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 2024 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

| A | For the | e 2024 ¢ | alendar year, or tax year beginning | , and ending | | | | 1110000001 | | | | | | | | |
|--------------------------------|---------------|-----------------------|---|---------------------------------------|---|---|---------------|------------------------------------|--|--|--|--|--|--|--|--|
| В | | opplicable: | C Name of organization | | | ī | D Employer | identification number | | | | | | | | |
| | Address o | | UPPER PENI | NSULA LAND CONSERV | ANCY | - 1 | | | | | | | | | | |
| = | Name cha | | ge Doing business as 38-3467972 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number | | | | | | | | | | | | | |
| = | initiai retui | . | | d to street address) | | | | | | | | | | | | |
| | Final retur | | City or town, state or province, country, and ZIP or for | reign postal code | | | 300-2 | 223-8067 | | | | | | | | |
| | terminated | | | MI 49855 | | - 1. | | E07 270 | | | | | | | | |
| | Amended | return | F Name and address of principal officer: | MI 43633 | ····· | 1 | Gross rece | ipts\$ 587,378 | | | | | | | | |
| \Box | Applicatio | n pendina | ROBB FERGUSON | | | H(a) Is this a group | return for su | bordinates? Yes X No | | | | | | | | |
| _ | | | N9260 SHORE DR | | | H(b) Are all subor | dinates inclu | ded? Yes No | | | | | | | | |
| | | | AU TRAIN | MI 49806 | | 1 | | See instructions | | | | | | | | |
| _ | Tay-even | mpt status; | X 501(c)(3) 501(c) () (ins | | 527 | 1 ** | | | | | | | | | | |
| | Website: | | PLANDCONSERVANCY.ORG | 434/(a)(1) or | 921 | H(c) Group exemp | ntina aumbo | | | | | | | | | |
| | | organization: | X Corporation Trust Association | Other | | ear of formation: 19 | - A - T | M State of legal domicile: MI | | | | | | | | |
| | art I | | mmary | Other | | al of formation. | 7 7 1 | m State of legal doffliche: A-A-A- | | | | | | | | |
| _ | | | scribe the organization's mission or most s | ignificant activities | | | | · | | | | | | | | |
| Ф | Ι., | - | SCHEDULE O | gamount douvides, | | | | | | | | | | | | |
| č | , | | | | | | | | | | | | | | | |
| & Governance | ١. | | | | | | | | | | | | | | | |
| ove. | 2 6 | Check thi | s box if the organization discontinued | its operations or disposed of m | ore than 25% | of its net assets | | | | | | | | | | |
| Ö | | | of voting members of the governing body (| | 1010 111011 2070 | or its fiet assets | 3 | 15 | | | | | | | | |
| SS | | | of independent voting members of the gove | | | | 4 | 15 | | | | | | | | |
| Activities | | | nber of individuals employed in calendar ye | | | | 5 | 7 | | | | | | | | |
| Ė | | | nber of volunteers (estimate if necessary) | 2021 (* 21(* *), 1110 22) | | | 6 | 80 | | | | | | | | |
| • | | | elated business revenue from Part VIII, col | umn (C), line 12 | | | 7a | 0 | | | | | | | | |
| | | | ated business taxable income from Form 9 | | | 0-11-11-11-11-11-11-1 | 7b | 0 | | | | | | | | |
| | | | | | L | Prior Year | | Current Year | | | | | | | | |
| e | 8 (| Contribut | ions and grants (Part VIII, line 1h) | 355 | ,423 | 308,893 | | | | | | | | | | |
| Revenue | 9 F | Program | service revenue (Part VIII, line 2g) | | | 0 | | | | | | | | | | |
| ě | 10 | Investme | nt income (Part VIII, column (A), lines 3, 4. | and 7d) | 15 | ,185 | 29,033 | | | | | | | | | |
| œ | 11 (| Other rev | enue (Part VIII, column (A), lines 5, 6d, 8c | 9c, 10c, and 11e) | 5505.600.00 = E | 2,811 | | 6,102 | | | | | | | | |
| | 12 | Total reve | enue - add lines 8 through 11 (must equal | Part VIII, column (A), line 12) | | 373 | ,419 | 344,028 | | | | | | | | |
| | 13 (| Grants ar | nd similar amounts paid (Part IX, column (A | N), lines 1–3) | | | | 0 | | | | | | | | |
| | 14 E | Benefits _I | paid to or for members (Part IX, column (A |), line 4) | 200000000000000000000000000000000000000 | | | 0 | | | | | | | | |
| es | 15 \$ | Salaries, | other compensation, employee benefits (P | art IX, column (A), lines 5-10) | PROPERTY OF THE PARTY OF T | 127 | ,184 | 185,689 | | | | | | | | |
| Expenses | 16a F | Professio | nal fundraising fees (Part IX, column (A), I | | | | | 0 | | | | | | | | |
| × | b1 | Total fund | draising expenses (Part IX, column (D), line | 25) 14,2 | 77 | | | | | | | | | | | |
| ш | | | penses (Part IX, column (A), lines 11a-11d | | | | ,699 | 92,029 | | | | | | | | |
| | 1 | | enses. Add lines 13–17 (must equal Part I | | | | ,883 | 277,718 | | | | | | | | |
| | 19 F | Revenue | less expenses. Subtract line 18 from line | 2 | | | ,536 | 66,310 | | | | | | | | |
| ts o | 20. | Total and | ets (Part X, line 16) | | - | Beginning of Curre | | End of Year | | | | | | | | |
| Net Assets or Fund Balances | 20 21 | | ets (Part X, line 16) | *************** | | 3,049 | | 3,147,623 | | | | | | | | |
| Wet/ | 22 1 | | ts or fund balances. Subtract line 21 from I | 20 | | 2,904 | ,479 | 153,272 | | | | | | | | |
| | art II | | gnature Block | ille 20 | | 2,904 | , 100 | 2,994,351 | | | | | | | | |
| | | | perjury, I declare that I have examined this return | n including accompanies achadu | 100 0-4 -4-4 | -1 | | | | | | | | | | |
| tr | ue, corre | ect, and co | omplete. Declaration of preparer (other than office | cer) is based on all information of v | vhich preparer h | nts, and to the bes as anv knowledge | st of my kn | owledge and belief, it is | | | | | | | | |
| | | 1 | | • | | , | 1 | | | | | | | | | |
| Sig | nn | Signature | of officer | | | | Date | | | | | | | | | |
| He | - | MARI | K EHLERT | DDE | SIDENT | | 0010 | | | | | | | | | |
| | 10 | 1 | rint name and title | FRE | SIDENI | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| | | Preparer's | | Preparer's signature | | Date | Obsert | if PTIN | | | | | | | | |
| Pai | d | 1 | M C. SHELTROW, CPA | WILLIAM C. SHELTROW, C | DA | 08.0 | Check | □" | | | | | | | | |
| Pre | parer | Firm's na | | MAN & COMPANY, | | | 25 self-em | | | | | | | | | |
| | Only | T ann S mai | | ON ST SUITE 109 | | Fin | m's EIN | 38-1977929 | | | | | | | | |
| | - | Firm's ad | MADOTTEMEN MAT | 49855 | | | 2018 | 906-225-1166 | | | | | | | | |
| Mar | v the IR | | s this return with the preparer shown abov | | | Pho | one no. | | | | | | | | | |
| | | | action Act Notice, see the separate instruction | | | | | X Yes No Form 990 (2024) | | | | | | | | |
| DAA | | | | | | | | rorm 330 (2024) | | | | | | | | |

| Part III | | SULA LAND CONSERVANCY am Service Accomplishments | 38-3467972 | Page |
|--|---|--|--|---|
| | _ | contains a response or note to an | y line in this Part III | X |
| | describe the organization's m | | | |
| SEE | SCHEDULE O | | CHEROMERI ERRE ROCCERCIO E CE E FOR ENCOCUCACIO EN EXE | |
| Section | | | | |
| 50000 | | | | |
| 2 Did the | e organization undertake any s | significant program services during the year | ar which were not listed on the | V107 25-07 |
| prior F | form 990 or 990-EZ? | *************************************** | | Yes X No |
| | s," describe these new services | | | |
| | | ng, or make significant changes in how it o | conducts, any program | |
| service | es," describe these changes on | Schodulo O | | Yes X N |
| | • | service accomplishments for each of its to | hree largest program services, as mean | cured by |
| | _ | 1(c)(4) organizations are required to report | | - |
| | | ny, for each program service reported. | tine amount of grante and anounting t | |
| ACCRO ACTIV | TORING AND STEW PROTECTED THROU OSS 12 COUNTIES | 147,675 including grants of ARDSHIP OF CONSERVATION EASM VIA REMOTE AND IN-PIPE PROPERTIES INCLUDE TON WORK. | ION PROPERTIES, BOT ENTS. MONITORED 62 ERSON MEANS. PRIMAR | H OWNED IN FEE PROPERTIES Y STEWARDSHIP |
| 7 (1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - | | | | |
| 15.177 | | | | |
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| | | | | |
| WORKS THE 1 | ATION AND OUTRE SHOPS TO FOSTER NATURAL ENVIRON | 6,331 including grants of ACH. OFFERED EDUCATION AS GREATER UNDERSTANDENT. ALSO INITIATED ARNING OPPORTUNITIES | ONAL COMMUNITY HIKE DING, APPRECIATION, RESEARCH AND CLASS | S, WEBINARS, AND AND ENJOYMENT O |
| 10111 | | | | *************************************** |
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| 10000 | | | | |
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| 201111 | | | | |
| 1 100 0 | | | | |
| c (Code |) (Expenses \$ | including grants of | of \$) (Reve | enue \$ |
| M/A | | | | |
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| - 1044) | *************************************** | •••• | **************** | |
| 200000 | | | ************************************** | |
| 25222 | | | | |
| | ************************* | | 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| 00000 | | | | |
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| | | | | |
| ld Other | program services (Describe or | Schedule () | | |
| | program services (Describe or nses \$ | n Schedule O.) including grants of \$ |) (Revenue \$ | |

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 | | x |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | Ť | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | x |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | |
| | assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | x |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| | "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | _ 7 | Х | |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | |
| | complete Schedule D, Part III | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a | | | |
| | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | | | |
| | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | | | |
| | or in quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | Х | |
| 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 | X | |
| 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 |
| C | Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more | | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets | | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | X | <u> </u> |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FtN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | x |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If | | | |
| | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| þ | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | . | | |
| | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | | | |
| | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | | |
| | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | <u> </u> | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | |
| 00 | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | <u> </u> | <u> </u> |
| 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 | | l X |

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 | l., | | 37 |
| h | through 24d and complete Schedule K. If "No," go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 240 | | |
| d | CHARLES AND A DESCRIPTION OF THE PROPERTY OF T | 24c | | \vdash |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | 24d | | |
| 200 | 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 | 204 | | - |
| U | 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 | 200 | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | x |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key | 20 | | |
| | employee, creator or founder, substantial contributor or employee thereof, a grant selection committee | | | |
| | member, or to a 35% controlled entity (including an employee thereof) or family member of any of these | | | |
| | persons? If "Yes," complete Schedule L, Part III | 27 | | x |
| 28 | Was the organization a party to a business transaction with one of the following parties? (See the Schedule | <u> </u> | | <u> </u> |
| | L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | |
| | "Yes," complete Schedule L, Part IV | 28a | | x |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | X |
| ¢ | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | | | |
| | "Yes," complete Schedule L, Part IV | 28c | <u></u> | X |
| 29 | Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| | complete Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, | | | |
| | or IV, and Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | <u> </u> | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a | | | |
| 20 | 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 | l | | |
| 27 | related organization? If "Yes," complete Schedule R, Part V, line 2 | 36_ | <u> </u> | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | 3.7 |
| 38 | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and | 37 | | X |
| 30 | 19? Note: All Form 990 filers are required to complete Schedule O. | 1 | l Ψ | |
| P | art V Statements Regarding Other IRS Filings and Tax Compliance | _ 38 | <u> </u> | Щ_ |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | energy and a sentence of sentence of flote to any line in this rait v | | Vac | I NIO |
| 1a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | | Yes | No |
| b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 | - | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and | \dashv | | |
| • | reportable gaming (gambling) winnings to prize winners? | 1c | | |
| | | , ,,, | | |

| Pa | art V Statements Regarding Other IRS Filings and Tax Compliance (contin | nued) | | | Yes | No |
|-----|--|----------|-------------------------------|------|--------------|--------------|
| | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | T | | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 7 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax retu | ırns? | | 2b | Х | |
| 3a | 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 Scheduli | e O | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other | 2.12 | ity over, | 200 | | |
| | a financial account in a foreign country (such as a bank account, securities account, or other financial | al acco | unt)? | 4a | | x |
| b | If "Yes," enter the name of the foreign country | | | 2.11 | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial | Accou | nts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa | ction? | | 5b | | X |
| С | 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 t | he | | | | |
| | 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 contributi | ions or | | | | |
| | gifts were not tax deductible? | | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for | goods | | | | |
| | and services provided to the payor? | V | | 7a | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w | as | | | | |
| | required to file Form 8282? | | Zagor upon i jakontrovnene ro | 7c | | x |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit | contrac | t? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont | ract? | | 7f | | Х |
| g | If the organization received a contribution of qualified intellectual property, did the organization file F | orm 88 | 99 as required? | 7g | | X |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | ation fi | le a Form 1098-C? | 7h | | X |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain | ed by t | he | 5/47 | | |
| | sponsoring organization have excess business holdings at any time during the year? | | | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | 2.0 | | |
| 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 | 10a | | | | |
| 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 | 11a | | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources | | | | | |
| | against amounts due or received from them.) | 11b | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For | m 1041 | ? | 12a | $oxed{oxed}$ | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | E POLICIA D'ESPACE E SERVE | | | |
| 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? | CENTRES | | 13a | $oxed{oxed}$ | <u> </u> |
| | 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 | 13b | | | | |
| c | Enter the amount of reserves on hand | 13c | <u> </u> | | | L |
| 14a | | | | 14a | $oxed{oxed}$ | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Sched | | | 14b | <u> </u> | $oxed{oxed}$ |
| 15 | is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remun | eration | Or | | | |
| | excess parachute payment(s) during the year? | | | 15 | Щ | X |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment | nt incor | ne? | 16 | <u> </u> | X |
| 4- | If "Yes," complete Form 4720, Schedule O. | | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any ac | | | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952, or 4953? | | | 17 | | |
| | If "Yes," complete Form 6069. | | | | 1 | 1 |

| Form | 990 (2024) UPPER PENINSULA LAND CONSERVANCY 38-3467972 | | P | age 6 |
|----------|---|----------|--------|--------------|
| Pa | rt 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. Se | e inst | ructio | ns. |
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
| Sec | tion A. Governing Body and Management | | | AN - 20% |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 15 | | | |
| | If there are material differences in voting rights among members of the governing body, or | 1 | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | |
| | committee, explain on Schedule O. | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent 1b 15 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | 1 | - | |
| | any other officer, director, trustee, or key employee? | 2 | | х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors, trustees, or key employees to a management company or other person? | 3 | | х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | 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 | ١Ť | | |
| | one or more members of the governing body? | 7a | | ж |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | <u> </u> | | |
| ~ | stockholders, or persons other than the governing body? | 7b | | ж |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a | The governing body? | 8a | х | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | 00 | | |
| • | 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 Co | | 46 | |
| | tion Di i dilata (i ma didata i di antici di | 40.) | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | 163 | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | 100 | | |
| ~ | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | | 11a | X | |
| ь | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | 114 | 26 | _ |
| 12a | | 12a | х | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | 120 | 32 | _ |
| · | describe on Schedule O how this was done | 12c | х | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | - |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | 14 | | <u> </u> |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | х | |
| b | Other officers or key employees of the organization | | X | |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | 15b | Λ | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| 104 | with a taxable entity during the year? | 46. | | х |
| h | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | 16a | | |
| | 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? | 406 | | |
| Sec | tion C. Disclosure | 16b | | L |
| 17 | List the states with which a copy of this Form 990 is required to be filed MI | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) | =120.53 | | 551195 |
| .0 | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | | | | |
| 19 | | | | |
| 13 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, | | | |
| 20 | and financial statements available to the public during the tax year. State the name address, and telephone number of the person who possesses the organization's backs and records. | | | |
| 20 H: | State the name, address, and telephone number of the person who possesses the organization's books and records. ANNAH BOYD 1907 PRESOUE ISLE AVE | | | |
| - | AND FREDUE TOTE AVE | | | |

MARQUETTE

MI 49855

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

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

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

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

| See the instructions for the order in w Check this box if neither the orga | | | | | | tion c | omp | pensated any current office | r, director, or trustee. | |
|---|---|---------------|----------|-----------------|-------------------------|---|-----|--|---|--|
| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | box | k, unle | check iss pe | ition more rson i | than or both Highest compensated employee | an | (D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC) | (E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
| (1) CLARE F FASTIGGI | | | | | | | | | | |
| | 40.00 | | | | | | | | | |
| INTERIM EXECUTIVE DI | 0.00 | | | X | _ | Ш | _ | 20,508 | 0 | 0 |
| (2) ADAM BERGER | | | | | | ΙI | | | | |
| | 1.00 | | | | | ΙI | | _ | | |
| DIRECTOR | 0.00 | X | | <u> </u> | | Ш | | 0 | 0 | |
| (3) KACEY COOK | 2.00 | | | | | | | | | |
| DIRECTOR | 0.00 | X | | | | | | 0 | 0 | (|
| (4) MARK EHLERT | | | | | | | | | | |
| | 3.00 | | | | | | | ٨ | ^ | ٫ |
| PRESIDENT (5) ROBB FERGUSON | 0.00 | X | | Х | - | | | 0 | 0 | |
| (5) ROBB FERGOSON | 3.00 | | | | | ΙI | | | | |
| DIRECTOR | 0.00 | x | | | | | | _ | ^ | ١ , |
| (6) CARMEN GREENWOOD | | ┢ | \vdash | \vdash | \vdash | ┝ | | 0 | 0 | |
| (6) CARMEN GREENWOOD | 1.00 | | | | | | | | | |
| DIRECTOR | 0.00 | x | | | | | | _ | _ | ١, |
| (7) LOGAN HAWLEY | 0.00 | | \vdash | | | \vdash | | 0 | 0 | |
| (/)LOGAN HAWLEI | 1.00 | | | | - | | | | | |
| DIRECTOR | 0.00 | x | | | | | | 0 | 0 | (|
| (8) ADAM JONES | 0.00 | 1 | \vdash | | | \vdash | | | | |
| (8) ADAM CONES | 1.00 | | | | | | | | | 1 |
| DIRECTOR | 0.00 | x | | | | | | 0 | 0 | , |
| (9) SAM KAPP | 0.00 | 1 | | \vdash | \vdash | | | | | |
| (5) 5227 1422 | 2.00 | | | | | | | | | |
| SECRETARY | 0.00 | x | | x | | | | 0 | 0 | . ا |
| (10) MARC LABEAU | 0.00 | | | | \vdash | | | 0 | | |
| | 1.00 | | | | | | | | | |
| VICE PRESIDENT | 0.00 | x | | x | | | | 0 | o | |
| (11) WINSTON LARSON | | † | | 1 | | \vdash | | | | |
| ,.,, | 1.00 | | | | | | | | | |
| DIRECTOR | 0.00 | x | | | | | | 0 | 0 | i c |

Page 8

| Fall VII Section A. Onicers | , Directors, Tru | Stee | 5, N | ey L | mpi | oyee | 5, 0 | nd righest compensated | Employees (continued) | | | | |
|---|---|-----------------------------------|-----------------------|------------------------|---------------|---------------------------------|--------------|--|---|--------|---|--------------|----------|
| (A) Name and title | (B) Average hours | bo | x, unle | Pos check ess pe | rson | than o | an | (D) Reportable compensation | (E) Reportable compensation | | (F) stimated : of oth | amount er | ι |
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/ 1099-MISC/ 1099-NEC) | from related organizations (W-2/ 1099-MISC/ 1099-NEC) | | compens from the organization ated organ | he on and | |
| (12) LISA LONG (12) DIRECTOR | 1.00 | x | | | | | | 0 | 0 | | | | 0 |
| (13) LORA LOOPE (13) | 1.00 | , | | | | | | | | | | | |
| (14) MICHAELEEN OS (14) | ULLIVAN 2.00 | Х | | | - | | | 0 | 0 | | , | 6 | 0 |
| DIRECTOR (15) BROCK ROBINSO | I | Х | | | | | | 0 | 0 | | | | 0 |
| DIRECTOR (16) CRAIG WISEMAN | 0.00 | х | | | | | | 0 | 0 | | | | 0 |
| (16) TREASURER | 3.00 | х | | x | | | | 0 | 0 | | | | 0 |
| (17) | | | | | | | | | | | | | |
| (18) | | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | | |
| 1b Subtotal c Total from continuation shed d Total (add lines 1b and 1c) | ets to Part VII, | Secti | ion A | A | | | | 20,508 | | | | | |
| d Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from | | | d to | thos | e lis | ted a | bov | · | · | | | | |
| Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line | complete Schee | dule | J for | suc | h ind | dividu | ıal | | | | 3 | Yes | X |
| organization and related organization and related organization and related organization listed on line 1 5 Did any person listed on line 1 | nizations greater | thar | \$15 | 00,00 | 00? | f "Ye | S," | complete Schedule J for su | ch | | 4 | | x |
| for services rendered to the or Section B. Independent Contracto | ganization? If ") | es," | com | plete | s Sc | hedu | le J | for such person | | arten. | 5 | | x |
| Complete this table for your five compensation from the organian state. | ve highest comp zation. Report c (A) business address | ensa omp | ited i ensa | inder tion | for t | ient d he ca | cont alen | dar year ending with or with | than \$100,000 of hin the organization's tax y (B) stion of services | ear. | | (C) | |
| Name and | business address | | | | | | | Descrip | nion of Services | | | mpensa | ation |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | _ | |
| Total number of independent received more than \$100,000 | contractors (incli of compensation | uding n from | but the | not e org | limit aniz | ed to | tho | se listed above) who | 0 | | | | |
| DAA | | | | | | | | | | | For | m 99 | 0 (2024) |

Form 990 (2024) UPPER PENINSULA LAND CONSERVANCY

| P a | irt V | | | r Revenue edule O cont | ains a re | esponse or note t | o any line in this | Part VIII | 6044 0000 HATTON 100 100 100 100 100 100 100 100 100 10 | |
|--|--|--|-------------|----------------------------------|---|--|----------------------|--|---|--|
| | | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| st st | 1a | Federated camp | paigns | | 1a | | - | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership due | | | 1b | | | | | |
| | С | Fundraising eve | nts | | 1c | | | | | |
| | d | Related organiz | ations | | 1d | | | | | |
| | e | Government grants (co | | | 1e | | | | | 0 |
| | All other contributions, gifts, grants, and similar amounts not included above | | • | 1f | 308,893 | | | | | |
| ĘŞ | g | Noncash contributions | included i | n | | | | | | |
| no pu | | lines 1a-1f | 40.46 | | 1g \$ | 571 | 308,893 | | | |
| Ow | n | Total. Add lines | 1a-11 | o sagar carnota a artic | | Business Code | 308,893 | | | |
| | 2a | | | | | | | | | |
| Ņ. | b | | | | | District Control | | | | |
| Ser | c | | | | | 2000000 | | | | |
| ram eve | d | | | | | 20.0000 | | | | |
| Program Service Revenue | е | | | | | 6293390 | | | | |
| Δ. | f | All other program | | | | | | | | |
| _ | g | Total. Add lines | 2a-2f | | | EUROPE E E E E E E E E E E E E E E E E E E | | | | |
| | 3 | Investment inco | - | - | s, interes | st, and | | | | |
| | | other similar am | | | | | 16,843 | | | 16,843 |
| | 4 | Income from inv | estmer | nt of tax-exemp | bond pro | oceeds | | | | |
| | 5 | Royalties | · · · · · · | (i) Real | | 60 Barrens | | | | <u> </u> |
| | | Gross rents | 6a | (I) Real | _ | (ii) Personal | | | | |
| | 6a | Less: rental expenses | 6b | | - | | | | | |
| | ٥ | Rental inc. or (loss) | 6c | | | | | | | |
| | ď | Net rental incom | | oss) | 100000000000000000000000000000000000000 | | | | | |
| | 7a | Gross amount from | | (i) Securities | | (ii) Other | | | | |
| | | sales of assets other than inventory | 7a | 249 | 722 | 5,818 | | | | |
| e | b | Less: cost or other | | | | | | | | |
| Ven | | basis and sales exps. | 7b | | , 350 | | | | | |
| Other Revenue | | Gain or (loss) | 7c | 6 | ,372 | 5,818 | | | | |
| her | | Net gain or (loss | | cerement to a | | 20 100m occornor | 12,190 | 12,190 | | |
| ō | 8a | Gross income from | | ising events | | | | | | |
| | | (not including \$ | | n line | | | | | | |
| | | of contributions rep 1c). See Part IV, li | | n ane | 8a | | | | | |
| | L. | Less: direct exp | | | 8b | | | | | |
| | | Net income or (| | om fundraising | 0.0 | | | | | |
| | į. | Gross income fi | | • | | | | | · | |
| | | activities. See F | | 100 | 9a | | | | | |
| | ь | Less: direct exp | enses | 777 | 9b | | | | | |
| | С | Net income or (| loss) fro | om gaming acti | vities | | | | | |
| | 10a | Gross sales of i | nvento | ry, less | | 50.1-0.45(**) (********************************* | | | | |
| | | returns and allo | | 1 10 1 10 10 10 10 10 10 | 10a | | | | | |
| | | Less: cost of go | | | 10b | | | | | |
| _ | С | Net income or (| loss) fro | om sales of inv | entory | | | | | |
| SIN | | | | | | Business Code | | | | |
| nec | 11a | Control of the contro | 1773.12 | | | 531390 | 5,288 814 | 5,288 814 | | |
| ella | þ | MISCELLANE | OUS | | | 11111 | 814 | 814 | | |
| Miscellaneous Revenue | " | All other revenu | e | | | | | | | |
| 2 | ŭ | Total. Add lines | | | CERTICAL | A - 400-400 5000 - 4000 - | 6,102 | | | |
| _ | 12 | Total revenue. | | | | | 344,028 | 18,292 | ō | 16,843 |

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all (

| | Check if Schedule O contains a respons ot include amounts reported on lines 6b, 7b, | (A) | *************************************** | | |
|-------|---|------------------|---|---------------------------------|-------------------------|
| 8b, 9 | • • • | 100 | (B) | (C) | (D) |
| 4 | b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic | | | | · |
| | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and | | | | |
| | foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 20,508 | 11,074 | 8,203 | 1,231 |
| 6 | Compensation not included above to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 26,923 | 14,538 | 10,769 | 1,616 |
| 7 | Other salaries and wages | 114,639 | 61,905 | 45,856 | 6,878 |
| 8 | Pension plan accruals and contributions (include | | | | - |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 10,744 12,875 | 5,801 | 4,298 | 645 |
| 10 | Payroll taxes | 12,875 | 6,923 | 5,199 | 753 |
| 11 | Fees for services (nonemployees): | | , , , | | |
| а | Management | | | | |
| ь | Legal | 5,040 | 5,040 | | |
| С | Accounting | 5,282 | | 5,282 | |
| d | Lobbying | | | , | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other, (if line 11g amount exceeds 10% of line 25, column | | | | |
| • | (A), amount, list line 11g expenses on Schedule O.) | 150 | | 150 | |
| 12 | Advertising and promotion | 1,081 | 322 | 759 | |
| 13 | Office expenses | 1,081 8,376 | 2,714 | 4,197 | 1,465 |
| 14 | Information technology | 8,542 | 6,498 | 2,044 | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 19,600 | 10,539 | 7,914 | 1,147 |
| 17 | Travel | 5,403 | 5,215 | 177 | 11 |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 3,223 | 2,011 | 815 | 397 |
| 20 | Interest | 4,423 | | 4,423 | |
| 21 | Payments to affiliates | | | -, | |
| 22 | Depreciation, depletion, and amortization | 2,223 | 530 | 1,693 | |
| 23 | Insurance | 8,821 | 3,650 | 5,171 | |
| 24 | Other expenses. Itemize expenses not covered | | | , , , , , | |
| | above. (List miscellaneous expenses on line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column | | 1 | | |
| | (A), amount, list line 24e expenses on Schedule O.) | | | | |
| а | PROPERTY MAINTENANCE | 13,799 | 13,665 | | 134 |
| b | DUES-LTA HOL GTF | 3,235 | 750 | 2,485 | |
| С | PROPERTY TAX | 2,831 | 2,831 | | |
| d | (2004) 13 (11) (2004) (2004) (2004) (2004) (2004) (2004) (2004) | | | | |
| e | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 277,718 | 154,006 | 109,435 | 14,277 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | 202,000 | 200,400 | 4-1211 |

Part X Balance Sheet

Form 990 (2024)

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 1 113,384 101,304 Savings and temporary cash investments 2 2 120,000 130,000 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 2,266,094 basis. Complete Part VI of Schedule D 10a 2,364 2,262,030 2,263,730 b Less: accumulated depreciation 10b 10c 500,490 11 591,945 Investments—publicly traded securities 12 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 13 14 14 Intangible assets 60,644 53,361 15 Other assets. See Part IV, line 11 15 3,147,623 3,049,265 16 Total assets. Add lines 1 through 15 (must equal line 33) 3,268 4,228 Accounts payable and accrued expenses 17 17 18 18 Grants payable 7,250 7,800 19 Deferred revenue 19 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 77,064 76,594 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 56,897 64,650 of Schedule D 153,272 144,479 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 263,518 357,696 Net assets without donor restrictions 2,641,268 2,636,655 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 2,904,786 2,994,351 Total net assets or fund balances 32 32 3,049,265 3,147,623 Total liabilities and net assets/fund balances

Form 990 (2024)

3a

3h

X

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

2024

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| Name | of th | e organization | | | | | | | fication number | | | | | |
|------|---|--|--|---|-------------------------------|--------------|----------------------|-----------------|-----------------|------|--|--|--|--|
| | | | | INSULA LAND CONSEI | | | | 38-346 | | | | | | |
| | ırt l | | | rity Status. (All organization | | | | e instruction | ns. | | | | | |
| | orga | | | ecause it is: (For lines 1 through 12, | - | | • | | | | | | | |
| 1 | Н | | | or association of churches described | | 170(b)(1 |)(A)(i). | | | | | | | |
| 2 | Ц | | | b)(1)(A)(ii). (Attach Schedule E (For | | | | | | | | | | |
| 3 | Ц | | | service organization described in se | | | | | | | | | | |
| 4 | Ш | | | erated in conjunction with a hospital | described | in sectio | n 170(b)(1)(A)(ii | i). Enter the h | ospital's name, | | | | | |
| | | city, and state | | | | | | | | | | | | |
| 5 | Ш | _ | • | nefit of a college or university owner | d or operate | d by a g | overnmental unit | described in | | | | | | |
| | | | b)(1)(A)(iv). (Complete | | | | | | | | | | | |
| 6 | ¥ | | | it or governmental unit described in | | | | | | | | | | |
| 7 | X | | on that normally receiv section 170(b)(1)(A)(v | res a substantial part of its support f ri). (Complete Part II.) | rom a gove | rnmental | unit or from the | general public | ; | | | | | |
| 8 | | A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) | | | | | | | | | | | | |
| 9 | An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college | | | | | | | | | | | | | |
| | | or university of university; | or a non-land-grant col | lege of agriculture (see instructions) | . Enter the | name, ci | ty, and state of the | ne college or | | | | | | |
| 10 | | | on that normally receive | es (1) more than 33 1/3% of its sup | port from co | ontributio | ns. membership | fees, and gro | SS | | | | | |
| | | receipts from | activities related to its | exempt functions, subject to certain | exceptions | ; and (2) | no more than 3 | 3 1/3% of its | | | | | | |
| | | | | me and unrelated business taxable | | | | usinesses | | | | | | |
| | | | | une 30, 1975, See section 509(a)(2 | | | | | | | | | | |
| 11 | Н | | | ated exclusively to test for public sa | | | | 4.41 | | | | | | |
| 12 | Ш | | | ated exclusively for the benefit of, to anizations described in section 509 | | | | | | | | | | |
| | | | | at describes the type of supporting | | | | | CHECK | | | | | |
| | а | | | on operated, supervised, or controlle | - 122 | | | | na | | | | | |
| | | _ | | e power to regularly appoint or elec- | | | | | ,,9 | | | | | |
| | | supportin | g organization. You m | ust complete Part IV, Sections A | and B. | | | | | | | | | |
| | b | | | on supervised or controlled in conne | | | | | | | | | | |
| | | | | upporting organization vested in the | same pers | ons that | control or manag | e the support | ed | | | | | |
| | | | * *.*. | plete Part IV, Sections A and C. | 200 | | | | | | | | | |
| | С | | | d. A supporting organization operate ee instructions). You must complet | | | | y integrated w | ith, | | | | | |
| | d | | | rated. A supporting organization or | | | | | | | | | | |
| | | | | d. The organization generally must | | | | an attentiven | ess | | | | | |
| | _ | | | You must complete Part IV, Section | | | | | | | | | | |
| | е | functional | is box if the organization. Ilv integrated, or Type | on received a written determination t Ill non-functionally integrated suppo | rrom the IR: orting organi | s that it is | salypel, lype | II, Type III | | | | | | |
| | f | | nber of supported orga | | rang organi | Lution. | | | Γ | | | | | |
| | g | Provide the fo | ollowing information ab | out the supported organization(s). | | | | | | | | | | |
| (i | Nam | e of supported | (ii) EIN | (iii) Type of organization | (iv) Is the o | rganization | (v) Amount of | monetary | (vi) Amount | of . | | | | |
| | org | ganization | | (described on lines 1-10 | listed in you | | support | | other support (| see | | | | |
| | | | | above (see instructions)) | docum | • | instructi | ions) | instructions |) | | | | |
| (A) | | | | | Yes | No | | | | | | | | |
| | | | | | | | | | | | | | | |
| (B) | | | | | | | | | | | | | | |
| (C) | | | | | | | | | | | | | | |
| (C) | | | | | | | | | | | | | | |
| (D) | | | | | | | | | | | | | | |
| (E) | | | | | | | | | | | | | | |
| Tota | <u> </u> | | | | - | | | | | | | | | |
| | | | | | | | | | | | | | | |

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

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

| Sec | tion A. Public Support | Tame to quality | | notes polett, p | iodoo oompion | 5 t Git iii.) | |
|------|--|------------------------|-----------------------------------|-----------------------|--------------------|---------------|---|
| Cale | ndar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 192,404 | 392,129 | 430,691 | 355,423 | 308,893 | 1,679,540 |
| 2 | Tax revenues levied for the organization'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 | 192,404 | 392,129 | 430,691 | 355,423 | 308,893 | 1,679,540 |
| 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) | | | | | | 443,131 |
| Sec | Public support. Subtract line 5 from line 4 | | | | | | 1,236,409 |
| | ndar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
| 7 | Amounts from line 4 | 192,404 | 392,129 | 430,691 | 355,423 | 308,893 | 1,679,540 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 8,054 | 20,270 | 14,138 | 13,981 | 16,843 | 73,286 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 1,752,826 |
| 12 | Gross receipts from related activities, etc. | (see instructions) | | | | 12 | 18,588 |
| 13 | First 5 years. If the Form 990 is for the org | ganization's first, se | econd, third, fourth | , or fifth tax year a | s a section 501(c) | (3) | |
| _ | organization, check this box and stop here | | | | | | 200000000000000000000000000000000000000 |
| | tion C. Computation of Public Su | | <u> </u> | | | | |
| 14 | Public support percentage for 2024 (line 6, | | | n (f)) | | 14 | 70.54% |
| 15 | Public support percentage from 2023 Sche | | the first transfer and the second | | | 15 | 75.24% |
| 16a | 33 1/3% support test — 2024. If the organ | | | | 33 1/3% or more, | check this | |
| | box and stop here. The organization quali | | | | | | X |
| b | 33 1/3% support test — 2023. If the organ | | | | 15 is 33 1/3% or n | nore, check | |
| 470 | this box and stop here. The organization of | | | | | | |
| 17a | 10%-facts-and-circumstances test — 20 | | | | | | |
| | 10% or more, and if the organization meet Part VI how the organization meets the fac- organization | | | | s a publicly suppo | rted | |
| b | 10%-facts-and-circumstances test — 20 | 23. If the organizat | ion did not check a | a box on line 13 1 | 6a 16b or 17a a | nd line | |
| | 15 is 10% or more, and if the organization | | | | | | |
| | in Part VI how the organization meets the | | | | | | _ |
| 4.5 | organization | | | | | | |
| 18 | Private foundation. If the organization did instructions | | | | | | |

Page 3

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

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

| Sec | tion A. Public Support | quality arraor ti | THE LEGICO HOLOGY | ociow, picase e | ompicte i ait i | 1.7 | | |
|-----|--|---------------------|---------------------|---|--------------------|------------------|---------------|---|
| _ | ndar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | \top | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | | |
| C | Add lines 7a and 7b | | | | | | \bot | |
| 8 | Public support. (Subtract line 7c from | | | | | ļ | | |
| 800 | tion B. Total Support | | 1 | | L | <u> </u> | | |
| | ndar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | $\overline{}$ | (f) Total |
| 9 | Amounts from line 6 | (a) 2020 | (6) 2021 | (0) 2022 | (u) 2023 | (e) 2024 | + | (f) Total |
| | | | | | | 1 | + | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | | |
| ¢ | Add lines 10a and 10b | | | | | | | |
| 11 | Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on | | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | | |
| 14 | First 5 years. If the Form 990 is for the or | nanization's first | second third four | th or fifth tay year | as a section 501// | -1/3/ | | |
| | organization, check this box and stop her | _ | second, umo, roun | in, or militax year | as a section sort | .)(3) | | |
| Sec | tion C. Computation of Public Su | | tage | | | .,., | | |
| 15 | Public support percentage for 2024 (line 8 | | | mn (fl) | | 1: | 5 | % |
| 16 | Public support percentage from 2023 Sch | | | *************************************** | | 10 | $\overline{}$ | % |
| Sec | tion D. Computation of Investme | | | | | | | |
| 17 | investment income percentage for 2024 (I | | | 3, column (f)) | | 1 | 7 | % |
| 18 | Investment income percentage from 2023 | | | | | 1 | | % |
| 19a | 33 1/3% support tests — 2024. If the org | | | ne 14, and line 15 | is more than 33 1 | | | |
| | 17 is not more than 33 1/3%, check this b | | | | | | | |
| b | 33 1/3% support tests — 2023. If the org | anization did not d | check a box on line | e 14 or line 19a, ar | d line 16 is more | than 33 1/3%, ar | d | |
| | line 18 is not more than 33 1/3%, check the | | | | | | | 1.12259 |
| 20 | Private foundation. If the organization di | d not check a box | on line 14, 19a, or | 19b, check this be | ox and see instruc | tions | v | |

Supporting Organizations Part IV

(Complete only if you checked a box on 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 |
|------------|-----|------------|----------------------|
| | | | |

- 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.
- 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below.
- 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.
- 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.
- 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.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor 7 (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).
- 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).
- 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.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | | Yes | No |
|-------|----------|--------|-----------|
| | 1 | | |
| | 2 | | |
| | 3a | | |
| | | | |
| | 3b | | |
| | 3c 4a | | |
| | | | |
| | 4b | | |
| | 4c | | |
| | | | |
| | 5a | | |
| | 5b | | |
| | 5c | | |
| | 6 | | |
| | 7 | | |
| | 8 | | |
| | 9a | | |
| | 9b | | |
| | 9c | | |
| | 10a | | |
| int. | 10b | /Farm | 990) 2024 |
| acti(| aule / | (rorm) | 990) 2024 |

| Schedu | le A (Form 990) 2024 UPPER PENINSULA LAND CONSERVANCY 38-346797 | 2 | | Page 5 |
|--------|--|---------------|--------------|--|
| 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 | | |
| | 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, | | | |
| 04 | provide detail in Part VI. | 11c | | |
| Secti | on B. Type I Supporting Organizations | | | l |
| | | $\overline{}$ | Yes | No |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or | | | |
| | more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, | | | |
| | directors, or trustees at all times during the tax year? If "No," describe in 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, | | | |
| Conti | supervised, or controlled the supporting organization. | 2 | | <u>L</u> . |
| Secti | on C. Type II Supporting Organizations | | Van | l No |
| 4 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | Yes | No |
| 1 | | | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | 1 |
| | or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | | | |
| Secti | on D. All Type III Supporting Organizations | 1 1 | | |
| | on or an appointing organizations | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | 103 | 140 |
| | 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 | | 1 |
| Secti | on 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) | į. | | _ |
| 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. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instru | | | |
| | The diganization supported a governmental entity, bescribe in Part vi now you supported a governmental entity (see institu | ictions, | Yes | No |
| 2 | Activities Test, Answer lines 2a and 2b below. | | 163 | 140 |
| 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, | | | |
| | how the organization was responsive to each of its supported organizations, and how the organization determined | 2a | | |
| | that these activities constituted substantially all of its activities. | | | |
| 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 | | | 1 |
| | "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would | 2b | İ | |
| | have engaged in these activities but for the organization's involvement. | | | |
| 3 | Parent of Supported Organizations. Answer lines 3a and 3b below. | | | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | 3a | | |
| b | trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. | | | - |
| | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

| Sched | ule A (Form 990) 2024 UPPER PENINSULA LAND CONSERV | VAN | CY 38-3467 | 972 | Page 6 |
|-------|--|---------|------------------------------|---------------------|--------|
| Pai | t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga | niza | tions | | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov | v. 20, | 1970 (explain in Part VI). S | ee | |
| | instructions. All other Type III non-functionally integrated supporting organizations mus | t com | plete Sections A through E. | | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Curre (optio | |
| 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) Curre (optio | |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | | |
| | instructions for short tax year or assets held for part of year): | | | | |
| a | Average monthly value of securities | 1a | | | |
| b | Average monthly cash balances | 1b | | | |
| c | Fair market value of other non-exempt-use assets | 1c | | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | | |
| e | Discount claimed for blockage or other factors | | | | |
| | (explain in detail in Part VI): | | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | | |
| 3 | Subtract line 2 from line 1d. | 3 | | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, | | | | |
| | see instructions). | 4 | | | |
| _ 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | | |
| 6 | Multiply line 5 by 0.035. | 6 | | | |
| 7 | Recoveries of prior-year distributions | 7 | | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | | |
| Sect | ion C – Distributable Amount | | | Current | Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | | |
| 2 | Enter 0.85 of line 1. | 2 | | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | | |
| 5 | Income tax imposed in prior year | _5 | | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | | |
| | emergency temporary reduction (see instructions). | 6 | | | |
| 7 | Check here if the current year is the organization's first as a non-functionally integrated | Type II | I supporting organization | | |
| | (see instructions) | | | | |

Schedule A (Form 990) 2024

| Par | t V Type III Non-Functionally Integrated 509(a)(3) S | Supporting Organizat | tions (continued) | | 1 090 1 |
|------|--|-----------------------------|---------------------------------------|--------|-------------------------------------|
| Sect | ion D - Distributions | | | | Current Year |
| 1_ | Amounts paid to supported organizations to accomplish exempt purpose | 1 | | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes | of supported | | | |
| | organizations, in excess of income from activity | | | 2 | |
| 3 | Administrative expenses paid to accomplish exempt purposes of support | orted organizations | | 3 | |
| 4_ | Amounts paid to acquire exempt-use assets | | | 4 | |
| 5_ | Qualified set-aside amounts (prior IRS approval required-provide detail | ails in Part VI) | | 5 | |
| 6_ | Other distributions (describe in Part VI). See instructions. | | | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | |
| 8 | Distributions to attentive supported organizations to which the organization | ation is responsive | | П | |
| | (provide details in Part VI). See instructions. | | | 8 | |
| 9 | Distributable amount for 2024 from Section C, line 6 | | | 9 | |
| 10 | Line 8 amount divided by line 9 amount | - | | 10 | |
| Sect | ion E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistribution Pre-2024 | ıs | (iii) Distributable Amount for 2024 |
| 1 | Distributable amount for 2024 from Section C, line 6 | | 110-2024 | \neg | Allount for 2024 |
| 2 | Underdistributions, if any, for years prior to 2024 | | | \neg | |
| | (reasonable cause required-explain in Part VI). See instructions. | | | | |
| 3 | Excess distributions carryover, if any, to 2024 | | | | |
| a | From 2019 | | | | |
| b | From 2020 | | | | |
| С | From 2021 | | | | |
| d | From 2022 | | Pilla | \neg | |
| e | From 2023 | | | | |
| f | Total of lines 3a through 3e | | | | |
| | Applied to underdistributions of prior years | | | | |
| h | Applied to 2024 distributable amount | | | | |
| i | Carryover from 2019 not applied (see instructions) | | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | <u> </u> |
| 4 | Distributions for 2024 from | | | | |
| | Section D, line 7: \$ | V | | | |
| a | Applied to underdistributions of prior years | | | | |
| b | Applied to 2024 distributable amount | | | | |
| С | Remainder. Subtract lines 4a and 4b from line 4. | | | | |
| 5 | Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | |
| | Part VI. See instructions. | | | | |
| 7 | Excess distributions carryover to 2025. Add lines 3j | | | | |
| | and 4c. | | | | |
| 8 | Breakdown of line 7: | | | | |
| | Excess from 2020 | | | | |
| | Excess from 2021 | | | | |
| | Excess from 2022 | | | | _ |
| | Excess from 2023 | | | | |
| е | Excess from 2024 | | | | |

Schedule A (Form 990) 2024

| Schedule A (Fo | orm 990) 2024 | UPPER | PENINSULA | LAND | CONSERVAN | CY | 38-3467972 | Page 8 |
|--|--|---|--|--|---|--|---|---|
| Part VI | Supplemental III, line 12; Part B, lines 1 and 2 3a, and 3b; Par | Information. P IV, Section A, I P; Part IV, Section TV, line 1; Part | rovide the expla ines 1, 2, 3b, 3c on C, line 1; Part V, Section B, lin | nations r , 4b, 4c, t IV, Sect e 1e; Pa | equired by Part 5a, 6, 9a, 9b, 9d ion D, lines 2 an rt V, Section D, | II, iine 10; c, 11a, 11b nd 3; Part l lines 5, 6, | Part II, line 17a or , and 11c; Part IV, V, Section E, lines and 8; and Part V, (See instructions.) | 17b; Part Section 1c, 2a, 2b, |
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Schedule B (Form 990) (Rev. December 2024))

(Rev. December 2024))
Department of the Treesury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

Employer identification number

| UPPER PENINSUL | A LAND CONSERVANCY | 38-3467972 | | | | | | |
|--|---|----------------|--|--|--|--|--|--|
| Organization type (check one |): | - | | | | | | |
| Filers of: | Section: | | | | | | | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not 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 | | | | | | | |
| | | | | | | | | |
| | overed by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a Special Rule | e. See | | | | | | |
| General Rule | | | | | | | | |
| | ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5 property) from any one contributor, Complete Parts I and II, See instructions for determinibutions. | | | | | | | |
| Special Rules | | | | | | | | |
| regulations under secti 16b, and that received | scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13 from any one contributor, during the year, total contributions of the greater of (1) \$5,000 on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. | 3, 16a, or | | | | | | |
| 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. | | | | | | | | |
| 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | | | | |
| Caution: An organization that must answer "No" on Part IV, | isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For ine 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990; the filing requirements of Schedule B (Form 990). | m 990), but it | | | | | | |

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

SCHEDULE D (Form 990) (Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

| Name | of the organization | | Employer | identification number |
|------|---|---|-------------|---------------------------------|
| | PPER PENINSULA LAND CONSERVANCY | | | 467972 |
| Pa | rt I Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" on | unds or Other Similar Funds or A Form 990, Part IV, line 6. | Accoun | ts |
| | | (a) Donor advised funds | | b) Funds and other accounts |
| 1 | Total number at end of year | | | |
| 2 | Aggregate value of contributions to (during year) | | | |
| 3 | Aggregate value of grants from (during year) | | | |
| 4 | Aggregate value at end of year | | | |
| 5 | Did the organization inform all donors and donor advisors in writing the | at the assets held in donor advised | | |
| | funds are the organization's property, subject to the organization's ex | clusive legal control? | | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor advisors | n writing that grant funds can be used | | |
| | only for charitable purposes and not for the benefit of the donor or do | nor advisor, or for any other purpose | | |
| | conferring impermissible private benefit? | | | Yes No |
| Pa | rt II Conservation Easements | | | |
| | Complete if the organization answered "Yes" on | | | |
| 1 | Purpose(s) of conservation easements held by the organization (chec | | | |
| | Preservation of land for public use (for example, recreation or ed | . = | - | |
| | Protection of natural habitat | Preservation of a certified his | storic stru | cture |
| | X Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified cons | ervation contribution in the form of a conse | ervation | |
| | easement on the last day of the tax year. | | | Held at the End of the Tax Year |
| а | | | 2a | 26 |
| b | Total acreage restricted by conservation easements | | 2b | 3,407.00 |
| C | Number of conservation easements on a certified historic structure in | | 2c | |
| d | Number of conservation easements included on line 2c acquired after | r July 25, 2006, and not | -110 | |
| | on a historic structure listed in the National Register | ************* | 2d | <u> </u> |
| 3 | Number of conservation easements modified, transferred, released, | extinguished, or terminated by | | • |
| | the organization during the tax year | | | 0 |
| 4 | Number of states where property subject to conservation easement is | | * * = * 1 = | 1 |
| 5 | Does the organization have a written policy regarding the periodic mo | onitoring, inspection, handling of | | ₽ □ |
| | violations, and enforcement of the conservation easements it holds? | | | X Yes No |
| ь | Staff and volunteer hours devoted to monitoring, inspecting, handling | or violations, and enforcing | | 707 |
| - | conversation easements during the year | | | |
| - | Amount of expenses incurred in monitoring, inspecting, handling of v | | | . 22 722 |
| | conservation easements during the year Does each conservation easement reported on line 2d above satisfy | the reminerate of easting 470/hVAVD | | \$ 23,723 |
| 0 | | the requirements of section 170(n)(4)(B) | | □ Van □ Na |
| 9 | (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation ease | monto in its revenue and suppose statemen | nt and had | Yes No |
| J | sheet, and include, if applicable, the text of the footnote to the organi | | | ance |
| | organization's accounting for conservation easements. | Letter 5 that local state ments that good local | , | |
| Pa | rt III Organizations Maintaining Collections of Ar Complete if the organization answered "Yes" or | t, Historical Treasures, or Other Form 990, Part IV, line 8. | Similar | Assets |
| 1a | If the organization elected, as permitted under FASB ASC 958, not to | | ce sheet v | works |
| | of art, historical treasures, or other similar assets held for public exhi | | | |
| | service, provide in Part XIII the text of the footnote to its financial state | | | |
| b | If the organization elected, as permitted under FASB ASC 958, to rej | | heet work | s of |
| | art, historical treasures, or other similar assets held for public exhibit | | | |
| | provide the following amounts relating to these items. | | | 5,0 |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | | \$ |
| | (ii) Assets included in Form 990, Part X | | | \$ |
| 2 | If the organization received or held works of art, historical treasures, | | ovide the | |
| | following amounts required to be reported under FASB ASC 958 rela | • | | |
| a | Develope included on Francisco Dest Mill Co. 4 | | | \$ |
| b | Assets included in Form 990, Part X | | | \$ |

| | D (Form 990) (Rev. 12-2024) OFFER | | | | 36-346/8 | | | | age 2 |
|--------------------|--|---------------------------------------|---------------------------|---|-----------------|---------------|---------------------------------------|---------|---------------|
| Part I | | | | | | sets (c | <u>ontinu</u> | ed) | |
| | ing the organization's acquisition, accession items (check all that apply). | on, and other records, | check any of the followi | ng that make signifi | cant use of its | | | | |
| a | Public exhibition | d Lo | an or exchange prograr | m | | | | | |
| ь 🗌 | Scholarly research | | her | | | | | | |
| c 🗀 | Preservation for future generations | | | | | | | | |
| 4 Pro | ovide a description of the organization's co | lections and explain he | ow they further the orga | anization's exempt n | uroose in Part | | | | |
| XII | | | | | aipooo mii aii | | | | |
| | ring the year, did the organization solicit or | receive donations of a | art historical treasures | or other similar | | | | | |
| | sets to be sold to raise funds rather than to | | | | | [| Yes | | No |
| Part I | | | t of the organization's C | ollection? | | Garage . | | 5 | NO |
| rait | Complete if the organization 990, Part X, line 21. | • | n Form 990, Part I | V, line 9, or repo | orted an amo | ount on | Form | | |
| | he organization an agent, trustee, custodi | an or other intermediar | y for contributions or ot | her assets not | | | | _ | · |
| | luded on Form 990, Part X? | | | ersemment in the | | 00000 | Yes | § [_ | No |
| b If" | Yes," explain the arrangement in Part XIII | and complete the follow | wing table. | | | | | | |
| | | | | | | A | Amount | | |
| c Be | ginning balance | | | | 1c | | | | |
| d Ad | ditions during the year | | | | 1d | | | | |
| e Dis | stributions during the year | | | | 1e | | | | |
| | ding balance | | | | 1f | | | | |
| 2a Dio | the organization include an amount on Fe | orm 990, Part X, line 2 | , for escrow or custodi | al account liability? | | | Yes | s | No |
| | Yes," explain the arrangement in Part XIII. | | | | | | i i i i i i i i i i i i i i i i i i i | | 1 |
| Part \ | | , | | | | | | | |
| | Complete if the organization | answered "Yes" o | n Form 990. Part I | V. line 10. | | | | | |
| | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years | back | (e) Four | vears l | hark |
| 1a Ro | ginning of year balance | 500,490 | 454,559 | 565,784 | | ,597 | | | 597 |
| | ntributions | 39,167 | 404,000 | 303,704 | | ,285 | | | |
| | | 39,107 | | | 1/0 | ,203 | | 07, | 771 |
| | t investment earnings, gains, | 50.000 | 66 005 | 04.050 | | | | | |
| | d losses | 52,288 | 66,985 | -84,350 | 48 | ,493 | | 32, | 160 |
| | ants or scholarships | | | | | | | | |
| | ner expenditures for facilities and ograms | | 21,054 | 26,875 | | | 1 | 35. | 522 |
| f Ad | ministrative expenses | | | | | | | | |
| a En | d of year balance | 591,945 | 500,490 | 454,559 | 565 | ,784 | 3 | 39. | 006 |
| _ | ovide the estimated percentage of the curr | · · · · · · · · · · · · · · · · · · · | | | | 7 | | , | |
| b Pe c Te Th | ard designated or quasi-endowment rmanent endowment 46.00 % rm endowment % e percentages on lines 2a, 2b, and 2c sho e there endowment funds not in the posses | • | on that are held and adr | ministered for the | | | _ | | |
| org | anization by: | | | | | | | Yes | No |
| (i) | Unrelated organizations? | | | Martin Martin Sea Labor | | | 3a(i) | | X |
| (ii) | Related organizations? | | | | | 78.579.6s.53 | 3a(ii) | | Х |
| b If " | Yes" on line 3a(ii), are the related organiza | | | | | Table Care | 3b | | $\overline{}$ |
| | scribe in Part XIII the intended uses of the | | | . 37 1 34 104 7 104 4 104 104 104 104 | | | | | |
| Part \ | | | | | | | | | |
| | Complete if the organization | | n Form 990 Part I | V line 11a See | Form 990 | Part X | line 1 | n | |
| | Description of property | (a) Cost or other basi | | | ccumulated | $\overline{}$ | | | |
| | Description of property | (investment) | (other) | | | " | (d) Book v | alue | |
| 4. 1 | - 4 | funa de autorité. | | | preciation | | | | |
| 1a La | | | 2,236 | 775 | | | 2,23 | 6, | 775 |
| | ildings | | | | | \perp | | | |
| c Le | asehold improvements | | | | | | | | |
| | uipment | | | | | | | | |
| e Ot | | | 29 | ,319 | 2,364 | | 2 | 6 - | 955 |
| | d lines 1a through 1e. (Column (d) must e | qual Form 990. Part X | | , | | | 2,26 | | |
| | | ,,,,, | , (2)/ | CONTRACTOR OF THE PARTY OF THE | | | -/-0 | · • , | , ,,, |

| Schedule D (| Form 990) (Rev. 12-2024)UPPER PENINSULA | A LAND | CONSERVANCE | 38-3467972 | Page 3 |
|---------------|--|---|-------------------------|--|-------------|
| Part VII | Investments - Other Securities | | | <u></u> | |
| | Complete if the organization answered "Ye | s" on For | m 990, Part IV, line | e 11b. See Form 990, Part X, line 1 | 2. |
| | (a) Description of security or category | | (b) Book value | (c) Method of valuation | |
| | (including name of security) | | | Cost or end-of-year market value | |
| (1) Financial | derivatives | | | | |
| (2) Closely h | neld equity interests | | | | |
| (3) Other | Transport to the second of the | | | | |
| (A) | | | | | |
| (B) | | | | | |
| (C) | | | | | |
| (D) | | 400 F F F F F F F F F F F F F F F F F F | | | |
| (E) | | 1000 ± 0000 | | | |
| (F) | ************************************** | | | | |
| (G) | | | | | |
| (H) | | | | | |
| | nn (b) must equal Form 990, Part X, line 12, col. (B)) | | | | |
| Part VIII | Investments – Program Related | | | | |
| | Complete if the organization answered "Ye | es" on For | m 990, Part IV, line | e 11c. See Form 990, Part X, line 1 | 3. |
| | (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) | 41 | | | | |
| Part IX | onn (b) must equal Form 990, Part X, line 13, col. (B)) Other Assets | | | | |
| -Fait IX | | o" on For | m 000 Bort IV line | 11d Soc Form 000 Dort V line 1 | E |
| | Complete if the organization answered "Ye | | ili 990, Fait IV, ilile | | Pictor or |
| (4) | (a) Descrip | tion . | | (b) Book | value |
| (2) | | | | | |
| (3) | | | | | |
| | | | | | |
| (4) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | nn (b) must equal Form 990, Part X, line 15, col. (B)) | | | | |
| Part X | Other Liabilities | | | The control of the co | |
| | Complete if the organization answered "Ye | s" on For | m 990. Part IV. line | e 11e or 11f. See Form 990 Part X | |
| | line 25. | | | 2 | 1 |
| 1. | (a) Description of | of liability | | (b) Book | value |
| | al income taxes | | | | |
| | E LIABILITY (NON-CURRENT) | | | 4 | 16,754 |
| | E LIABILITY (CURRENT) | | | | 12,490 |
| | RENT PORTION OF LONG TERM PROMISS | | | | 5,406 |
| (5) | | | | | , |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |

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

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

64,650

| Sche | dule D (Form 990) (Rev. 12-2024) UPPER PENINSULA LAND CON | SERVANCY | 38-3467972 | Page 4 |
|----------|--|---|----------------------------------|--------------|
| Pa | rt XI Reconciliation of Revenue per Audited Financial State | | • | |
| | Complete if the organization answered "Yes" on Form 990 | , Part IV, line 12 | э | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | |
| а | | 2a | 1 | |
| b | Donated services and use of facilities | 2b | | |
| C | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| е | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| С | Add lines 4a and 4b | | | |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | |
| Pa | rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990 | | | |
| 1 | Total avanages and leaves nor guilted financial statements | | 141 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| - а | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | | | |
| c | All and a second | | | |
| d | Other losses Other (Describe in Part XIII.) | | | |
| | Add lines 2a through 2d | 20 | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | Exclication sizes | |
| а | | 4a | | |
| ь | | 4b | | |
| | Add lines 4s and 4h | | 4c | |
| | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | D1.4 - 1.10 - 2.10 - 1.10 - 1.40 | - |
| | rt XIII Supplemental Information | | | |
| P. T. | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Paint XI, lines 2d and 4b; Also complete this part to provide ART II, LINE 5 - MONITORING AND ENFORCEMENTE ORGANIZATION HAS A WRITTEN POLICY TO ECONSERVATION EASEMENTS | de any additional inf | ormation. | ava.us.ngg.: |
| 0 | ART II, LINE 9 - ACCOUNTING FOR CONSERVAT NLY LAND DONATIONS ARE REPORTED IN THE FI ASEMENTS ARE NOT VALUED. | TION EASEMI NANCIAL ST | ENTS PATEMENTS. CONS | ERVATION |
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| Schedule D (F | orm 990) (Rev. 12 | 2-2024)UPPER | PENINSULA | LAND | CONSERV | ANCY | 38-3467972 | Page 5 |
|---|-----------------------------|------------------|-------------|------|---------|-------------------|------------|--------|
| Part XIII | Supplement | al Information | (continued) | | | | | |
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SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public Inspection

| UPPI | ER. | PENINSULA | LAND | CONSERVANCY |
|------|-----|-----------|------|-------------|
| | | | | |

Employer identification number 38~3467972

FORM 990 - ORGANIZATION'S MISSION

UP LAND CONSERVANCY PROTECTS LAND IN MICHIGAN'S UPPER PENINSULA BY OWNING
IT AS NATURE PRESERVES AND WORKING FOREST RESERVES, AND THROUGH
CONSERVATION EASEMENTS (PERPETUAL, VOLUNTARY AGREEMENTS THAT GUARD THE
CONSERVATION VALUES OF THE PROPERTY)

FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED JOHN FRYE

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 YEAR END FINANCIAL REPORTS ARE APPROVED BY THE BOARD PRIOR TO PREPARATION OF THE FORM 990. A COPY OF THE FORM 990 IS PROVIDED TO BOARD MEMBERS PRIOR TO THE DUE DATE OF THE RETURN. THE RETURN IS FILED UPON ACCEPTANCE BY THE BOARD.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY BOARD MEMBERS SIGN OFF AT EACH BOARD MEETING

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL SALARY OF THE EXECUTIVE DIRECTOR WAS REVIEWED AND APPROVED ACCORDING TO POLICY.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS ALL OTHER STAFF HAVE A REVIEW AND COMPARABLE COMPENSATION DETERMINATION MUCH LIKE THE PROCESS USED TO DETERMINE THE EXECUTIVE DIRECTOR COMPENSATION.

FORM 990, PART VI. LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

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Form 4562

Department of the Treasury

Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2024

achment quence No. 179

Name(s) shown on return Identifying number UPPER PENINSULA LAND CONSERVANCY 38-3467972 Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1,220,000 Maximum amount (see instructions) 1 2 Total cost of section 179 property placed in service (see instructions) 2 3,050,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 5 (b) Cost (business use only) (a) Description of property (c) Elected cost 6 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 10 Carryover of disallowed deduction from line 13 of your 2023 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 Property subject to section 168(f)(1) election 15 2,223 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2024 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method placed in (g) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs. S/L Residential rental 27.5 yrs. MM S/I property 27.5 yrs MM S/L MM Nonresidential real S/L 39 yrs. property MM Section C-Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L 30-year С 30 yrs. MM S/L 40-year d 40 yrs. MM \$/L Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instructions 2,223 22 For assets shown above and placed in service during the current year, enter the