## 990

### **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

20**22** 

Department of the Treasury Internal Revenue Service

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 Inspection

20 2022, and ending For the 2022 calendar year, or tax year beginning D Employer identification number C Name of organization BLUE RIDGE CONSERVANCY Check if applicable: 58-2502695 Doing business as Address change E Telephone number Room/suite Number and street (or P.O. box if mail is not delivered to street address) Name change (828) 264-2511 PO BOX 568 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$6,857,073. BOONE, NC 28607 Amended return H(a) Is this a group return for subordinates? Yes No F Name and address of principal officer: Application pending H(b) Are all subordinates included? Yes No CHARLIE BRADY, PO BOX 568, BOONE, NC 28607 If "No," attach a list. See instructions. ) (insert no.) 4947(a)(1) or 527 501(c) ( Tax-exempt status: X 501(c)(3) H(c) Group exemption number www.blueridgeconservancy.org 1997 M State of legal domicile: NC L Year of formation: Form of organization: X Corporation Trust Association Other **Summary** Part I Briefly describe the organization's mission or most significant activities: PRESERVATION OF LAND & WATER RESOURCES Activities & Governance Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 17 Number of voting members of the governing body (Part VI, line 1a) . . . . . . . . 3 17 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 Total number of individuals employed in calendar year 2022 (Part V, line 2a) . . . 5 5 31 6 Total number of volunteers (estimate if necessary) . . . . . . 6 7a 0. Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, Part I, line 11 **Current Year** 5,943,061. 6,846,346. Contributions and grants (Part VIII, line 1h) . . . . . . . . . . . . 8 Revenue Program service revenue (Part VIII, line 2g) 37,411. 10,727. Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . 11 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,980,472 6,857,073. 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 13 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . . . 14 594,549. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 523,813 15 Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . . 16a Total fundraising expenses (Part IX, column (D), line 25) b 4,056,656. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,516,119. 17 4,039,932. 4,651,205. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 2,205,868. 1,940,540. Revenue less expenses. Subtract line 18 from line 12 . 19 **Beginning of Current Year** End of Year 19,039,159 20,650,449. Assets Total assets (Part X, line 16) 20 1,048,782. 1,356,504 Total liabilities (Part X, line 26) . . . . . . . . 21 19,601,667. 17,682,655. Net assets or fund balances. Subtract line 21 from line 20 22 Signature Block Part II 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 Date Signature of officer Sign EXECUTIVE DIRECTOR CHARLIE BRADY. Here Type or print name and title PTIN Date Check if Preparer's signature Print/Type preparer's name Paid self-employed P00445813 JASON D. CARPENTER Preparer Firm's EIN 56-2067992 COMBS, TENNANT & CARPENTER, P.C. Firm's name **Use Only** Phone no. (828) 264-6700 PO BOX 1098, BOONE, NC 28607 Firm's address May the IRS discuss this return with the preparer shown above? See instructions Yes □ No

art		Statement of Program Service Accomplishments
		Check if Schedule O contains a response or note to any line in this Part III
1	Brie	fly describe the organization's mission: SERVATION OF LAND & WATER RESOURCES
	PRE	SERVATION OF LAND & WATER REGISTED
		to the device during the year which were not listed on the
2	Did	the organization undertake any significant program services during the year which were not listed on the r Form 990 or 990-EZ?
		en en el el el en
3	Did	the organization cease conducting or make significant changes in how it conducts, any program
J	sen	rices?
		and the state of t
4	avn	'es," describe these changes on Schedule C. cribe the organization's program service accomplishments for each of its three largest program services, as measured by enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, total expenses, and revenue, if any, for each program service reported.
4-	/0-	de: ) (Expenses \$ 4,336,308. including grants of \$ 0.) (Revenue \$ 0.)
4a		
	EE.	SERVATION OF LAND AND WATER RESOURCES THAT TO GOVERNMENT AGENCIES  SIMPLE ACQUISITIONS AND TRANSFER OF LAND TO GOVERNMENT AGENCIES
	FO	PURLIC USE.
	r-341	
4b	(Cc	ode:) (Expenses \$including grants of \$) (Revenue \$)
	<b>-</b>	
		(Revenue \$
4c	(C	ode:) (Expenses \$including grants of \$) (Revenue \$)
		the contract continue (Describe on Schedule O.)
40		ther program services (Describe on Schedule O.) Expenses \$ including grants of \$ ) (Revenue \$ )
	(E	expenses \$ including grants of \$ / (1695)130 \$   (1695)130

Page 2

Part I	V Checklist of Required Schedules		Yes	No
	504(3/6) or 4047(a)(1) (other than a private foundation)? If "Yes."	<del>-                                    </del>		
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	×	
_	complete Schedule A	2	х	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of in opposition to	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii)	4		×
5	ls the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which defices have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the applicance of historic structures? If "Yes," complete Schedule D, Part II	7_	×	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If res,	8		×
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 pagetiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	×	ename:
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line To? II Fes,	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% of more	11b		×
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% of those	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	11d 11e	×	×
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year in res, complete	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Ves." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Lette examination a school described in section 170(b)(1)(A)(ii)? If "Yes," complete schedule 2	13 14a		×
14a b	Did the organization maintain an office, employees, or agents outside of the office of dates.	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants of other	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services of	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions of	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a:	19		×
20a	Bit the provided an arrest one or more hospital facilities? If "Yes," complete Schedule H	20a		+^
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this rotal."		1	×
	Did the organization report more than \$5,000 or grants or outlined abstraction report more than \$5,000 or grants or outlined abstract and II	121	ــــــــــــــــــــــــــــــــــــــ	

Part (	V 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	168	×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		
b b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		×
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	3200.23	×
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		×
c b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 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	28b 28c		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	×	×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule H, Part II, III, or IV, and Part V line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes." complete Schedule R, Part V, line 2	36		×
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		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
Par	The Fill Attacked to the Attac	•		. 🗆
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a	2	Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	<u>)</u> 1 <u>c</u>	×	

2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, lifed for the calendary year ending with or within they year covered by this return.  If all tasts one is reported on line 2a, did the organization file all required dodard employment tax returns?  Did the organization have unrelated business gross income of \$1,000 or more during the year?  Bill "Yes," has it filed a Form 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O.  If "Yes," enter the name of the foreign country is seniorated to the senior of the calendary and the calendary and the calendary and the calendary of the calendary and the calendary of the calendary and the calendary of t	art	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	NO
bill that least one is reported on line 2s, did the organization file all required botters employed in that centre is a bit the organization have unrelated business gross income of \$1,000 or more during the selected variety of the "ves," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schadule O at A ray time during the calendary year, did the organization are interestin, or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accountry in the financial accountry of the programization of the filed of the security of the programization for Filed or an interestin, or a signature or other authority over a financial accountry. See instructions for filing requirements for Filed See New theorems of the filing requirements for Filed See New theorems of the security of the organization at a shell the security of a prohibited tax sheller transaction? See Instructions for filing requirements for Filed See New See Ne	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return  9	*******		
Se Did the organization have unrelated business gross some of \$1,000 or finde using a year.  If "Yes," he it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O a family of the calendar year, did the organization have an interest in, or a signature or other authorly over, a financial account in a foreign country (such as a bank account, escentiles account and organization country (such as a bank account, escentiles accounts).  If "Yes," enter the name of the foreign country See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See in the organization approach of the seed of the organization and party to a prohibited tax sheleter transaction?  If "Yes," did the organization that was not a party to a prohibited tax shelet transaction?  Obes the organization solicit any contributions that ever not tax deductible contributions or gifts were not tax deductible or not tax deductible contributions under section 170(e).  Organizations that may receive deductible contributions under section 170(e).  Organizations that may receive deductible contributions under section 170(e).  Organizations that may receive deductible contributions under section 170(e).  Organizations that may receive deductible contributions under section 170(e).  Organizations that may receive deductible contributions under section 170(e).  Organizations that may receive deductible contributions under section 170(e).  Organizations that may receive deductible contributions and services provided?  Organization self-general contributions of expose the section 170(e).  Organization self-general contributions of expose the section 170(e).  Organization self-general transactions of the section 170(e).  Organization self-general t	b	If at least and is reported on line 2a, did the organization file all required tederal employment tax returns?		<del>^</del>	~
b If "Yes," has it filled a From 990-T for this year? If "No" to thire 30, proving all explanation of substitution of the authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? If the foreign country (such as a bank account, securities account, or other financial accounts? If the foreign country (such as a bank account, securities account, or other financial accounts? BARI). See instructions for filing requirements for FincEN form 114, Report of Foreign Bank and Financial Accounts (FBARI). See instructions for filing requirements for FincEN form 114, Report of Foreign Bank and Financial Accounts (FBARI). See instructions for filing requirements for FincEN form 114, Report of Foreign Bank and Financial Accounts (FBARI). See instructions for filing requirements for FincEN form 114, Report of Foreign Bank and Financial Accounts (FBARI). See instructions for filing requirements for FincEN form 114, Report of Foreign Bank and Financial Accounts (FBARI). See instructions of filing requirements for FincEN form 114, Report of Foreign Bank and Financial Accounts (FBARI). See instructions of filing requirements for Financial Accounts (FBARI). See instructions of filing requirements for Financial Accounts (FBARI). See instructions of filing requirements for Financial Accounts (FBARI). See its filing and filing	_	Did the agreemention have unrelated husiness gross income of \$1,000 or more during the years			
4a At any time during the calendar year, did the organization news an interest in this displace to study a financial account is provided country (such as a bank account, securities account, or other financial account)?  4 b if "Yes," enter the name of the foreign country see instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), See in the second of the provided of the organization aparty to a prohibited tax sheleter transaction?  5 b Was the organization aparty to a prohibited tax sheleter transaction?  6 b Uses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twere not tax deductible contributions?  6 c Does the organization include with every solicitation an express statement that such contributions or girths were not tax deductible?  7 organizations that may receive deductible contributions under section 170(c).  8 Did the organization to notify the donor of the value of the goods or services provided?  9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  1 if "Yes," indicate the number of Forms 8282 filed during the year  9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal banefit contract?  10 Did the organization received a contribution of qualified indicetual property, did the organization file form 8882 are quieted to file form 8282?  1 if "Yes," indicate the number of Forms 8282 filed during the year is a property of the separation file form 8888 are required to file form 8886. The substantial property did the organization file form 8888. The substantial property did the organization file form 8888. The substantial property did the organization file form 890 are property of the property did the organization file form	_	to the state of th	3D		
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinceN form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See in the organization a party to a prohibited tax shetter transaction at any time during the tax year?  Was the organization a party to a prohibited tax shetter transaction at any time during the tax year?  If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shetter transaction?  If "Yes," did 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?  Organizations solicit any contribution stat were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$57 made party as a contribution and party for goods and services provided to the payor?  Organizations that may receive deductible contributions under section 170(c).  Did the organization notify the donor of the value of the goods or services provided?  The properties of the payor?  Organization seel, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8252?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  If the organization received a contribution of cars, bosts, airplanes, or other whichs, did the organization file Form 899 as required?  If the organization and property for advised funds.  Did the sponsoring organization make any transle distributions under section 4968?  Sponsoring organization make any taxable distributions under section 4968?  Did the sponsoring organization make any taxable distributions under sect	4a	At the selection of the organization have an interest in, or a signature of other dutions, over,	4a		×
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Phanical Accounts (Foreign See Was the organization approach as the program of the	h	and the foundation of the foun			
Sa Was the organization a party to a prohibited tax sheefer transaction at any time up the companization bild any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 6 a or 5b, did the organization file Form 8386-T?  Boose the organization such any contributions that were not tax deductible as charitable contributions?  Organization solicit any contributions that were not tax deductible as charitable contributions?  Organizations that may receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  Organizations that may receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  Organizations that may receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  Organization service and the organization notify the donor of the value of the goods or services provided?  Organization services any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," indicate the number of Forms 8282 filed during the year  Old the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization receive a contribution of qualified intellectual property, did the organization file Form 899 serquice?  If the organization receive a contribution of qualified intellectual property, did the organization file Form 899 serquice?  If the organization receive a contribution of qualified intellectual property, did the organization file Form 899 serquice?  If the organization receive any premiums directly or indirectly, to pay service form 699-699.  Section 501(c)(2) qualified non-pro	U	Coal instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAn).			
b Did any taxable party notify the organization that it was or is a party to a principate tax standards and the companization for the companization that it was or it is a party to a principate than \$100,000, and did the organization for the companization solicit any contributions are that were not tax deductibles on the companization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-c7 if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-c7 if the organization make excess business holdings at any time during the year?  Sponsoring organization make excess business holdings at any time during the year?  Sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Section 501(c)(12) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Section 501(c)(12) organizations. Enter:  Gross income from other sources. (Do not net amounts due or paid to other sources. (Do not net amount of reserves on h	5a	Was the examination a party to a prohibited tax shelter transaction at any time during the tax year.			
c If "Yes" to line 6 aor 5b, did the organization file Form 8980-1.  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 or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If the organization neceived a contribution of core, both goods or services provided?  If the organization neceived a contribution of core, both goods or services provided?  If the organization neceived a contribution of core, both goods or services provided or not provided to a core the good or services or the goods or services or provided or not provided	_	Did any taxable party notify the organization that it was or is a party to a promined tax sheller transaction.	-		
Sea Dose the organization have annual gross receipts that are normally gleate than 3 rotoca, suctions, and the organization societ are contributions or grain society and contributions or gifts were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  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?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization to the payor?  If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization receive any funds, directly or indirectly, on a personal benefit contract?  If the organization from the contribution of cars, boats, sirplanes, or other vehicles, did the organization flar Form 1998-0; and the organization flar form 1998-0; and the organization flar form 1999-0; and the organization flar form 1990-0; and the organization flar form 1990-0; and the organization flar form 1990-0; and the organization flar donor advised funds. Did a donor advised fund maintained by the 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?  Sponsoring organization have excess business holdings at any time during the year and the organizations form of the value of the organization flar form 1990-199-199-199-199-199-199-199-199-199		arms with the communication file Form 8886-17	5C		
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Section 501(c)(12) organizations. Enter:  a 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.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b 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.  a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b		Section 501(c)(7) organizations. Enter.			
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17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?					
If "Vee " complete Form 6069	17	Openium 504(a)(a)) organizations. Did the trust, or any disqualified or other person engage in any activities	17	-	-
			Fo	<sub>rm</sub> 99	0 (2022

Form 990	) (2022)	and f	or o	"No"
Part \	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI	,00 n.c		0.,0.
	Check if Schedule O contains a response or note to any line in this run.			
Section	on A. Governing Body and Management		Yes	No
	Enter the number of voting members of the governing body at the end of the tax year . 12			E.
1a	Enter the number of voting members of the governing body at the cite of the soverning body, or 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		í	
	committee, explain on Schedule O.			A.
	The state of voting members included on line 1a above, who are independent .   1b   17			
ь 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer director trustee or key employee?	2		_×_
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 of other persons.	3		×
4	Did the expeniention make any significant changes to its governing documents since the prior Form 990 was filled?	4		<u>×</u>
5	Did the organization make any significant changes to be geterming the organization have any significant changes to be geterming the organization of the organization's assets?	5		×
6	military in the same members or stockholders?	6		_×_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	ı _		
•-	one or more members of the governing body?	7a		<u>×</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	-,,	ļ	
	stockholders or persons other than the governing DOQV!	7b	angerak.	<b>X</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		176	
	the year by the following:			X.
а	The governing body?	8a 8b	×	
b	Each committee with authority to act on behalf of the governing body?	80		
9	Is there any officer, director, thuse 2. If Wee " provide the names and addresses on Schedule O	9		×
	The eventuation of mountain addition of the transfer of the tr		nde )	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		Yes	No
	humahaa ay affiliataa?	10a		×
10a	Did the organization have local chapters, branches, or affiliates?			-
b	If "Yes," did the organization have written policies and procedures governing the detailed and procedures governing the governing the detailed and governing the governing	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	
11a	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		<b>100</b>	
b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×	
12a	and key employees required to disclose annually interests that could give rise to connicts?	12b	×	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
С	describe on Schedule O how this was done	12c	×	
40	Did the organization have a written whistleblower policy?	13_	×	
13	Bid the appropriation have a written document retention and destruction policy?	14	×	
14 15	and the second s			
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.	126	1	
•	The arganization's CEO Executive Director or top management official	15a		×
a b	Other officers or key employees of the organization	15b	2007.4	X NA and
J	15 (1) (as a top of 15), describe the process on Schedule O. See Instructions.	(2) (5) (3) (5)		
16a	But the expeniention invoct in contribute assets to or participate in a joint venture or similar analygement	Service		
	with a tayable entity during the year?	16a	-	X
b	to the the expenientian follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to saleguard the	405	1	
	organization's exempt status with respect to such arrangements?	16b	Щ.	Ь
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	T /99/	ction	501/6
18	o attain 0404 requires on organization to make its forms 1023 (1024 or 1024-A, it applicable), 500, and 500	1 (36)	J.((O) )	55110
	(3)s only) available for public inspection. Indicate now you made these available. Oncor all that apply			
	□ a little □ Anathoria wahaita □ I Inon request □ □ Other (explain on Schedule U)	of inte	rest i	nolicy
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of the	J. 1110		oy
	and financial statements available to the public during the tax year.	ecords		
20	State the name, address, and telephone number of the person who possesses the organization's books and re	5001 U		
	MADIA WHALEY PO BOX 568, BOONE, NC 28607 (828)264-2511			

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

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

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

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

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

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

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

				(0	C)					
(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D)  Reportable compensation from the	(E)  Reportable compensation from related	(F) Estimated amount of other compensation
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) CHARLIE BRADY	45.00									
EXECUTIVE DIRECTOR		×		×	<u> </u>			101,367.	0.	0.
(2) DON MIKUSH	8.00						1			_
CHAIRPERSON	<u> </u>	×	_	×	<u> </u>	<u> </u>	ļ	0.	0.	0.
(3) BONNIE WEYHER MCLAMB	8.00		1	١.,						0.
VICE TREASURER	ļ	×	<u> </u>	×	ļ_	-		0.	0.	0.
(4) KADIE DEAN	8.00								0.	0.
SECRETARY		×		×	-	<del> </del>	<del> </del>	0.	0.	<u></u>
(5) DAVID HARMAN	8.00	×		×				0.	0.	0.
TREASURER		<b>↓</b>	-	<del> ^</del>	├	<u> </u>	┼	0.		<del></del>
(6) MARGARET NEWBOLD	4.00	×	l		}			0.	0.	0.
TRUSTEE	1 00		-	┼-	+-	ļ	+			<u> </u>
(7) ANN BAKER	4.00	×			l	j		0.	0.	0.
TRUSTEE	1 00	<b></b>	╁	+	+-	<u> </u>	+	<del> </del>		
(8) ANN BROWNING	4.00	×					1	0.	0.	0.
TRUSTEE	8.00		+	+-	╁╴	┼──	+			
(9) LEE CARTER	8.00	$\times$					1	0.	0.	0.
TRUSTEE	4.00	1	+-	+	1-	+-	T			
(10) LISA COOPER		×						0.	0.	0.
TRUSTEE	4.00	)	$\dagger$	-	1		1			
(11) JENNIE DERBY TRUSTEE		×					1	0.	0.	0.
(12) PATRICK HOLLOWELL	4.00		1		1		Τ			
TRUSTEE		\ X						0.	0.	0.
(13) CRAIG LANCASTER	4.00									
TRUSTEE		×				1_	$\perp$	0.	0.	0.
(14) SHAWN W POOLE	4.00									
TRUSTEE		×				Ш		0.	0.	
										Form <b>990</b> (2022)

Part	Section A. Officers, Directors, T	rustees, l	Key E	Emp	olo	yee	s, an	d F	lighest Compe	nsated Er	nplo	yees (c	ontinu	ıed)
	(A) Name and title		(do n box, i office	ot ch unles	Pos eck s pe d a d	ition more rson lirect	than o	one an tee)	(D)  Reportable compensation from the	(E)  Reportable  compensation  from related		(F) Estimated amount of other compensation		unt
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations 1099-MIS 1099-NE	C/		m the cation ar	
	SSE POPE	4.00	×						0.		0.			0.
	USTEE DE REECE	4.00	ļ	ļ					0		0.			0.
	USTEE	4.00	×	├	-	-		├-	0.		<u> </u>			
	KA REA	4.00	×			_	ļ	_	0.		0.			0.
	LE CAVENY	8.00	×						0.	<u> </u>	0.			0.
	RUSTEE		-	<del>                                     </del>										
(20)				<del>                                     </del>	<u> </u>	-								
(21)			.]	-	-			-						
(22)			_	-	-			+						
(23)		-	-	-	-		-	-						
			-	-	-	<u> </u>		-				-		
(24)			-	-	-	-	ļ 	-						
(25)									101 067					0
	Subtotal	 VII Section		•	•	•		•	101,367.	-	0.			
c d	Total from continuation sheets to Partotal (add lines 1b and 1c)				·	<u>.</u>	· ·	•	101,367.	D 046	0.	2 = 4		0
2	Total number of individuals (including bureportable compensation from the organ	it not limite	d to t	hos	e lis	sted	abov 1	/e) \	who received mo	re than \$10	)0,000	JOI		
												- Danier	Yes	No
3	Did the organization list any former employee on line 1a? If "Yes," complete	Schedule :	J tor s	suci	า เทต	aivic	guai	•				3	3976	<u>×</u>
4	For any individual listed on line 1a, is the organization and related organizations individual	greater to	nan s	6150 	J,00		п тү	es,		· · ·		4		×
5	Did any person listed on line 1a receive for services rendered to the organization	or accrue on? If "Yes,"	comp	ens:	atio e Sc	n fro	om ar dule J	ny u I for	inrelated organiza such person	ation or ind	lividua • •	al 5		×
Sect										roccived	more	than \$	100.00	10 0
1	Complete this table for your five his compensation from the organization. Re	ghest comp port.compe	pensa ensati	atea on f	ind or th	aep he c	ender alend	n d lary	year ending with o	or within the	e orga	nization	's tax	year
	(A) Name and business ac			_					(B) Description of se			(C) Compens		
APP	ALACHIAN CHETOM BILLIDERS PO BOX	188 . I	INVI	LLE	E,_1	NC	2864	6 E	BUILDING CON	TRACTOR			90,7	
BLUE	RIDGE TRAIL WORKS, INC., 227 EAST FROM	IT STREET,	STATE	SVI	LLE	, NC	2867	7 1	TRAIL CONSTR	UCTION		1	.22,6	.00
								1						
2	Total number of independent contract	tors (includ	ding	but	not	t lin	nited	to	those listed abo	ove) who				
	received more than \$100,000 of compet	nsation fron	ii ine	orga	ai IIZ	auv	11				L		<u>aan</u>	1,000

Part '	VIII	Statement of Revenue		uline in this Pa	rt VIII		🗆
		Check if Schedule O contains a respons	se or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ທ໌ ທ	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts		Membership dues 1b					
8 E	C	Fundraising events 1c					
£, ₹	d	Related organizations 1d					
<b>⊕</b>	е	Government grants (contributions) 1e	2,880,522.			1987	
S. is	f	All other contributions, gifts, grants,	2 005 024				
粪힐		and similar amounts not included above 1f	3,965,824.				
흔히	g	Noncash contributions included in lines 1a–1f 1g	\$1,962,006.				
E E	_	Total. Add lines 1a-1f		6,846,346.			
OB	h	Total. Add lines 1a-11	Business Code		1.00		
<b>o</b>	20						
ξ	2a b						
Program Service Revenue	C						<del> </del>
	d						
20 %	е						
윤	f	All other program service revenue				1 STON 1/4 1	104 5 140 5 15
	g	Total. Add lines 2a-2f			次             	<b>李大金和《新》</b>	i in the country of the country of
	3	Investment income (including dividends other similar amounts)	s, interest, and	10,727.	0.	0.	10,727.
		other similar amounts)	nd proceeds	10,727.			
	4	Income from investment of tax-exempt bo					
	5	Royalties	(ii) Personal				
	60	Gross rents 6a					100
	6a b	digod joint					
	C	Rental income or (loss) 6c					
	d			Contract of the second of the		1 4 2 4 5 6 7 5 6	144.7035
	7a	(i) Securities	(ii) Other				
		sales of assets			i de la companya da l	Maria P	Participant.
		other than inventory 7a					
ē	b	Less: cost or other basis	1				
Revenue	1	and sales expenses 7b					
ě	C	Gain or (loss) 7c		A CONTRACTOR OF THE CONTRACTOR	in Several Property of the Control o		
	d		<del> </del>	149			
Other	8a	Gross income from fundraising events (not including \$					1.00
•		of contributions reported on line					
	ļ	1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b			1 N 19 1 1 2		d (#1363 1657 1463 ) _
		Net income or (loss) from fundraising ev	rents	adente e la la collègia	1949 / 16 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 / 18 12 /		7 77 C 2864 G / S
	92						
		activities. See Part IV, line 19 . 9a					
	l k	b Less: direct expenses 9t				1.48.	
		Net income or (loss) from gaming activity					
	108	a Gross sales of inventory, less returns and allowances 10	a				
	١.	10 10 10 10 10 10 10 10 10 10 10 10 10 1					
	1	c Net income or (loss) from sales of inver					<del>                                     </del>
	+	C Hat moone or hood war asset to have	Business Code				
sno	s 11	а					
je i	Ž  ''	b					
ella	<u>ئ</u> ا	C				+	+
Miscellaneous	ř	d All other revenue				<del> </del>	+
Σ		e Total. Add lines 11a-11d		6,857,07	3 / (	). (	0. 10,727
	12	Total revenue. See instructions		10,031,01	<u>~.1                                    </u>		Form <b>990</b> (202

	Statement of Functional Expenses 501(c)(3) and 501(c)(4) organizations must complete	e all columns. All of	ther organizations i	nust complete column	1 (A).
ction	501(c)(3) and 501(c)(4) organizations must complete Check if Schedule O contains a response of	r note to any line in	T CI IIO T COTTO		
	include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and general expenses	Fundraising
Ωħ	and 10h of Part VIII.	Total expenses	expenses	general expenses	expenses
	Grants and other assistance to domestic organizations	[			
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				78 - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 1
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	101,367.	70,957.	21,287.	9,123.
	trustees, and key employees	101,307.			
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
	persons (as defined under section 4958(c)(3)(B)				
	•	493,182.	339,656.	98,527.	54,999.
7	Other salaries and wages Pension plan accruals and contributions (include				
8	section 401(k) and 403(b) employer contributions)				
_	Other employee benefits				
9	Payroll taxes				
0 1	Fees for services (nonemployees):				
a	Management				
b	Legal				
C	Accounting				
d	Lobbying		100000000000000000000000000000000000000		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	0.461	2,436.	0.	25
12	Advertising and promotion	2,461. 22,563.	6,358.		87
13	Office expenses	22,303.			
14	Information technology				
15	Royalties				
16	Occupancy	3,998.	2,542	. 1,456.	0
17	Travel Payments of travel or entertainment expenses	3,330			
18	for any federal, state, or local public officials				
	Conferences, conventions, and meetings .	14,638.	14,638		0
19	1	21,706.	21,605	. 101.	
20	Interest Payments to affiliates			1 000	4,266
21	Depreciation, depletion, and amortization	25,596.			4,200
22 23	Insurance .	24,316.	21,501	. 2,815.	
24	Other expenses Itemize expenses not covered				
2.4	above (List miscellaneous expenses on line 246. If				
	line 24e amount exceeds 10% of line 25, column		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(A), amount, list line 24e expenses on Schedule O.)			161.	16,16
4	FUNDRAISING EXPENSES	17,463.		·	46:
	TELEPHONE	3,438		<u> </u>	
	c LAND ACQUISITION - PASS THROUGH	565,908		<u>'</u>	41
	d UTILITIES	2,508 3,352,061			29,09
	e All other expenses	4,651,205			114,64
25	Total functional expenses. Add lines 1 through 24e	4,051,203	1,550,500		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs			1	
	from a combined educational campaign and	1		Ì	1
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (26

Pa	ırt X	Balance Sheet		uny lino in this Da	tX	_	🗆	
		Check if Schedule O contains a response or	note to a	iny intentional	(A) Beginning of year		<b>(B)</b> End of year	
—т		Cash—non-interest-bearing			3,010,295.	1	4,892,747.	
	1	Cash—non-interest-bearing				2		
- 1	2	Pledges and grants receivable, net			419,079.	3	233,093.	
ì			30,996.	4	12,554.			
	4	Accounts receivable, net						
	5	trustee, key employee, creator or founder, subst						
		controlled entity or family member of any of thes	e persons	s	The state of the s	5		
	6	Loans and other receivables from other disqual under section 4958(f)(1)), and persons described		6				
	_	Notes and loans receivable, net				7		
ets	7	Inventories for sale or use				8		
Assets	8				9,536.	9	11,161.	
	9	Land, buildings, and equipment: cost or other						
	10a	basis. Complete Part VI of Schedule D	10a	1,443,192.				
		Less: accumulated depreciation	10b	38,589.	1,109,931.	10c	1,404,603.	
	b	Investments—publicly traded securities	1,799,995.	11	1,582,766.			
	11	Investments—publicly traded securities  Investments—other securities. See Part IV, line				12		
	12	Investments—program-related. See Part IV, line			13			
	13	Intangible assets		14				
	14	Other assets. See Part IV, line 11		12,659,327.	15	12,513,525.		
	15	Total assets. Add lines 1 through 15 (must equal	al line 33)		19,039,159.	16	20,650,449.	
	16	Accounts payable and accrued expenses			63,775.	17	68,567.	
	17	Grants payable				18		
	18	Deferred revenue			19			
	19	Tax-exempt bond liabilities		20				
	20	Escrow or custodial account liability. Complete	Part IV of	Schedule D .		21		
	21	Leans and other payables to any current O	ow or custodial account liability. Complete that the state of the stat					
ies	22	tructus key employee creator or founder, subs	rustee, key employee, creator or founder, substantial contributor, or 35%					
Ę		controlled entity or family member of any of the	se persor	ns		22		
Liabilities	00	Secured mortgages and notes payable to unrela	ated third	parties	229,000.	23		
_	23 24	Linear word notes and loans navable to unrelate	d third ba	arties	1,063,729.	24	980,215.	
	25	Other liabilities (including federal income tax.	payables	s to related trinu		1		
	25	parties, and other liabilities not included on line	s 17–24).	. Complete Part X		1		
		of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25		. <u> </u>	1,356,504.		1,048,782.	
	+-	Organizations that follow FASB ASC 958, ch	eck here	X				
ö	ļ	and complete lines 27, 28, 32, and 33.						
<u>a</u>	27	Net assets without donor restrictions .			3,541,736		3,395,071.	
Ba	28	Not assets with donor restrictions			14,140,919	. 28	16,206,596.	
P		Organizations that do not follow FASB ASC	958, che	ck here 📋				
Ē		and complete lines 29 through 33.				5		
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds	3			29		
ets.	30	Paid-in or capital surplus, or land, building, or o	equipmen	it fund		30	<del>                                     </del>	
SS	31	Retained earnings, endowment, accumulated i	ncome, o	r other tunds .	17 600 655		19,601,667.	
Ą	32	Total net assets or fund balances			17,682,655		+	
Ž	33	Total liabilities and net assets/fund balances .	<u></u>	<u> </u>	19,039,159	. 33	Form <b>990</b> (2022	
							Form 990 (2022	

				Page 12
m 990 art	XI Reconciliation of Net Assets			🗆
	at the Collectule Cooptains a response of note to any line in this factor.	1	6,85	7,073.
1	Port VIII column (Δ) line 12)	2		1,205.
2	I Dead IV Addition (A) 1002 (2)	3		5,868.
3		4		32,655.
4	- 11 - I beginning of Voor (MIS) POUR Fall A, 1110 02, 00 011111 (7)	5		36,856.
5	Net unrealized gains (losses) on investments	6		
6	and too of facilities	7		
7	and the same and t	8		
8		9		
9				
10	Not assets or fund balances at end of year. Combine into 5 through	10	19,60	01,667.
	32. column (B))	1.51		
art	XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	· · · · · ·	Yes No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	on (	
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were correviewed on a separate basis, consolidated basis, or both:	 mpiled	or	
b	Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited basis, consolidated basis, or both:	 dited or	. <b>2b</b>	×
С	the audit, review, or compilation of its financial statements and selection of all independent accounts the audit, review, or compilation of its financial statements and selection of all independent accounts the audit, review, or compilation of its financial statements and selection of all independent accounts the audit, review, or compilation of its financial statements and selection of all independent accounts the audit, review, or compilation of its financial statements and selection of all independent accounts the audit, review, or compilation of its financial statements and selection of all independent accounts the audit accounts to the audit accounts accounts the	explain	on S	×
3a	the federal award was the organization required to undergo an audit of audits as set			×

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

3b

#### **SCHEDULE A** (Form 990)

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

OMB No. 1545-0047 **2022** 

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

Open to Public Inspection

Internal Revenue Service

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization 58-2502695 BLUE RIDGE CONSERVANCY Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) Part I ☐ 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).) 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 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in hospital's name, city, and state: section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☒ 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 An organization that normally receives (1) more than 33½% 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 33½% 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 b 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. C 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. e Enter the number of supported organizations . . . . . Provide the following information about the supported organization(s). (vi) Amount of (v) Amount of monetary (iv) Is the organization (iii) Type of organization (ii) EIN other support (see (i) Name of supported organization listed in your governing support (see (described on lines 1-10 instructions) document? instructions) above (see instructions)) Yes No (A) (B) (C) (D) (E)

18

Page 2 Schedule A (Form 990) 2022 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2022 (f) Total (d) 2021 (c) 2020 (a) 2018 **(b)** 2019 Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not 3,080,166. 5,430,025. 3,356,372. 5,943,061. 6,846,346. 24,655,970. include any "unusual grants.") . . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . 3,080,166. 5,430,025. 3,356,372. 5,943,061. 6,846,346. 24,655,970. Total. Add lines 1 through 3 . . . 4 The portion of total contributions by 5 each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 24,655,970. Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total (e) 2022 (c) 2020 (d) 2021 (a) 2018 (b) 2019 Calendar year (or fiscal year beginning in) 5,430,025. 3,356,372. 5,943,061. 6,846,346. 24,655,970. 3,080,166. Amounts from line 4 . . . . . . . 7 Gross income from interest, dividends, 8 payments received on securities loans, rents, royalties, and income from 10,371. 45,868. 10,727. 14,813. 7,210. 2,747. similar sources . . . . . . . Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . Other income. Do not include gain or 10 loss from the sale of capital assets 27,040. 27,040 (Explain in Part VI.) . . . . . . . . 24,728,878. Total support. Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 99.71% Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . Public support percentage from 2021 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . 15 331/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	n A. Public Support	<del></del> -		(-) 0000	(d) 2021	(e) 2022	(f) Total
Calend	lar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(u) 2021	(O) EGEE	
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
3	organization's tax-exempt purpose						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b				A 194		21
Secti	on B. Total Support			1 1 2 2 2 2	(-B 0001	(a) 2022	(f) Total
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(i) rotai
9	Amounts from line 6			<del> </del>			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C			<del> </del>		<del> </del>		
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						ion E01(a)(3)
14	First 5 years. If the Form 990 is for the organization, check this box and stop h	nere	<u> </u>	nd, third, fourt	n, or fifth tax :	year as a sect	· · · · □
Sec	tion C. Computation of Public Supp	ort Percenta	ge	a 12 polyme #	7)	. 15	%
15	D. Life and percentage for 2022 (line	e 8. column (f).	divided by iir	e is, column (	",	16	%
16	Bublic support percentage from 2021 S	Schedule A, Pa	rt III, line 15_	· · · · ·	<del></del>	- 1	
Sec	tion D. Computation of Investment	ncome Perc	umn (f) divide	d by line 13. co	olumn (f))	. 17	%
17	Investment income percentage for 202: Investment income percentage from 20						%
18							/3%, and line
198							
ļ	b 331/3% support tests - 2021. If the orga	nization did no is box and <b>stor</b>	t check a box here. The ord	on line 14 of lin janization qualif	ies as a publicly	supported org	anization .
20		did not check	a box on line	14, 19a, or 19b	o, check this b	ox and see ma	Tuctions : L
20						Schedu	le A (Form 990) 2022

Part IV Supporting Organizations

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

Section A.	All S	Supporting	Organi	izations

- 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.
- 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?
- 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.
- 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 77 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**.
- 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.
- 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	
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and the			
2)(B)			
)? If			
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ition ised 2)(B)			
es," EIN tion;	4c		
ady	) ba	ł	
s) to fited rt or	5c		
outor ntity	7		
line	8	W.	1
more tions	9a	1	
hich	9b	1	
enefit	9c	_	
ction rated	40-		
0, to	10a 10b		

<b>0</b> 1 14	A (F 000) 2022	Page 5
Part IV	A (Form 990) 2022  Supporting Organizations (continued)	Yes No
11 1	Has the organization accepted a gift or contribution from any of the following persons?  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 11b
b d	A family member of a person described on line 11a above? 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 <b>Part VI</b> .	11c
Section	on B. Type I Supporting Organizations	Yes No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
	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 organization(s) that operated out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2
Saction	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1
Secti	on 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 year, (ii) a copy of the Form 990 that was most recently filed as of 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 of elected by the supported organization of the supported organization? If "No," explain in <b>Part VI</b> how organization(s) or (ii) serving on the governing body of a supported organization organ	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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3
<del></del>		
Sect 1	Observation have part to the method that the organization used to satisfy the integral and	e instructions).
a b c	☐ The organization satisfied the Activities Test. Complete Into 2 Below. ☐ The organization is the parent of each of its supported organizations. Complete Into 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity. ☐ The organization supported a governmental entity.	y (see instructions Yes No
2 a	the supported organization(s) to which the organization was responsive? If Too, the three 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 how the organization constituted substantially all of its activities.	
t	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> 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

Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

За

3b

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	trus	st on Nov. 20, 1970 ( <i>explain</i>	<i>in <b>Part VI</b></i> ). See ns A through E.
Secti	on A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
		1		(4)-11-11-11
1	Net short-term capital gain	2		
_2_	Recoveries of prior-year distributions	3		
3	Other gross income (see instructions)	4		
4	Add lines 1 through 3.	5		
<u>5</u>	Depreciation and depletion	9		
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)	7		
7_	Other expenses (see instructions)	8		
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		(B) Current Year
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(optional)
1	Aggregate fair market value of all non-exempt-use assets (see	M		
ı	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
<u>a</u>	Average monthly cash balances	1b		
<u>C</u>	Fair market value of other non-exempt-use assets	10		
<del>U</del>	Total (add lines 1a, 1b, and 1c)	1d		
<u>— ч</u>	Discount claimed for blockage or other factors			
·	(explain in detail in <b>Part VI</b> ):			THE TAX TO SERVE AND THE
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,			
4	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		
	tion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	Visit Market	
2	Enter 0.85 of line 1.	2	The state of the s	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			1
U	amarganay tamparany reduction (see instructions).	6		L
7	☐ Check here if the current year is the organization's first as a non-function	nally	integrated Type III support	ing organization
•	(see instructions)			

Page 7

	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiz	ations (continue	<u>a)</u>	
Part \					<b>Current Year</b>
	n D—Distributions			1	
1	Amounts paid to supported organizations to accomplish e	xempt purposes	red .	┞┸┼	
2	Amounts paid to perform activity that directly furthers exce	npt purposes of suppor	leu	2	
	arranizations in excess of income from activity			3	
3	Administrative expenses paid to accomplish exempt purpo	4			
		5			
5	Qualified set-aside amounts (prior IRS approval required -	provide details in Fait		6	
6	Other distributions (describe in Part VI). See instructions.			7	
7	Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which	the organization is rest	onsive		
8	Distributions to attentive supported organizations to who	, the organization .		8	
	(provide details in Part VI). See instructions.			9	
9_	Distributable amount for 2022 from Section C, line 6			10	
10	Line 8 amount divided by line 9 amount	71	(ii)		(iii)
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributio Pre-2022	ns	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6	404 404 404 404 404 404 404 404 404 404		<u> </u>	
2	Underdistributions if any, for years prior to 2022				
_	(reasonable cause required—explain in Part VI). See				
	instructions.		ipper a see Asia Ip		
3	Excess distributions carryover, if any, to 2022	Technic Augusti			
а	From 2017	140	The state of the s		
b	From 2018				
С	From 2019		**************************************		
d	From 2020	7.7			
е	From 2021	CONTRACTOR OF THE PARTY OF THE			
f	Total of lines 3a through 3e	a de la companya de			
g	Applied to underdistributions of prior years	100			Annual An
<u>h</u>	Applied to 2022 distributable amount	360-Mean-1-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	17 17 18 18 18 18 18 18 18 18 18 18 18 18 18		
<u>i</u> _	Carryover from 2017 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				100
	Remainder. Subtract lines 3g, 3n, and of normalis 3n	1517 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1.56
4	Distributions for 2022 from				The second second
	Section D, line 7: \$ Applied to underdistributions of prior years	Property of the second	and the second second	Section Section	
<u>a</u>	Applied to 2022 distributions of price years  Applied to 2022 distributable amount	Transfer of the second		7	
<u>b</u>	Remainder. Subtract lines 4a and 4b from line 4.				20 (44) 1/20(y = 1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /
<u>c</u>	Remaining underdistributions for years prior to 2022, if				
5	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in <b>Part VI</b> . See instructions.		Service of the servic	246 I.S	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	Remaining underdistributions for 2022. Subtract lines 3	1			
6	and 4b from line 1. For result greater than zero, explain	in state of the second			
	Part VI. See instructions.		( ) y a diserbit	9336 (484)	
7	Excess distributions carryover to 2023. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
	- t 0019			-	
<u>i</u>	5 0040				
	- C 0000				
	Excess from 2021		+		
	Excess from 2022		·		Schedule A (Form 990) 202
					•

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section IIII, line 12; Part IV, Section E, lines 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 3a, 6, 9a, 9b, 3c, 11a, 11b, tale 10b, 11c, 2a, 2b, B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Pt II	Ln 10: Other Income Part II, Line 10 Description: GAIN ON SALE OF LAND
2021:	27040.

#### **SCHEDULE D** (Form 990)

Department of the Treasury

Internal Revenue Service

### **Supplemental Financial Statements**

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 58-2502695 BLUE RIDGE CONSERVANCY Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 1 Aggregate value of contributions to (during year) . 2 Aggregate value of grants from (during year) . . . Aggregate value at end of year . . . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) 
Preservation of a historically important land area Preservation of a certified historic structure ☒ Protection of natural habitat X Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after July 25, 2006, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: \$ 

Part	Organizations Maintaining	Collections of	Art, Historical 1	reasures,	or Oth	ner Similar Ass	ets (cont	inued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, chec	k any of the	follow	ing that make sig	nificant u	se of its
а	☐ Public exhibition			or exchange				
b	☐ Scholarly research		e 🗌 Other					
	Description for future generations							
4	Preservation for future generations  Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.							
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive of than to be mainta	donations of art, ined as part of th	historical tro e organizatio	easures on's col	, or other similar lection?	☐ Yes	☐ No
Part	W Ecorow and Custodial Arra	ngements						
	Complete if the organization	answered "Yes"						orm
1a	Is the organization an agent, trustee, included on Form 990, Part X?				ions or	other assets not	☐ Yes	□ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following t	able:				
						Am	ount	
C	Beginning balance				1c	<u> </u>		<del></del>
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance	<b></b> .			1f			
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line 21, for e	escrow or cu	ıstodial	account liability?	∐ Yes	∐ No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	n has been	provide	d on Part XIII .	· · ·	
Par	Endowment Funds.							
	Complete if the organization	answered "Yes'	' on Form 990,	Part IV, line	10.			<del></del>
	-	(a) Current year	(b) Prior year	(c) Two year	s back	(d) Three years back	(e) Four ye	
1a	Beginning of year balance	1,109,359.	1,005,877.			781,180.		,102.
b	Contributions	1,590.	3,675.	10,	000.	12,500.	25	,000.
C	Net investment earnings, gains, and				1			
	losses	-167,700.	125,807.	101,	403.	151,419.	-58	,822.
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs	41,700.	26,000.	26,	906.	23,719.	13	,100.
f	Administrative expenses							
g	Fnd of year balance		1,109,359.			921,380.	781	,180.
2	Provide the estimated percentage of t	he current year er	d balance (line 1	g, column (a	)) held a	as:		
а	Board designated or quasi-endowme	nt	%					
b	Permanent endowment	%						
С	Term endowment %							
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.					
3a	Are there endowment funds not in th	e possession of th	ne organization th	nat are held	and adı	ministered for the	1	
	organization by:							es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	×
b	If "Yes" on line 3a(ii), are the related of	rganizations listed	l as required on S	Schedule R?			3b	×
4	Describe in Part XIII the intended use	s of the organization	on's endowment	funds.				
Par	t VI Land, Buildings, and Equip	oment.				0. 5 000 1	Daniel V. Bra	- 10
	Complete if the organization	n answered "Yes	<u>" on Form 990,</u>	Part IV, line	e 11a.	See Form 990, I	an X, III	ie iu.
	Description of property	(a) Cost or o (investr		or other basis (other)		Accumulated epreciation	(d) Book	
1a	Land		0,000.		no Pra C no suple fu			0,000.
b	Buildings	. 60	3,337.			25,522.	577	,815.
C	Leasehold improvements							<del></del>
d			0,807.			10,879.		928.
۵	Other	. 42	9,048.		<u> </u>	2,188.		,860.
Tota	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	90, Part X, colun	nn (B), line 10	0c.) .		1,404	1,603.

art VII	Investments — Other Securities.  Complete if the organization answered "Yes" on F	orm 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	(c) Method of valuation: Cost or end-of-year market value
Financial	derivatives	•	
Closely h	eld equity interests	•	
(B)			
(C)			
(D) (E)			
(F)			
(G)			
# IN			
	mn (b) must equal Form 990, Part X, col. (B) line 12.) Investments—Program Related.	•	
art VIII	Investments—Program Related.  Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
1)			
2)			
3)			
4) 5)			
6)			
7)			
8)			
<u>'0)</u>	Down Port V col (R) line 13)		
9) otal. (Cold	umn (b) must equal Form 990, Part X, col. (B) line 13.)	•	11,9-10, 200
<u>'0)</u>	umn (b) must equal Form 990, Part X, col. (B) line 13.)  Other Assets.  Complete if the organization answered "Yes" on	Form 990, Part IV, li	11,9-10, 200
9) otal. (Cold		Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15.
9) otal. (Cold Part IX	Other Assets.  Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE	. Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15 (b) Book value 394,000
9) otal. (Cold Part IX	Other Assets.  Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73
otal. (Cold Part IX (1) LAND (2) CONSE	Other Assets.  Complete if the organization answered "Yes" on  (a) Description	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73
otal. (Cold Part IX (1) LAND (2) CONSE	Other Assets.  Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE  ERVATION LANDS AND EASEMENTS	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73
9) otal. (Cold Part IX  (1) LAND (2) CONSE (3) LAND (4)	Other Assets.  Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE  ERVATION LANDS AND EASEMENTS	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73
9) otal. (Colo Part IX  (1) LAND (2) CONSE (3) LAND (4) (5)	Other Assets.  Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE  ERVATION LANDS AND EASEMENTS	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73
9) otal. (Colo Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7)	Other Assets.  Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE  ERVATION LANDS AND EASEMENTS	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,000  10,012,73
9) otal. (Colored Colored Colo	Other Assets. Complete if the organization answered "Yes" on (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS HELD FOR TRANSFER	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15.  (b) Book value  394,000  10,012,73  2,106,79
9) otal. (Colored Colored Colo	Other Assets. Complete if the organization answered "Yes" on (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS HELD FOR TRANSFER	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15.  (b) Book value  394,000  10,012,73
9) otal. (Colored Colored Colo	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,000  10,012,73  2,106,79
9) otal. (Color Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9) Fotal. (Co	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73  2,106,79
9) otal. (Colored Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9) Fotal. (Co	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,009  10,012,73  2,106,79
9) otal. (Colo Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9) Fotal. (Co Part X  1. (1) Federa	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,009  10,012,73  2,106,79
9) otal. (Colo Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9) Fotal. (Co Part X  1. (1) Federa (2)	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73  2,106,79
9) otal. (Colored Colored Colo	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73  2,106,79
9) otal. (Colored Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9)  Total. (Co Part X  1. (1) Federa (2) (3) (4)	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73  2,106,79
9) otal. (Colored Colored Colo	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,009  10,012,73  2,106,79
9) otal. (Colored Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9)  Fotal. (Co Part X  1. (1) Federa (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,009  10,012,73  2,106,79
9) otal. (Colored Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9)  Total. (Co Part X  1. (1) Federa (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,009  10,012,73  2,106,79
9) otal. (Colored Part IX  (1) LAND (2) CONSE (3) LAND (4) (5) (6) (7) (8) (9)  Fotal. (Co Part X  1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" on  (a) Description  HELD FOR SALE ERVATION LANDS AND EASEMENTS  HELD FOR TRANSFER  Jumn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" or line 25.  (a) Description of liability	Form 990, Part IV, li	ne 11d. See Form 990, Part X, line 15  (b) Book value  394,00  10,012,73  2,106,79  12,513,52  ine 11e or 11f. See Form 990, Part X,  (b) Book value

	D (Form 990) 2022	ente With Revenue per Ret	urn.
Part	XI Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,	Part IV. line 12a.	
	Total revenue, gains, and other support per audited finally at the second statements		6,570,217.
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
2	Net unrealized gains (losses) on investments	<b>2a</b> -286,856.	
a	Donated services and use of facilities	2b	
b	Recoveries of prior year grants	2c	
C	Other (Describe in Part XIII.)	2d	
d	Add lines 2a through 2d	26	-286,856.
e	Subtract line 2e from line 1		6,857,073.
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
a b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4h	40	
5	Tital and Add lines 2 and Ac. (This must equal Form 990, Part I, line	12.) 5	
Part	Paganciliation of Expenses per Audited Financial Stater	nents with Expenses per n	leturn.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
1	Total expenses and losses per audited financial statements		4,651,205.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	7/4
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	4,651,205.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	40	_
С	Add lines 4a and 4h		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, li	ne 18.)	4,031,203.
Part	Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4: Part IV lines 1b and 2b: P	art V. line 4; Part X, line
Provi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a a t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to provide any additional infor	mation.
2; Pa	t XI, lines 2d and 40; and Part XII, lines 2d and 45.7166 complete time per		
D+ .	I, Line 9: CONSERVATION EASEMENTS HELD BY THE ORG	GANIZATION ARE NOT REC	COGNIZED
AS I	ASSETS IN THE BALANCE SHEET. ASSETS ARE DEFINED A	AS PROBABLE FUTURE ECC	NOMIC 
BEN	EFITS OBTAINED OR CONTROLLED BY AN ENTITY; THE ORG	GANIZATION DOES NOT BE	:
THA	THE EASEMENTS MEET THE DEFINITION CRITERIA. TH	E COST OF CONSERVATION	LAND
AND	EASEMENTS IS EXPENSED WHEN THE EASEMENT IS ACQUII	RED. 	
			ZMOTUK
Pt	II, Line 5: MONITORING BASED ON GRANT OR OTHER EA	SEMENT CONTRACT STIPOT	TALIONS.
Pt	II, Line 3: NO EASEMENTS MODIFIED, EXCHANGE OR TE	RMINATED.	
Pt.	III, Line 4: ENDOWMENT FUNDS ARE RESTRICTED FOR T	HE PURCHASE OF LAND A	ND
CAF	ITAL EXPENDITURES.		

Schedule D (For	orm 990) 2022	Page \$
Part XIII	Supplemental Information (continued)	
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#### **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

Employer identification number 58-2502695

Part	Types of Property			(c)		
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determinin noncash contribution am	
1 2 3 4 5	Art—Works of art					
6 7 8 9 10 11	Cars and other vehicles Boats and planes Intellectual property Securities—Publicly traded . Securities—Closely held stock . Securities—Partnership, LLC, or trust interests		1901 (S. 190			
12 13	Securities—Miscellaneous Qualified conservation contribution—Historic structures					
14	Qualified conservation contribution—Other	×	1	1,773,544.	FAIR MARKET VALUE/APPE	<u>RAISAL</u>
15 16 17 18 19 20	Real estate — Residential Real estate — Commercial					
21 22 23	Taxidermy					
24 25	Archeological artifacts Other (MATERIALS/SUPPLIES)	X	10		FAIR MARKET VAL	
26 27 28	Other (MEALS ) Other (EUIPMENT ) Other (AUCTION ITEMS )	×	1 48	24,712.	FAIR MARKET VAL	
29	Number of Forms 8283 receive which the organization complete	d by the o	rganization during the tax 33, Part V, Donee Acknowle	year for contributions for edgement	29	. No
30a		ation receiv	ve by contribution any prop	perty reported in Part I, line tribution, and which isn't re	30a	× No
31	Does the organization have a	a gift acc	eptance policy that requ		31 ^	
32a	Does the organization hire or u contributions?	se third pa	arties or related organization	ons to solicit, process, or :	sell noncash	×
33	If "Yes," describe in Part II. If the organization didn't report a describe in Part II.	ın amount i	in column (c) for a type of p	roperty for which column (a	is checked,	

Cabadula M	Town 000) 2022	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and when the organization is reporting in Part I, column (b), the number of contributions, the number of items received or a combination of both. Also complete this part for any additional information.	ther
	or a combination of both. Also complete this part for any additional information.	
		<b></b>
********		
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# SCHEDULE O (Form 990)

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

BLUE RIDGE CONSERVANCY	58-2502695
Pt VI, Line 6: THE ORGANIZATION HAS MEMBERS, NONE OF WHICH VOT	E ON BOARD DECISIONS
OR ON BOARD MEMBER PLACEMENT.	
Pt VI, Line 12c: THIS MATTER IS DISCUSSED DURING BOARD MEETING	GS.
Pt VI, Line 11b: THE EXECUTIVE COMMITTEE/AUDIT COMMITTE AND FU	JLL BOARD REVIEW
AND APPROVE PRIOR TO FILING. THE FULL BOARD RATIFIES PRIOR TO I	FILING.
Pt VI, Line 19: THESE DOCUMENTS ARE MADE AVAILABLE UPON REQUES	ST.
Pt IX, Line 24e:	
Description: REPAIRS & MAINTENANCE	
Total: \$6,594	
Program services: \$4,396	
Management and general: \$1,099	
Fundraising: \$1,099	
Description: OTHER PROGRAM EXPENSES	
Total: \$1,309,466	
Program services: \$1,308,602	
Management and general: \$0	
Fundraising: \$864	
Description: PRINTING & POSTAGE	
Total: \$17,725	
Program services: \$6,603	
Management and general: \$1,267	
Fundraising: \$9,855	
Description: GIFTS IN KIND EXPENSE	
Total: \$1,962,006	
Program services: \$1,923,894	

Name of the organization	Employer Identification number
BLUE RIDGE CONSERVANCY	58-2502695
Management and general: \$31,862	
Fundraising: \$6,250	
Description: SPECIAL EVENTS EXPENSE	
Total: \$0	
Program services: \$0	
Management and general: \$0	
Fundraising: \$0	
Description: OTHER TAXES	
m-h-1- 00	
Program services: \$0	
Management and general: \$0	
Fundraising: \$0	
Description: BANK CHARGES	
Total: \$445	
Program services: \$0	
Management and general: \$445	
Fundraising: \$0	
Description: SUPPLIES	
Total: \$5,772	
Program services: \$3,848	
Management and general: \$962	
Fundraising: \$962	
Description: TRAINING AND EDUCATION	
Total: \$2,689	
Program services: \$2,289	
Management and general: \$400	
Fundraising: \$0	

Schedule O (Form 990) 2022 Name of the organization	Employer Identification number
BLUE RIDGE CONSERVANCY	58-2502695
Description: DUES AND SUBSCRIPTIONS	
Total: \$11,625	
Program services: \$8,520	
Management and general: \$0	
Fundraising: \$3,105	
Description: EASEMENT EXPENSES	
Total: \$0	
Program services: \$0	
Management and general: \$0	
Fundraising: \$0	
Description: LICENSE & FEES	
Total: \$0	
Program services: \$0	
Management and general: \$0	
Fundraising: \$0	
Description: PROCESSING FEES	
Total: \$6,974	
Program services: \$0	
Management and general: \$10	
Fundraising: \$6,964	
Description: RENTS	
Total: \$0	
Program services: \$0	
Management and general: \$0	
Fundraising: \$0	
Description: LEGAL & PROFESSIONAL	
Total: \$28,765	

Schedule O (Form 990) 2022	r ugo
Name of the organization	Employer identification number
BLUE RIDGE CONSERVANCY	58-2502695
Program services: \$10,165	
Management and general: \$18,600	
Fundraising: \$0	
	***************************************
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Name BLUE RIDGE CONSERVANCY Employer Identification No. 58-2502695

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
REPAIRS & MAINTENANCE	6,594.	4,396.	1,099.	1,099.
OTHER PROGRAM EXPENSES	1,309,466.	1,308,602.	0.	864.
PRINTING & POSTAGE	17,725.	6,603.	1,267.	9,855.
GIFTS IN KIND EXPENSE	1,962,006.	1,923,894.	31,862.	6,250.
SPECIAL EVENTS EXPENSE	0.	0.	0.	0.
OTHER TAXES	0.	0.	0.	0.
BANK CHARGES	445.	0.	445.	0.
SUPPLIES	5,772.	3,848.	962.	962.
TRAINING AND EDUCATION	2,689.	2,289.	400.	0.
DUES AND SUBSCRIPTIONS	11,625.	8,520.	0.	3,105.
EASEMENT EXPENSES	0.	0.	0.	0.
LICENSE & FEES	0.	0.	0.	0.
PROCESSING FEES	6,974.	0.	10.	6,964.
RENTS	28,765.	10,165.	18,600.	0.
Total to Form 990, Part IX,	3,352,061.	3,268,317.	54,645.	29,099