# **American Friends of Canadian Conservation**

2021 Form 990 Public Disclosure Copy

Larson Gross

#### \*\* PUBLIC DISCLOSURE COPY \*\*

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A</u>	For the	$\pm$ 2021 calendar year, or tax year beginning $APR$ $\pm$ , $202\pm$ and $\pm$	naing M	AR 31, 2022			
В	Check if applicable	AMERICAN FRIENDS OF CANADIAN		D Employer identific	cation number		
	Addres			]			
	Name change			20-48170	49		
	Initial return Final return/		Room/suite 17	E Telephone number 360-515-			
	termin- ated			G Gross receipts \$	2,721,306.		
	Amend return			H(a) Is this a group re			
	Application	F Name and address of principal officer: JOHN PEIRCE		for subordinates			
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in			
Τ.	Tax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions		
J	Websit	e: ► CONSERVECANADA.ORG		H(c) Group exemptio	n number 🕨		
K	Form of	organization: X Corporation Trust Association Other	L Year	of formation: 2006	1 State of legal domicile: WA		
		Summary					
	1	Briefly describe the organization's mission or most significant activities: PROTE	CT CA	NADA'S ECOLO	OGICALLY		
Activities & Governance		SIGNIFICANT LANDS THROUGH THE PERMANENT CO	NSERV	ATION OF PR	OPERTIES.		
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	sets.		
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	7		
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	7		
S S	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			0		
ΖĘ	6	Total number of volunteers (estimate if necessary)			8		
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.		
Revenue				Prior Year	Current Year		
	8	Contributions and grants (Part VIII, line 1h)		4,457,707.	2,675,057.		
	9	Program service revenue (Part VIII, line 2g)		61,579.	46,091.		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6.	158.		
ш	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,519,292.	2,721,306.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,788,158.	2,354,463.		
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	· <u>·</u> ····	0.	0.		
ğ	. b	Total fundraising expenses (Part IX, column (D), line 25)  5,52		156 166	122 241		
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		156,166.	138,041.		
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,944,324.	2,492,504.		
		Revenue less expenses. Subtract line 18 from line 12		1,574,968.	228,802.		
Net Assets or			Be	ginning of Current Year	End of Year		
Sset	20	Total assets (Part X, line 16)		3,138,796.	3,170,106.		
etA	21	Total liabilities (Part X, line 26)		247,388.	49,896.		
	22 art II	Net assets or fund balances. Subtract line 21 from line 20		2,891,408.	3,120,210.		
		ties of perjury, I declare that I have examined this return, including accompanying schedules a	and atatama	unto, and to the heat of my	knowledge and helief it is		
	•	t, and complete. Declaration of preparer (other than officer) is based on all information of whic		•	Kilowieuge aliu bellei, it is		
tiuc	, сопес	t, and complete. Declaration of preparer (other than officer) is based on an information of which	on preparer	lias any knowledge.			
Sig	,	Signature of officer		Date			
Hei		JOHN PEIRCE, PRESIDENT					
Hei		Type or print name and title					
		Drint/Tuna propagata nama		Date Check	PTIN		
Pai	d	JENNIFER KIRK - CPA	L	08/31/2022 if self-employ	000160407		
	parer	Firm's name LARSON GROSS PLLC			91-1663574		
Use Only Firm's address 2211 RIMLAND DR., STE. 422							
		BELLINGHAM, WA 98226		Phone no. (3	60) 734-4280		
Ma	v the IF	S discuss this return with the preparer shown above? See instructions		1	X Yes No		

Form	990 (2021) CONSERVATION 20-4817049 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROTECT AND TO PROMOTE THE PROTECTION OF THE ECOLOGICAL INTEGRITY
	AND OTHER CONSERVATION VALUES OF THE NATURAL AREAS OF CANADA THROUGH
	SECUREMENT OF FEE TITLE AND LESS THAN FEE INTERESTS IN LAND AND
	SUPPORT OF CANADIAN CONSERVATION NONPROFITS AND AGENCIES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	04 227
	GENERAL SUPPORT PROGRAM: THE ORGANIZATION PROVIDES FUNDING FOR THE
	CONSERVATION AND STEWARDSHIP ACTIVITIES OF APPROVED CANADIAN CHARITIES
	THAT HAVE BEEN PRE-QUALIFIED AS GRANTEES. THE REVENUES USED BY THE
	ORGANIZATION TO MAKE GRANTS COME FROM INDIVIDUALS, BUSINESSES, AND
	PHILANTHROPIES THAT WISH TO UNDERWRITE THE PRESERVATION OF CANADA'S
	NATURAL HERITAGE AND BUILD THE CAPACITY OF CANADIAN ENTITIES ENGAGED IN
	NATURAL RESOURCE PRESERVATION. DONORS TO AMERICAN FRIENDS MAY RECOMMEND
	THAT ITS BOARD OF DIRECTORS CONSIDER MAKING A GRANT TO A SPECIFIC
	GRANTEE OR REQUEST THAT THEIR FUNDS BENEFIT A SPECIFIC PART OF CANADA.
4b	(Code: ) (Expenses \$ 2,325,301. including grants of \$ 2,354,463.) (Revenue \$ 46,091.
	CROSS BORDER CONSERVATION LANDS PROGRAM: THE ORGANIZATION ACCEPTS GIFTS
	OF ECOLOGICALLY SIGNIFICANT LAND (OR PARTIAL INTEREST IN SUCH LAND) IN
	CANADA'S MOST ENVIRONMENTALLY SENSITIVE, SCENIC AND UNIQUE LANDSCAPES.
	CANADIAN NONPROFITS THAT MEET AMERICAN FRIENDS' STRICT CRITERIA, WHICH
	ARE BASED ON IRS DEFINITIONS OF QUALIFIED ORGANIZATIONS, PARTNER WITH
	THE ORGANIZATION ON ALL GIFT TRANSACTIONS. THESE PARTNER ORGANIZATIONS
	ARE CAREFULLY SCREENED THROUGH A RIGOROUS APPLICATION PROCESS TO ENSURE
	THAT THEY ARE CAPABLE OF BEING PERMANENT STEWARDS OF THE DONATED LANDS.
	IF APPROVED, THESE ENTITIES BECOME GRANTEES OF AMERICAN FRIENDS.
	WRITTEN CONTRACTS BETWEEN AMERICAN FRIENDS AND ITS GRANTEE
	ORGANIZATIONS - WITH ANNUAL REPORTING REQUIREMENTS - ENSURE THAT
	DONATED LAND AND EASEMENTS WILL BE PROPERLY MONITORED AND MANAGED. THE
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 2,409,638.

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# AMERICAN FRIENDS OF CANADIAN

Form 990 (2021)

CONSERVATION

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		7.7	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> X</u>	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			٦,
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		37	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	37
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	· · · · · · · · · · · · · · · · · · ·			\ <b>.</b> ,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			, .
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		<del>.</del>
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
а	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1/4	Х	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	- 22	_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	15	Х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	21	
10		16		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		<del>  *</del>
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- <i>''</i>		<del></del>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	"		<del></del>
	,	19		x
202	complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<del></del>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

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### AMERICAN FRIENDS OF CANADIAN CONSERVATION

Form 990 (2021) CONSERVATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			,,,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			\ <sub>3,7</sub>
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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	00-		x
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		x
20	"Yes," complete Schedule L, Part IV	29	Х	125
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	- 21	
30		30		x
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	<u> </u>		
<b>52</b>	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- OZ		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai		· <u> </u>		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

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

			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			.,,					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u> 5b		X					
b	, , , , , , , , , , , , , , , , , , , ,								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			,					
_	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
_	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	_		v					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		, .					
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7e		х					
e	3 7 7 7 7 1 71								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711							
Ü		8							
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
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?	12a							
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.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		X					
4.0	If "Yes," see the instructions and file Form 4720, Schedule N.			v					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
<b>_</b> -	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	در							
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes." complete Form 6069.								

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

	Check if Schoolule O contains a response or note to any line in this Part VI			X
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			21
000	tion A. Governing Body and Management		V	NI-
4.	Catan the growth of cating meaning of the accounting heat, at the and of the towns.		Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body or if the governing	-		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This Section B requests information about policies not required by the internal nevertue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and have the description of the second secon	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	IIa		
		100	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶WA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 360-515-7171			
	336 36TH ST, 717, BELLINGHAM, WA 98225			
	, , ,			

#### <u> Page</u> **7**

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

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

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

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

X Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.			
(A)	(B)			_ (0	C)			(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated					
	hours per	box, unless pe		ox, unless person is both an officer and a director/trustee)			n an	compensation	compensation	amount of		
	week						an octor/it usiee)			from	from related	other
	(list any hours for	Individual trustee or director	3			_		the organization	organizations (W-2/1099-MISC/	compensation from the		
	related	96 Or (	stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization		
	organizations	truste	Institutional trustee		yee	n be		1099-NEC)	,	and related		
	below	idual	tution	la la	Key employee	est co	Je.	· ·		organizations		
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former					
(1) JOHN PEIRCE	6.00											
PRESIDENT		Х		Х				0.	0.	0.		
(2) WILLIAM MCCOY	1.00											
VICE PRESIDENT		Х		Х				0.	0.	0.		
(3) ROBERT ORLAND	1.00											
SECRETARY		Х		Х				0.	0.	0.		
(4) GAIL KRUK	4.00											
TREASURER		Х		Х		<u> </u>		0.	0.	0.		
(5) DAVID GENTER	4.00											
DIRECTOR		Х						0.	0.	0.		
(6) CAROL HORNE	3.00											
DIRECTOR		Х						0.	0.	0.		
(7) ALLISON RIESE	1.00											
DIRECTOR		Х				<u> </u>		0.	0.	0.		
(8) MIKE HART	1.00								_	_		
LAND COMMITTEE CHAIR		Х		Х		_		0.	0.	0.		
		1										
		1										
		1										
		1										
		-										
		ļ	_	_	_	┞						
		-										
			_			_						
		-										
		-	_	-	<u> </u>	₩						
		-										
								]				

Part VII   Section A. Officers, Directors, Trust		oloy	ees,			ghes	t C			- 1			
(A)	(B)			((	•			(D)	(E)			(F)	
Name and title	Average	(do		Posi heck i		<b>ì</b> than d	one	Reportable	Reportable			timate	
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	ו ו		ount c	of
	week		Cei aii		liecto	T	(66)	from	from related			other	
	(list any hours for	recto						the	organizations			oensat	
	related	ord	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)	<sup>U</sup> /		om the anizatio	
	organizations	ruste	l trus		99	npen		1099-NEC)	1099-1120)		_	i relate	
	below	dual t	riona	_	nploy	st co	-	10001120)				nizatio	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Form				5		
										-+			
										-			
										$\overline{}$			_
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Part VII								0.		0.			0.
d Total (add lines 1b and 1c)							0 ro	-	000 of roportable	0.1			<u> </u>
compensation from the organization	or minited to the	USE	IISLE	u au	ove	;) vvii	016	eceived more man proo,	ooo or reportable				0
												Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	кеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for si	uch individual								-		3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150										[	4		Х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	ıch r	oers	on .					5		X
Section B. Independent Contractors													
Complete this table for your five highest con	-	-								ensati	on fro	m	
the organization. Report compensation for t	ne calendar ye	ear e	enair	ig w	itn c	or wi	tnin	tne organization's tax y (B)	ear.		(C	١	
Name and business	address	NO	ONE	C				Description of s	ervices	Co		<i>)</i> Isation	1
							$\dashv$						
2 Total number of independent contractors (in	ncluding but no	ot lir	nited	to t	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz					C								
										F	orm	<b>990</b> (2	021)

Part VIII Statement of Revenue

			Check if Schedule O contains a response	or note to any lir	ne in this Part \/III			
			Check if Schedule O contains a response	or note to any in	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenue excluded
					Total Tovolido	function revenue	business revenue	from tax under
								sections 512 - 514
ठ घ	1 :	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
ල් සි			Fundraising events 1c		-			
Fts,	ľ				-			
ig ig	'				-			
ns,	(		Government grants (contributions) 1e		4			
ž į	1	f	All other contributions, gifts, grants, and					
ള				<u>,675,057.</u>				
함	9	g	Noncash contributions included in lines 1a-1f 1g \$	315,170.				
Son		h	Total. Add lines 1a-1f	<b>&gt;</b>	2,675,057.			
				Business Code				
ø.	2 :	а	GRANTEE FEES	900099	46,091.	46,091.		
Š	_ `	b						
er ue								
n S	'	С						
Jrai Se	'	d						
Program Service Revenue	•	е						
₫	1	f	All other program service revenue					
		g	Total. Add lines 2a-2f	<b>)</b>	46,091.			
	3		Investment income (including dividends, inter	est, and				
			other similar amounts)	•	158.			158.
	4		Income from investment of tax-exempt bond					
	5		Royalties					
	Ŭ		(i) Real	(ii) Personal				
	_	_		(ii) i crooriai	-			
	6		Gross rents 6a		-			
			Less: rental expenses 6b		_			
	•	С	Rental income or (loss) 6c					
		d	Net rental income or (loss)	<u></u>				
	7 :	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
		b	Less: cost or other basis					
ø		_	and sales expenses					
ž		_	Gain or (loss) 7c		-			
Revenue			. ,					
Æ			Net gain or (loss)	<u> </u>				
ther	8 :	а	Gross income from fundraising events (not					
ð			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	а				
	ı	b	Less: direct expenses 8					
		С	Net income or (loss) from fundraising events	<b>•</b>				
			Gross income from gaming activities. See					
		_	Part IV, line 19					
					-			
				<u> </u>				
			Net income or (loss) from gaming activities	·····				
	10	а	Gross sales of inventory, less returns					
			and allowances <u>10</u>	а				
	I	b	Less: cost of goods sold10	b				
	•	С	Net income or (loss) from sales of inventory	<b>&gt;</b>				
				Business Code				
Sno	11 :	а						
nec The		b						
Miscellaneous Revenue							1	
Sce	· '	C	All other revenue		+		<del>                                     </del>	
Ξ̈́	(		All other revenue		+			
		e	Total. Add lines 11a-11d		0 701 306	46 001		150
	12		Total revenue. See instructions	<u></u>	2,721,306.	46,091.	0.	158.

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 2,354,463. individuals. See Part IV, lines 15 and 16 ...... 2,354,463. Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits ..... 9 10 Payroll taxes Fees for services (nonemployees): 5,000. 75,000. 44,430. 25,570. Management 2,275. 13,020. 10,745. Legal 8.150. 8.150. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 6,941. 7,466. 525. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 13,500. 13,500. Office expenses 13 5,848. 5,848. Information technology 14 15 Royalties 16 Occupancy 17 18 Payments of travel or entertainment expenses 882. 882. for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates \_\_\_\_\_ 21 Depreciation, depletion, and amortization ..... 22 6,158. 6,158. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 8,017. 8,017. REAL ESTATE TAXES All other expenses 2,492,504. 2,409,638. 77,341. 5,525. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2021)
Part X Balance Sheet

Part	ξX	Balance Sneet				
		Check if Schedule O contains a response or r	ote to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		426,675.		282,506
	2	Savings and temporary cash investments		85,550.	2	85,559
	3	Pledges and grants receivable, net		9,193.	3	6,750
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub	ostantial contributor, or 35%			
		controlled entity or family member of any of the	ese persons		5	
	6	Loans and other receivables from other disqu	alified persons (as defined			
		under section 4958(f)(1)), and persons describ		6		
ည	7	Notes and loans receivable, net		7		
Assets	8	Inventories for sale or use			8	
<b>ĕ</b>	9	Prepaid expenses and deferred charges	1,427.	9	3,245	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	. 10a			
	b	Less: accumulated depreciation	. 10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line	e 11		12	
	13	Investments - program-related. See Part IV, lin		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	2,615,951.	15	2,792,046 3,170,106	
	16	Total assets. Add lines 1 through 15 (must ed		3,138,796.		3,170,106
	17	Accounts payable and accrued expenses		6,703.		10.00
	18	Grants payable	240,685.	18	49,896	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complet			21	
es	22	Loans and other payables to any current or fo				
Liabilities		trustee, key employee, creator or founder, sub				
ia B		controlled entity or family member of any of the	***************************************		22	
- │	23	Secured mortgages and notes payable to unr			23	
	24	Unsecured notes and loans payable to unrela			24	
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on lin	es 17-24). Complete Part X			
		of Schedule D		247,388.	25	40.006
-	26	Total liabilities. Add lines 17 through 25	<b>.</b> . <b>.</b>	247,300.	26	49,896
ဖွ		Organizations that follow FASB ASC 958, c	heck here 🕨 🔼			
) S		and complete lines 27, 28, 32, and 33.		2 725 000		2 022 620
<u>a</u>	27			2,725,808. 165,600.		2,922,628 197,582
Ö	28	Net assets with donor restrictions		105,000.	28	191,304
<u>.</u>		Organizations that do not follow FASB ASC	958, check here			
ᇹ	00	and complete lines 29 through 33.	1-		00	
į į	29	Capital stock or trust principal, or current fund		29		
SSE	30	Paid-in or capital surplus, or land, building, or			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		2,891,408.	31	3,120,210
ž	32	Total lightilities and not assets (fund balances		3,138,796.	32	3,170,106
	33	Total liabilities and net assets/fund balances		3,130,130.	33	5,170,100 Form <b>990</b> (202

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,72		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,492		
3	Revenue less expenses. Subtract line 2 from line 1	3			02.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,893	1,4	08.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,120	0,2	10.
Pa	rt 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 X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			Form	990	(2021)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021
Open to Public

Inspection

AMERICAN FRIENDS OF CANADIAN

CONSERVATION

Employer identification number
20-4817049

Pa	ırt ı	Reason for Public C	narity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.			
The	orgar	nization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)				
1		A church, convention of chi	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	I)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).			
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,		
		city, and state:								
5		An organization operated for		llege or university owned	l or operat	ed by a go	overnmental unit describe	ed in		
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local government	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organization that norma	lly receives a substa	ntial part of its support fr	rom a gove	ernmental	unit or from the general p	oublic described in		
		section 170(b)(1)(A)(vi). (Complete Part II.)								
8	Ш	A community trust describe	ed in <b>section 170(b)(</b>	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	ınction with a land-grant	college		
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the r	name, city	, and state of the college	or		
		university:								
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, and	d gross receipts from		
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support f	rom gross investment		
		income and unrelated busing	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.		
		See section 509(a)(2). (Cor	mplete Part III.)							
11	Щ	An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).			
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform tl	he functio	ns of, or to carry out the	purposes of one or		
		more publicly supported or	ganizations describe	d in <b>section 509(a)(1)</b> d	r section :	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box on		
	_	lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and 12g.			
а			anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), typically by	giving		
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustees of the su	upporting		
	_	organization. You must o	complete Part IV, Se	ections A and B.						
b	· L		anization supervised	or controlled in connect	tion with its	s supporte	ed organization(s), by have	ving		
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	oorted		
	_	organization(s). You mus	t complete Part IV,	Sections A and C.						
C	:	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,		
		its supported organization		-						
C	L		rintegrated. A supp	oorting organization oper	ated in cor	nnection v	vith its supported organiz	zation(s)		
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and an attentiv	/eness		
	_	requirement (see instructi	•							
e		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III			
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.				
f		er the number of supported o	-							
		vide the following informatior (i) Name of supported	n about the supporte	d organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other		
		organization	(II) EIIV	(described on lines 1-10	in your governi	ng document?	support (see instructions)	support (see instructions)		
				above (see instructions))	Yes	No	I	Tapper (cos menessors)		
_										
Tota	al									

#### CONSERVATION Schedule A (Form 990) 2021

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

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

Sed	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1000549.	533,919.	1215469.	4457707.	2675057.	9882701.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1000549.	533,919.	1215469.	4457707.	2675057.	9882701.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						5194510.
	Public support. Subtract line 5 from line 4.						4688191.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	1000549.	533,919.	1215469.	4457707.	2675057.	9882701.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	4.0	1.0		ر ا	1 - 0	211
	and income from similar sources	46.	46.	55.	6.	158.	311.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						9883012.
	Total support. Add lines 7 through 10					12	367,996.
	Gross receipts from related activities, First 5 years. If the Form 990 is for th	•	,				301,330.
13	organization, check this box and <b>stop</b>	-					▶□
Sec	ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •			
	Public support percentage for 2021 (li			volumn (f))		14	47.44 %
	Public support percentage from 2020					15	48.81 %
	33 1/3% support test - 2021. If the co					<u> </u>	
	stop here. The organization qualifies						
h	33 1/3% support test - 2020. If the o						
~	and <b>stop here.</b> The organization quali	•		•		•	
17a	10% -facts-and-circumstances test						
u	and if the organization meets the facts	_					
	meets the facts-and-circumstances te					viriow the organiz	▶ □
h	10% -facts-and-circumstances test	· ·	•	,			
	more, and if the organization meets th	_					. = , • •.
	organization meets the facts-and-circu		•				ightharpoonup
18	Private foundation. If the organization			. ,	•		• • • • • • • • • • • • • • • • • • •

Schedule A (Form 990) 2021

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
<b>5</b> T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
<b>b</b> U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
<b>11</b> N a	dd lines 10a and 10b						
<b>12</b> C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						<b>&gt;</b>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

132023 01-04-22 Schedule A (Form 990) 2021

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
3b		
3c		
00		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
3		
9a		
9b		
9c		
10a		
461		
10b ule A (Forn	n 990)	2021

132024 01-04-21

Par	T IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		i
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
_	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	140
•	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 Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instance)	struction	(s)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined			1
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
-	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			1
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	2.7		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
	1 5 II 165. Geodine III The fole played by the organization in this regard.			

	dule A (Form 990) 2021 CONSERVA'I'ION			20-4817049 Page <b>6</b>
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	Nov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

Schedule A (Form 990) 2021

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

emergency temporary reduction (see instructions).

instructions).

Dai	t V Type III Non-Eunctionally Integrated 500/	a)(3) Supporting Orga	nizatione / /	^	g				
	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
	ion D - Distributions			Current Year					
1_	Amounts paid to supported organizations to accomplish exer		1						
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported							
	organizations, in excess of income from activity		_	2					
_3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	<u>3</u> 4					
_ <u>4</u>	Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required - pro			5					
6	Other distributions (describe in <b>Part VI</b> ). See instructions.	ovide details in Part VI)		6					
7	Total annual distributions. Add lines 1 through 6.			7					
<del>-</del> /-8	Distributions to attentive supported organizations to which the	ne organization is responsive							
Ü	(provide details in <b>Part VI</b> ). See instructions.	ie organization is responsive		8					
9	Distributable amount for 2021 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount			10					
	Elife o amount arriada by line o amount	(i)	(ii)		(iii)				
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	s	Distributable Amount for 2021				
_1_	Distributable amount for 2021 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2021 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2021								
<u>a</u>	From 2016								
b	From 2017								
<u> </u>	From 2018								
d	From 2019								
<u>e</u>	From 2020								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
<u>h</u>	Applied to 2021 distributable amount								
i_	Carryover from 2016 not applied (see instructions)								
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2021 from Section D,								
	line 7: \$								
<u>a</u>	Applied to underdistributions of prior years								
	Applied to 2021 distributable amount								
<u>C</u>	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2021, if								
	any. Subtract lines 3g and 4a from line 2. For result greater								
	than zero, explain in Part VI. See instructions.								
6	Remaining underdistributions for 2021. Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
	Part VI. See instructions.								
7	Excess distributions carryover to 2022. Add lines 3j								
	and 4c.								
8_	Breakdown of line 7:								
	Excess from 2017								
	Excess from 2018								
	Excess from 2019								
<u>d</u>	Excess from 2020								

Schedule A (Form 990) 2021

e Excess from 2021

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10: Part II, line 17a or 17b: Part III, line 12:
	Part IV. Section A. lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV. Section B. lines 1 and 2; Part IV. Section C.
	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
-	
-	

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

# **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

AMERICAN FRIENDS OF CANADIAN

CONSERVATION

Employer identification number

20-4817049

Filers of:	Section:								
Form 990 or 990-EZ	$\overline{X}$ 501(c)( $\overline{3}$ ) (enter number) organization								
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation								
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
, ,	tion is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 601(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.								
General Rule									
_	zation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or nany one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.								
Special Rules									
sections 509( contributor, c	zation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 90-EZ, line 1. Complete Parts I and II.								
contributor, c literary, or ed	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.								
year, contribu is checked, e purpose. Dor	zation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the utions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., or to complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively entriable, etc., contributions totaling \$5,000 or more during the year	_							
answer "No" on Part I\	· · · · · · · · · · · · · · · · · · ·								

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2021)

Name of organization

AMERICAN FRIENDS OF CANADIAN

CONSERVATION

Employer identification number

20-4817049

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$650,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 95,322.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 176,095.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 78,125.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 1,250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Omnicash (Complete Part II for noncash contributions.)

Name of organization

AMERICAN FRIENDS OF CANADIAN

CONSERVATION

Employer identification number

20-4817049

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
2	STOCK						
		\$\$	03/31/22				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
3	WHITE ISLAND, LOCATED IN CHARLOTTE COUNTY, NEW BRUNSWICK						
		\$176,095.	03/31/22				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$	School and B. (Farray 2001) (2004)				

Name of organization **Employer identification number** AMERICAN FRIENDS OF CANADIAN CONSERVATION 20-4817049 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

123454 11-11-21

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

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

Inspection

AMERICAN FRIENDS OF CANADIAN Name of the organization CONSERVATION

**Employer identification number** 20-4817049

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accou	INTS. Complete if the
		(a) Donor advised funds	<b>(b)</b> Fu	inds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advis	sed funds	
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·		Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line	7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education) Preservation of	of a historicall	y important land area
	X Protection of natural habitat	Preservation o	of a certified h	nistoric structure
	X Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution in the form	of a conserv	ration easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	12
b	Total acreage restricted by conservation easements			887.10
С	Number of conservation easements on a certified historic stru			
d	Number of conservation easements included in (c) acquired at			
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele			n during the tax
	year ▶0_			
4	Number of states where property subject to conservation ease	ement is located ▶0	_	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it			X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
	<b>▶</b> 60			
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserva	ation easeme	nts during the year
	<b>▶</b> \$0.			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense	e statement a	ind
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financial statem	nents that des	scribes the
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of		ther Simil	ar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	and balance	sheet works
	of art, historical treasures, or other similar assets held for public	lic exhibition, education, or research in f	urtherance o	f public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these iten	ns.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and	balance shee	et works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of p	ublic service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				\$
2	If the organization received or held works of art, historical trea			
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b>	\$
b	Assets included in Form 990, Part X			\$
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2021

132051 10-28-21

	t III   Organizations Maintaining Constant		t Hiet	orical Tra	acurac a	r Other		10-40			age <b>∠</b>
	•								• (contir	iued)	
3											
	collection items (check all that apply):										
а	Public exhibition	c			change progr						
b	Scholarly research	e	• 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	n how th	ey further th	ne organizatio	on's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit or	receive donations	of art, his	storical trea	sures, or oth	er similar a	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered	"Yes" on F	orm 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for o	contribution	s or other as	sets not in	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amoun	t	
С	Beginning balance						1c				
d	Additions during the year										
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.										1
Par											
	острых п	(a) Current year		rior year	(c) Two year		<b>d)</b> Three y	ears back	(e) Four	vears	hack
10	Reginning of year balance	(4) 545 ) 54	(~):	,	(0)		<b>,</b>	ouro puore	(5) . 5	y ou. o	
1a	Beginning of year balance										
D	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	•	e (line 1g	ı, column (a	)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organiza	ation that	t are held a	nd administe	red for the	organiza	tion			
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on So	chedule R?					3b		
4	Describe in Part XIII the intended uses of the									•	
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	), Part IV	, line 11a. S	See Form 990	), Part X, li	ine 10.				
	Description of property	(a) Cost or o		` '	t or other		cumulate	d	(d) Boo	k value	<del></del>
		basis (investr	nent)	pasis	(other)	аер	reciation				
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment										
	Other							_			
Total	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X. colum	n (B), line 1	0c.)						0.

Schedule D (Form 990) 2021  AMERICAN FRI CONSERVATION	ENDS OF CANA		-4817049 <sub>Page</sub> 3
Part VII Investments - Other Securities.	•	20	TOTTOTO Fage
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.			
Complete if the organization answered "Yes" of		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) LAND HELD FOR CONSERVATION	EASEMENT		2,792,046.
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.			2,792,046.
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)	_		
(4)			
(5)			
(6)			
(7)			

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

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

Schedule D (Form 990) 2021

(8) (9)

		AMERICAN FRIENDS OF CA	ANADIAN		
Sche	edule D (l	Form 990) 2021 CONSERVATION		20-4817049	Page 4
Pa	rt XI	Reconciliation of Revenue per Audited Financial S	Statements With Revenu	e per Return.	
		Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1	Total re	evenue, gains, and other support per audited financial statements		1	
2	Amoun	ts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net uni	realized gains (losses) on investments	2a		
b	Donate	d services and use of facilities	2b		
С		eries of prior year grants			
d		Describe in Part XIII.)			
е	Add lin	es <b>2a</b> through <b>2d</b>		2e	
3	Subtra	ct line <b>2e</b> from line <b>1</b>		3	
4		ts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investn	nent expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (	Describe in Part XIII.)	4b		
С	Add lin	es <b>4a</b> and <b>4b</b>		4c	
5	Total re	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	
Pa		Reconciliation of Expenses per Audited Financial	•	ses per Return.	
		Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1	Total e	xpenses and losses per audited financial statements		1	
2	Amoun	ts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donate	d services and use of facilities	2a		
b	Prior ye	ear adjustments	2b		
С	Other l	osses	2c		
d	Other (	Describe in Part XIII.)	2d		
е	Add lin	es <b>2a</b> through <b>2d</b>		2e	
3	Subtra	ct line <b>2e</b> from line <b>1</b>		3	
4		ts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а		nent expenses not included on Form 990, Part VIII, line 7b			
b	Other (	Describe in Part XIII.)	4b		
С		es <b>4a</b> and <b>4b</b>			
5	Total e	xpenses. Add lines <b>3</b> and <b>4c. (This must equal Form 990, Part I, lin</b>	ne 18.)	5	

Part XIII Supplemental Information.

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

#### PART II, LINE 5

SUMMARIZED POLICY: AMERICAN FRIENDS ACCEPTS GIFTS OF EASEMENTS ONLY WHEN A CAPABLE CANADIAN CONSERVATION ENTITY (CANADIAN PARTNER) IS WILLING TO ENTER INTO A BINDING CONTRACT TO SERVE AS THE LAND STEWARD. THE PROPERTY PROPOSED FOR PROTECTION MUST BE A CONSERVATION TARGET FOR THE CANADIAN PARTNER ENTITY AND BE FREE OF PROBLEMS THAT WOULD COMPLICATE FUTURE EASEMENT MONITORING AND ENFORCEMENT. A BASELINE DOCUMENTATION REPORT AND A STEWARDSHIP PLAN ARE COMPLETED BY THE CANADIAN PARTNER IN ADVANCE OF THE EASEMENT DONATION AND REVIEWED AND APPROVED BY THE BOARD OF AMERICAN FRIENDS.

EASEMENT DONATIONS MUST BE ACCOMPANIED BY STEWARDSHIP FUNDS, PROVIDED BY

20-4817049 Page 5 CONSERVATION Schedule D (Form 990) 2021 Part XIII Supplemental Information (continued) THE EASEMENT DONOR, THE CANADIAN PARTNER OR ANOTHER SOURCE. THE AMOUNT OF STEWARDSHIP FUNDING REQUIRED IS DETERMINED ON A CASE-BY-CASE BASIS, REFLECTING THE UNIQUE CHARACTERISTICS OF EACH PROPERTY AND THE CAPACITY OF THE SPECIFIC CANADIAN PARTNER ENTITY. AMERICAN FRIENDS HOLDS THE STEWARDSHIP FUNDS IN A BOARD-RESTRICTED ACCOUNT THAT CAN BE TAPPED ONLY FOR EXPENSES DIRECTLY RELATED TO MONITORING AND ENFORCING THE EASEMENTS' TERMS. THE CANADIAN PARTNER ENTITY IS RESPONSIBLE FOR PROVIDING AMERICAN FRIENDS WITH COPIES OF ANNUAL MONITORING REPORTS. IN THE UNLIKELY EVENT THAT THE CANADIAN PARTNER DOES NOT DO THE MONITORING, OR AMERICAN FRIENDS DEEMS THAT THE MONITORING (OR ENFORCEMENT) IS INSUFFICIENT, THE STEWARDSHIP FUNDS WOULD BE USED TO HIRE EXPERTS TO DO ANY NECESSARY WORK. PART II, LINE 9 THE EASEMENTS ARE PRESENTED ON THE TAX RETURN CONSISTENT WITH THE METHOD AMERICAN FRIENDS OF CANADIAN CONSERVATION USES FOR FINANCIAL STATEMENTS, WHICH IS IN COMPLIANCE WITH UNITED STATES GENERALLY ACCEPTED ACCOUNTING PRINCIPLES REPORTING OF EASEMENTS.

Schedule D (Form 990) 2021

# SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

#### Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN FRIENDS OF CANADIAN

CONSERVATION

**Employer identification number** 

20-4817049 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

	Form 990, Part IV, line 14b.						
1	<b>5</b>						
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No						
2	For grantmakers. Desc	ribe in Part V the	organization's i	procedures for monitoring the use of its	arants and other assistance out	side the	
	United States.			3	3		
3		ne following Part	Lline 3 table ca	an be duplicated if additional space is n	eeded )		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total	
	(a) Hogien	offices	employees,	(by type) (such as, fundraising, pro-	is a program service,	expenditures	
		in the region	agents, and independent	gram services, investments, grants to	describe specific type	for and	
			contractors	recipients located in the region)	of service(s) in the region	investments in the region	
TODE	W. AMERICA		in the region			- III tillo rogioni	
	'H AMERICA -						
	ADA AND MEXICO,						
	NOT THE UNITED						
STAT	ES	0	1	SEE SCHEDULE O	LAND CONSERVATION	2,354,463.	
						1	
						+	
3 a	Subtotal	0	1			2,354,463.	
b	Total from continuation						
	sheets to Part I	0	0			0.	
С	Totals (add lines 3a						
J	and 3b)	0	1			2,354,463.	
	and 00j	ı					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2021

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	291,800.	СНЕСК	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	53,652.	СНЕСК	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	281,823.	СНЕСК	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	12,244.	СНЕСК	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	21,146.	СНЕСК	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	25,940.	СНЕСК	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	150,435.	снеск	0.		
		NORTH AMERICA -						
		CANADA AND						
		MEXICO, BUT NOT						
		THE UNITED STATES	CONSERVATION	38,200.	снеск	0.		

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax	X
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

\_\_\_\_

Schedule F (Form 990) 2021

3 Enter total number of other organizations or entities .

Scriedule	e F (Form 990)	CONDE	VANITON			20 40	1/049		Page 2
Part II	Continuation o	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nan	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA -						
			CANADA AND						
			MEXICO, BUT NOT						
			THE UNITED STATES	CONSERVATION	7,220.	СНЕСК	0.		
			NORTH AMERICA -						
			CANADA AND						
			MEXICO, BUT NOT						
				CONSERVATION	5,170.	СНЕСК	0.		
			NORTH AMERICA -						
			CANADA AND						
			MEXICO, BUT NOT						
			THE UNITED STATES	CONSERVATION	1301752.	СНЕСК	0.		_
									-

20-4817049

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  Part III can be duplicated if additional space is needed.									
	of grant or assistance (b) Region		(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

	(Form 990) 2021
Part IV	Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

20-4817049

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:
BEFORE BECOMING ELIGIBLE TO RECEIVE GRANT FUNDING FROM AMERICAN FRIENDS,
CANADIAN NON-PROFITS ARE CAREFULLY SCREENED THROUGH A RIGOROUS
APPLICATION PROCESS AND APPROVED BY THE BOARD OF DIRECTORS OF AMERICAN
FRIENDS TO ENSURE THAT THEY ARE A REGISTERED CANADIAN CHARITY AND MEET
OTHER AMERICAN FRIEND REQUIREMENTS FOR ELIGIBLE LAND TRUST ORGANIZATIONS.
IF APPROVED FOR GRANT ELIGIBILITY, AND BEFORE RECEIVING ANY GRANT
FUNDING, THE CANADIAN LAND TRUST MUST SIGN A GRANT AGREEMENT REQUIRING,
AMONG OTHER PROVISIONS, THAT THE GRANTS BE USED EXCLUSIVELY FOR LAND
CONSERVATION ACTIVITIES, THAT THE RECIPIENT CANADIAN LAND TRUST AGREES TO
SUBMIT TO AMERICAN FRIENDS A REPORT DESCRIBING THE USE OF THE FUNDS AND
ACTIVITIES UNDERTAKEN AS A RESULT OF ANY GRANT, AND TO DO SO IN A TIMELY
MANNER, AND THAT ANY PORTION OF A GRANT NOT USED FOR THE STATED PURPOSES
MUST BE REPAID TO AMERICAN FRIENDS. ANNUALLY AMERICAN FRIENDS REVIEWS
REPORTS RECEIVED FOR COMPLIANCE WITH THIS REQUIREMENT. IF ANY CANADIAN
LAND TRUST RECIPIENT OF GRANT FUNDING HAS NOT YET PROVIDED A REPORT, OR
IF THE INFORMATION PROVIDED IS INCOMPLETE, AMERICAN FRIENDS FOLLOWS UP
WITH THE GRANT RECIPIENT AND OBTAINS THE REQUIRED INFORMATION TO ENSURE
THAT ALL GRANT FUNDING IS USED FOR ITS INTENDED CONSERVATION PURPOSE.
THERE HAS NOT BEEN A CASE OF NONCOMPLIANCE BY A GRANT RECIPIENT.

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990.

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

AMERICAN FRIENDS OF CANADIAN CONSERVATION

Employer identification number 20-4817049

Par	t I Types of Property				<b>,</b>			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			5
1	Art - Works of art			, , ,				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	4	139,075.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial		1	156 005	1000176176			
17	Real estate - Other	X	1	176,095.	APPRAISALS			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26 27	Other () Other ()							
28	Other () Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for o	ontributions				
23	for which the organization completed Form 826							
	To whom the organization completed from 62.	50, r art v, b	once / toll lowledg	omone			Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I. lines 1 throug	ıh 28. that it		100	110
	must hold for at least three years from the date			· · · · · · · · · · · · · · · · · · ·				
	exempt purposes for the entire holding period?		•			30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribu	tions?	31	х	
	Does the organization hire or use third parties	-	· · ·	•				
	contributions?		~			32a	х	ı
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is che	cked,			
	describe in Part II.			· ·				
	Fau Danamurada Dadustian Ast Nation and					. /C		

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

Schedule M (Form 990) 2021

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, PART I, COLUMN (B):
THE ORGANIZATION IS REPORTING NUMBER OF CONTRIBUTIONS.
SCHEDULE M, LINE 32B:
AMERICAN FRIENDS UTILIZES AN ATTORNEY TO ASSIST IN THE PROCESSING OF
DONATED LAND AND CONSERVATION EASEMENTS FOR CONSERVATION. THIS ATTORNEY
WORKS UNDER THE BOARD OF DIRECTOR'S OVERSIGHT TO ENSURE THAT THE
DONATED LAND AND CONSERVATION EASEMENT INTERESTS IN LAND MEETS THE
MISSION OF AMERICAN FRIENDS AND FOLLOWS THE ORGANIZATION'S POLICIES.

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. **2021**Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AMERICAN FRIENDS OF CANADIAN CONSERVATION

Employer identification number 20-4817049

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

ORGANIZATION AND ITS PARTNERS SECURE STEWARDSHIP FUNDS SUFFICIENT TO

COVER THE COSTS OF CARING FOR THE DONATED PROPERTIES. THE LEVEL OF

STEWARDSHIP FUNDING REQUIRED IS BASED ON A THOROUGH ASSESSMENT OF EACH

PROPERTY'S NATURAL, CULTURAL AND RECREATIONAL CHARACTERISTICS AND THE

POTENTIAL RISKS ASSOCIATED WITH ITS PERPETUAL CARE.

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

THE BOARD OF DIRECTORS RECEIVES AND APPROVES FORM 990 PRIOR TO FILING.

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

THE ORGANIZATION HAS IN PLACE A WRITTEN CONFLICT OF INTEREST POLICY THAT REQUIRES DISCLOSURE OF ACTUAL OR POSSIBLE CONFLICTS OF INTEREST. ORGANIZATION MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY ENSURING THAT ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES SIGN AN ANNUAL STATEMENT ACKNOWLEDGING HAVING RECEIVED A COPY OF THE POLICY, HAVING READ AND UNDERSTOOD THE POLICY AND HAVING AGREED TO COMPLY WITH THE POLICY. AS PROVIDED UNDER THE POLICY, IF THE BOARD HAS REASONABLE CAUSE TO BELIEVE THAT AN OFFICER, DIRECTOR, OR KEY EMPLOYEE HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE BOARD INFORMS THE INTERESTED PERSON SUCH BELIEF AND AFFORDS THE INTERESTED PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE RESPONSE OF THE INTERESTED PERSON AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD DETERMINES THAT THE INTERESTED PERSON HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, BOARD TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	Page 2
Name of the organization AMERICAN FRIENDS OF CANADIAN	Employer identification number
CONSERVATION	20-4817049
FORM 990, PART VI, SECTION C, LINE 19:	
COVERNITIO DOCUMENTO DOLLOTEO AND ELIANOTAL OTATEMENTO	WILL DE MADE
GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS	WILL BE MADE
AVAILABLE UPON REQUEST. FORM 990 IS ALSO POSTED ON AMERI	CAN FRIENDS'
WEBSITE.	