDING 165 MILES OF
STREAMS, THROUGH ACQUISITIONS AND CONSERVATION EASEMENTS IN CHATHAM,
DURHAM, JOHNSTON, LEE, ORANGE, AND WAKE COUNTIES IN NORTH CAROLINA. TLC
OWNS AND MANAGES 8 PRESERVES WITH 55 MILES OF TRAIL ACROSS THE REGION
OPEN TO THE PUBLIC DAILY.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
TLC WILL CONTINUE PRIORITIZING THE MOST CRITICAL LANDS FOR
CONSERVATION. WE WILL SEEK NEW AND CREATIVE WAYS TO KEEP UP THE PACE OF
CONSERVATION, FROM IMPLEMENTING THE BUY-CONSERVE-SELL MODEL TO PROTECT
DISAPPEARING FARMLAND TO INSPIRING PRIVATE DONATIONS TO LEVERAGE
GOVERNMENT FUNDS FOR LAND PROTECTION.

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CONSERVATION LAND, BRINGING OUR GRAND TOTAL TO 22,734 ACRES. TLC

STEWARDS OVER 78 PROPERTIES AND HAS 9,498 ACRES PROTECTED BY 168

CONSERVATION EASEMENTS. EACH OF THESE CONSERVATION PROPERTIES SUPPORT

AT LEAST TWO OF THE FOUR BENEFITS THAT TLC PRIORITIZES: SAFEGUARDING

CLEAN WATER, LOCAL FARMS AND FOODS, NATURAL HABITAT, AND CONNECTING

PEOPLE WITH NATURE. CONSERVATION EASEMENTS ARE LEGAL AGREEMENTS BETWEEN

A LANDOWNER AND A LAND TRUST THAT LIMIT USES OF THE LAND IN ORDER TO

PROTECT ITS CONSERVATION VALUES IN PERPETUITY. SPECIFIC TERMS OF

INDIVIDUAL EASEMENTS VARY, BUT IN GENERAL THEY LIMIT FUTURE

DEVELOPMENT.

OF THE 1,290 ACRES PROTECTED THIS YEAR, 42 WERE FARMLAND, AND 485 ARE

STATE-IDENTIFIED NATURAL HERITAGE SITES. ONE OF THE SITES, RATTLESNAKE

RANGE, IS NOW 76 ACRES OF PROTECTED HABITAT FOR THE INCREASINGLY RARE

RATTLESNAKES FOUND IN THE PIEDMONT. IN FY22, TLC WORKED TO SAFEGUARD

CLEAN WATER BY PROTECTING 1,165 ACRES, INCLUDING 18 PROJECTS IN THE

CAPE FEAR AND UPPER NEUSE RIVER WATERSHEDS. THESE PROTECTED ACRES

INCLUDE 18 MILES OF STREAM, FOR A TOTAL OF NEARLY 165 MILES OF STREAM

THAT TLC HAS CONSERVED SINCE 1983. THE PURCHASE OF 665 ACRES LAND ALONG

THE CAPE FEAR RIVER SUPPORTS OUR WATER QUALITY EFFORTS AND COMPLETES AN

8,000-ACRE CONSERVATION CORRIDOR IN NORTH CAROLINA'S LARGEST RIVER

BASIN.

TLC HAS ALSO REDOUBLED OUR EFFORTS TO ENSURE OUTDOOR SPACES ARE

ACCESSIBLE TO EVERYONE IN THE TRIANGLE. THIS GOAL CANNOT BECOME REALITY

WITHOUT ACTIVELY WORKING TO END SYSTEMIC RACISM, WHICH FOR CENTURIES

HAS LED TO INEQUITIES IN OWNERSHIP OF, ACCESS TO, AND ENJOYMENT OF THE

OUTDOORS. AS PART OF THIS WORK, IN FY22 WE LAUNCHED THE GOOD GROUND

Name of the organization **Employer identification number** 58-1514406 TRIANGLE LAND CONSERVANCY, INC. INITIATIVE, WHICH AIMS TO BOTH PROTECT LOCAL FARMS AND INCREASE LAND OWNERSHIP BY BLACK, INDIGENOUS AND OTHER PEOPLE OF COLOR, USING THE BUY-CONSERVE-SELL METHOD. THE FIRST GOOD GROUND INITIATIVE PROPERTY WILL BE OFFERED IN FY23. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: TLC CONTINUED IMPLEMENTATION OF THE FARM PLAN AT WILLIAMSON PRESERVE AND NOW HOSTS 5 FARM PARTNERS, WHO USE REGENERATIVE AGRICULTURE TECHNIQUES TO SUPPORT AN APIARY, PERENNIAL AND ANNUAL CROPS, LIVESTOCK, AND A NATIVE TREE NURSERY. TLC ALSO CONDUCTED A PRESCRIBED BURN AS PART OF OUR SHORTLEAF PINE REGENERATION PROJECT AT HORTON GROVE PRESERVE AND HAS ENGAGED IN INVASIVE SPECIES REMOVAL ACROSS OUR PRESERVES. WITH AN INCREASING NUMBER OF EASEMENTS HELD, TLC HAS ENLISTED AND TRAINED VOLUNTEERS TO MONITOR MANY EASEMENTS. AFTER COMPLETING A TRAINING PROGRAM, VOLUNTEERS USE A MONITORING AND MAPPING APP AND GO ON AT LEAST ONE MONITORING VISIT WITH A TLC STAFF MEMBER BEFORE BEING ELIGIBLE TO MONITOR EASEMENTS ON THEIR OWN. IN FY22, VOLUNTEERS SPENT 157 HOURS MONITORING 41 CONSERVATION EASEMENTS. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: IN FY 22, AND PARTICIPATION IN TLC EVENTS GREW BY 144% FROM LAST YEAR. ONE OF THESE NEW PARTNERSHIPS, WITH THE RALEIGH ASTRONOMY CLUB, HAS RESULTED IN A SERIES TITLED "FIRST FRIDAYS UNDER THE STARS" WHICH DRAW

HUNDREDS OUTSIDE EACH MONTH (AS WEATHER ALLOWS).

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COMMUNICATIONS: IN 2022 TLC HIRED A NEW COMMUNICATIONS TEAM AND HAVE

BEGUN TO UPDATE AND EXPAND OUR COMMUNICATIONS EFFORTS, INCLUDING ADDING

SPANISH SEGMENTS TO OUR BLOG AND WEBSITE. WE UPDATED KIOSK AND PEDESTAL

SIGNAGE AT BRUMLEY AND WILLIAMSON NATURE PRESERVES, AND WE ARE

DEVELOPING NEW SIGNAGE FOR JOHNSTON MILL NATURE PRESERVE.

TWICE A YEAR, AROUND 4,000 HOUSEHOLDS RECEIVE THE PRINTED VERSION OF

TLC'S CONFLUENCE NEWSLETTER, AND OVER 8,700 EMAIL SUBSCRIBERS RECEIVE

OUR MONTHLY E-NEWSLETTERS, MEANDER AND HIKE & PLAY.

TLC'S BRAND RECOGNITION ON SOCIAL MEDIA GREW IN 2022, AS THE NUMBER OF
FOLLOWERS ACROSS SOCIAL CHANNELS INCREASED FROM 17,000 TO 20,000. MOST
OF OUR AUDIENCE IS ON FACEBOOK AND INSTAGRAM, WHICH HAVE 12,000 AND
4,957, RESPECTIVELY, WITH OVER 1,500 ON TWITTER.

THE AVERAGE AGE OF OUR SOCIAL MEDIA AUDIENCE RANGES FROM 25 - 44 YEARS

OLD, WITH THE LARGEST AGE GROUP BETWEEN 25 34 YEARS OLD. ALMOST 26%

IDENTIFY AS BLACK, INDIGENOUS, AND OTHER PEOPLE OF COLOR AND 75% ACCESS

USING MOBILE PHONES. OUR WEBSITE SEES MONTHLY AVERAGE TRAFFIC OF 22.7K

VISITORS, AND IS 51.17% MALE AND 48.83%, FEMALE. 77% ACCESS THE TLC

WEBSITE VIA TABLETS AND SMARTPHONES. OVER 40% OF OUR MONTHLY WEBSITE

VISITORS NAVIGATE TO OUR WEBSITE DIRECTLY BY CLICKING A LINK FROM OUR

SOCIAL MEDIA POSTS, FROM EMAILS OR BY SEARCHING ONLINE ENTERING RELATED

KEYWORDS SUCH AS: HIKING, BIKING, TRAILS FOR WALKING. OTHER WEBSITE

TRAFFIC COMES FROM PEOPLE WHO SAW AND CLICKED ON A TLC AD FOUND ON

GOOGLE OR META'S AUDIENCE NETWORK (FACEBOOK, INSTAGRAM).

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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.

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

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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 COMPARABLE COMPENSATION DATA FROM SALARY SURVEY REPORTS WHERE SURVEYS ARE CONDUCTED BY INDEPENDENT HR, NONPROFIT, AND CONSERVATION

INDUSTRY ASSOCIATIONS; (2) COMPENSATION MUST BE APPROVED BY THE EXECUTIVE COMMITTEE, EXCLUSIVE OF VOTING PARTICIPATION BY THE EXECUTIVE; (3)

INTERNALLY, STAFF AND BOARD SURVEYS ARE CONDUCTED, AND THESE SURVEYS ALONG WITH OTHER PERFORMANCE EVALUATION TOOLS ARE INCLUDED IN THE EXECUTIVE DIRECTOR'S ANNUAL REVIEW AND CONTRIBUTE TO COMPENSATION DECISIONS; AND (4)

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 OF

INTEREST POLICY IS SHARED WITH THE BOARD OF DIRECTORS AND ORGANIZATION

STAFF IN THE APPROPRIATE MANUALS, AT ORIENTATION, AND ANNUALLY. THE

ORGANIZATION'S FORM 1023 IS AVAILABLE UPON REQUEST.