

Return of Organization Exempt From Income Tax

Form 990

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

2024

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2024 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization THE GARDEN CONSERVANCY, INC. D Employer identification number ** - *** 0145 E Telephone number 845-424-6500 G Gross receipts \$ 9,979,986. H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: GARDENCONSERVANCY.ORG K Form of organization: L Year of formation: 1989 M State of legal domicile: NY

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... TO PRESERVE, SHARE, AND CELEBRATE AMERICA'S GARDENS AND DIVERSE GARDENING TRADITIONS. 2-7 Governance metrics. 8-12 Revenue (Total: 5,620,289). 13-19 Expenses (Total: 5,179,810). 20-22 Net Assets or Fund Balances (Total: 39,710,054).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer: JAMES BRAYTON HALL, PRESIDENT & CEO. Preparer: KERRI N. BOGDA, BAKER TILLY ADVISORY GROUP, LP. Date: 10/09/25. PTIN: P00760402.

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO PRESERVE, SHARE, AND CELEBRATE AMERICA'S GARDENS AND DIVERSE GARDENING TRADITIONS FOR THE EDUCATION AND INSPIRATION OF THE PUBLIC.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 3,676,121. including grants of \$ 257,976.) (Revenue \$ 811,077.) OUR ORGANIZATIONAL PRACTICES FOCUS ON THREE MAIN AREAS: PRESERVATION, EDUCATION, AND ADVOCACY. WE WORK TO RESTORE HISTORIC AMERICAN GARDENS, ASSIST PRIVATE GARDENS IN THEIR DESIRE TO BECOME PUBLIC AMENITIES, PRESENT EDUCATIONAL PROGRAMS FOR ALL AGES RELATING TO THE HISTORY AND CULTURAL SIGNIFICANCE OF GARDENS AND GARDENING, AND OPEN PRIVATE GARDENS ACROSS THE NATION TO THE PUBLIC THROUGH OUR "OPEN DAYS" PROGRAM.

CONTINUED ON SCHEDULE O.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,676,121.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (35), 1b (35), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY, AL, CA, CT, FL, IL, MA, NJ, PA, SC, VA, MO
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES BRAYTON HALL PRESIDENT & CEO	40.00 0.00			X			275,535.	0.	30,005.	
(2) DONNA MORTENSEN CHIEF OPERATING OFFICER	40.00 0.00			X			193,000.	0.	27,809.	
(3) BRIDGET CONNORS DIRECTOR OF DEVELOPMENT	40.00 0.00				X		128,750.	0.	23,432.	
(4) PAMELA GOVERNALE DIRECTOR OF PRESERVATION	40.00 0.00				X		113,750.	0.	22,182.	
(5) CLIFF WEATHERS DIRECTOR OF COMMUNICATIONS	40.00 0.00				X		113,250.	0.	17,254.	
(6) ROBERT BALENTINE CHAIR	15.00 0.00	X		X			0.	0.	0.	
(7) SHARON PRYSE VICE CHAIR	5.00 0.00	X		X			0.	0.	0.	
(8) MRS. COLEMAN P. BURKE SECRETARY	5.00 0.00	X		X			0.	0.	0.	
(9) JEAN-PAUL MONTUPET TREASURER	5.00 0.00	X		X			0.	0.	0.	
(10) BRUCE ADDISON DIRECTOR	2.00 0.00	X					0.	0.	0.	
(11) MARY RANDOLPH BALLINGER DIRECTOR	2.00 0.00	X					0.	0.	0.	
(12) KREIS BEALL DIRECTOR	2.00 0.00	X					0.	0.	0.	
(13) SHELLEY BELLING DIRECTOR	2.00 0.00	X					0.	0.	0.	
(14) ALLISON K. BOURKE DIRECTOR	2.00 0.00	X					0.	0.	0.	
(15) CAMILLE BUTRUS DIRECTOR	2.00 0.00	X					0.	0.	0.	
(16) J. BARCLAY COLLINS DIRECTOR	2.00 0.00	X					0.	0.	0.	
(17) KATE CORDSEN DIRECTOR	2.00 0.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SUSAN DUNLEVY DIRECTOR	2.00 0.00	X						0.	0.	0.
(19) ELIZABETH EVERDELL DIRECTOR	2.00 0.00	X						0.	0.	0.
(20) ALEASE FISHER DIRECTOR	2.00 0.00	X						0.	0.	0.
(21) MISSY FISHER DIRECTOR	2.00 0.00	X						0.	0.	0.
(22) LIONEL GOLDFRANK, III DIRECTOR	2.00 0.00	X						0.	0.	0.
(23) CATHY BARANCIK GRAHAM DIRECTOR	2.00 0.00	X						0.	0.	0.
(24) SUSAN ZISES GREEN DIRECTOR	2.00 0.00	X						0.	0.	0.
(25) KAYE HEAFEY DIRECTOR	2.00 0.00	X						0.	0.	0.
(26) SUZANNE KAYNE DIRECTOR	2.00 0.00	X						0.	0.	0.
1b Subtotal								824,285.	0.	120,682.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								824,285.	0.	120,682.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
JUICYORANGE, LLC, 275 WEST 39TH STREET, 4TH FL., NEW YORK, NY 10018	WEBSITE DEVELOPER & MAINTENANCE	111,798.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	1,691,643.				
	c Fundraising events	1c	63,750.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	1,190,865.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 71,354.				
	h Total. Add lines 1a-1f		2,946,258.				
Program Service Revenue	2 a BENEFITS/SPECIAL EVENTS	Business Code					
		900099	510,735.	510,735.			
	b OPEN DAYS PROGRAMS	900099	300,342.	300,342.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f		811,077.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		846,619.			846,619.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
				5,317,808.			
	b Less: cost or other basis and sales expenses	7b	4,255,350.				
	c Gain or (loss)	7c	1,062,458.				
	d Net gain or (loss)		1,062,458.			1062458.	
8 a Gross income from fundraising events (not including \$ 63,750. of contributions reported on line 1c). See Part IV, line 18	8a		56,100.				
			104,347.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			-48,247.			-48,247.	
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MONITORING FEE	Business Code					
		900099	1,564.			1,564.	
	b PUBLICATIONS	900099	560.			560.	
	c						
	d All other revenue						
e Total. Add lines 11a-11d		2,124.					
12 Total revenue. See instructions		5,620,289.	811,077.	0.	1862954.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	257,976.	257,976.		
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	526,349.	285,255.	134,155.	106,939.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,373,158.	1,062,077.	176,083.	134,998.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	38,650.	31,253.	3,985.	3,412.
9 Other employee benefits	232,674.	182,484.	32,409.	17,781.
10 Payroll taxes	129,574.	92,563.	20,728.	16,283.
11 Fees for services (nonemployees):				
a Management				
b Legal	86,606.	36,753.	5,348.	44,505.
c Accounting	49,740.		49,740.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	100,698.			100,698.
f Investment management fees	177,712.		177,712.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	978,823.	794,352.	138,917.	45,554.
12 Advertising and promotion	11,463.	7,913.	250.	3,300.
13 Office expenses	341,041.	325,948.	6,218.	8,875.
14 Information technology	155,555.	122,788.	32,652.	115.
15 Royalties				
16 Occupancy	28,624.	18,332.	9,771.	521.
17 Travel	276,675.	185,120.	44,816.	46,739.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	11,314.	8,964.	2,350.	
20 Interest	8,445.	6,622.	1,055.	768.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	106,123.	83,211.	13,264.	9,648.
23 Insurance	30,347.	19,865.	8,714.	1,768.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEALS & CATERING	142,930.	81,154.	61,575.	201.
b RENTAL & MAINTENANCE FE	28,585.	14,708.	11,582.	2,295.
c EQUIPMENT	28,195.	22,165.	3,491.	2,539.
d DUES & SUBSCRIPTIONS	21,071.	14,562.	4,231.	2,278.
e All other expenses	37,482.	22,056.	2,481.	12,945.
25 Total functional expenses. Add lines 1 through 24e	5,179,810.	3,676,121.	941,527.	562,162.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	532,831.	1	127,024.
	2 Savings and temporary cash investments	2,670,206.	2	2,996,207.
	3 Pledges and grants receivable, net	506,370.	3	0.
	4 Accounts receivable, net		4	40,000.
	5 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	
	6 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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	219,656.	9	492,261.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 206,951.		
	b Less: accumulated depreciation	10b 191,843.	20,674.	10c 15,108.
	11 Investments - publicly traded securities	33,109,256.	11	36,834,469.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	242,619.	15	142,062.
16 Total assets. Add lines 1 through 15 (must equal line 33)	37,301,612.	16	40,647,131.	
Liabilities	17 Accounts payable and accrued expenses	342,405.	17	309,883.
	18 Grants payable		18	
	19 Deferred revenue	84,525.	19	484,175.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	240,469.	25	143,019.
	26 Total liabilities. Add lines 17 through 25	667,399.	26	937,077.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	20,154,604.	27	23,273,732.
	28 Net assets with donor restrictions	16,479,609.	28	16,436,322.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	36,634,213.	32	39,710,054.
33 Total liabilities and net assets/fund balances	37,301,612.	33	40,647,131.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,620,289.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,179,810.
3	Revenue less expenses. Subtract line 2 from line 1	3	440,479.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	36,634,213.
5	Net unrealized gains (losses) on investments	5	2,635,362.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	39,710,054.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	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		

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.)

Section A. Public Support

Calendar 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.")	4870638.	3089955.	2625371.	4201567.	2946258.	17733789.
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	4870638.	3089955.	2625371.	4201567.	2946258.	17733789.
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)						1245288.
6 Public support. Subtract line 5 from line 4.						16488501.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	4870638.	3089955.	2625371.	4201567.	2946258.	17733789.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	504,341.	682,787.	635,908.	757,144.	846,619.	3426799.
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.)	4,994.	26,406.	44,221.	40,763.	58,224.	174,608.
11 Total support. Add lines 7 through 10						21335196.
12 Gross receipts from related activities, etc. (see instructions)					12	3,523,183.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	77.28	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	77.76	%
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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.)

Section A. Public Support

Calendar 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.")						
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						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
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 supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details 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 is responsive (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

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	Total of lines 3a through 3e		
g	Applied to under distributions 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.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	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:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2020 AMOUNT: \$ 4,994.
2021 AMOUNT: \$ 1,906.
2022 AMOUNT: \$ 512.

NON-CHARITABLE FUNDRAISING RECEIPTS

2021 AMOUNT: \$ 24,500.
2022 AMOUNT: \$ 43,709.
2023 AMOUNT: \$ 38,200.
2024 AMOUNT: \$ 56,100.

MONITORING FEE

2023 AMOUNT: \$ 1,996.
2024 AMOUNT: \$ 1,564.

PUBLICATIONS

2023 AMOUNT: \$ 567.
2024 AMOUNT: \$ 560.

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury 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

THE GARDEN CONSERVANCY, INC.

** - *** 0145

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

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization THE GARDEN CONSERVANCY, INC.	Employer identification number ** - *** 0145
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 157,795.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE GARDEN CONSERVANCY, INC.	Employer identification number ** - *** 0145
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization THE GARDEN CONSERVANCY, INC.	Employer identification number ** - *** 0145
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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

THE GARDEN CONSERVANCY, INC.

Employer identification number

**** - *** 0145**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply):

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	8
b Total acreage restricted by conservation easements	160.46
c Number of conservation easements on a certified historic structure included on line 2a	3
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 1

4 Number of states where property subject to conservation easement is located 4

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 65

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 13,726.

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(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, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	33,399,685.	28,258,251.	33,943,355.	29,519,027.	24,276,768.
b Contributions	491,653.	905,489.	146,187.	901,390.	2,752,280.
c Net investment earnings, gains, and losses	4,435,496.	5,300,723.	-5,285,073.	4,500,159.	3,412,638.
d Grants or scholarships					
e Other expenditures for facilities and programs	969,494.	909,022.	546,218.	977,221.	922,659.
f Administrative expenses	177,712.	155,756.			
g End of year balance	37,179,628.	33,399,685.	28,258,251.	33,943,355.	29,519,027.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 58.3800 %
 - b** Permanent endowment 41.6200 %
 - c** Term endowment .0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----------|
| (i) Unrelated organizations? | | X |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		92,401.	78,207.	14,194.
d Equipment		114,550.	113,636.	914.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				15,108.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY - OFFICE SPACE	138,540.
(3) LEASE LIABILITY - EQUIPMENT	4,479.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	143,019.

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 ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	8,356,998.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	2,635,362.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-3,000.
e	Add lines 2a through 2d	2e	2,632,362.
3	Subtract line 2e from line 1	3	5,724,636.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-104,347.
c	Add lines 4a and 4b	4c	-104,347.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	5,620,289.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,281,157.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	104,347.
e	Add lines 2a through 2d	2e	104,347.
3	Subtract line 2e from line 1	3	5,176,810.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	3,000.
c	Add lines 4a and 4b	4c	3,000.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,179,810.

Part XIII Supplemental Information

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

PART II, LINE 3:

- CHANGED GARDEN CONSERVANCY ADDRESS AND CONTACT (PAGE 1, TOP LEFT CORNER)
- CHANGED DOCUMENT TITLE TO AMENDED AND RESTATED CONSERVATION EASEMENT (PAGE 1)
- CHANGED GRANTOR NAME TO REFLECT CURRENT OWNER ON TITLE (PAGE 1)
- INSERTED CLAUSE AFTER THE DEFINITION OF "PROPERTY" IN RECITAL K TO EXPLAIN THAT IT IS COMPRISED OF 10 SEPARATE LOTS PER THE RECORDED CERTIFICATE OF COMPLIANCE DOCUMENT ISSUED BY THE TOWN OF WOODSIDE.
- REVISED RECITAL L TO REFLECT THE HISTORY OF THE ORIGINAL 2004 CONSERVATION EASEMENT
- REVISED RECITAL M TO CLARIFY THAT THE ORIGINAL DECEMBER 2003 BASELINE DOCUMENTATION IS TO CONTINUE TO SERVE AS THE BASELINE FOR MONITORING COMPLIANCE WITH THE TERMS OF THE AMENDED AND RESTATED CONSERVATION EASEMENT.
- INSERTED NEW SECTION 1 TO TERMINATE THE ORIGINAL CONSERVATION EASEMENT AND SUPERSEDE IT WITH THE AMENDED AND RESTATED CONSERVATION EASEMENT.
- REVISED SECTION 5(C) TO EXPRESSLY STATE THAT SELLING THE LOTS OFF INDIVIDUALLY IS ALLOWED AND DOES NOT CONSTITUTE A PROHIBITED DE FACTO SUBDIVISION.
- REVISED SECTION 5(C) TO EXPRESSLY ALLOW FOR RELOCATION OF A RESIDENCE TO ANOTHER LOCATION WITHIN THE PROPERTY PROVIDED THE RELOCATION DOES NOT IMPAIR OR INTERFERE WITH THE CONSERVATION VALUES OF THE PROPERTY AND IS OTHERWISE CONSISTENT WITH THE AMENDED AND RESTATED CONSERVATION EASEMENT.
- REVISED SECTION 10 TO SPECIFICALLY REQUIRE GRANTOR TO GIVE GRANTEE

Part XIII Supplemental Information (continued)

PRIOR NOTICE BEFORE REMOVING ANY TREES OR MAKING SIGNIFICANT ALTERATIONS TO EXISTING STRUCTURES TO GIVE GRANTEE THE OPPORTUNITY TO DETERMINE AND NOTIFY GRANTEE WHETHER THE PROPOSED ACTIVITIES ARE PERMITTED, DESIGNED AND CARRIED OUT CONSISTENT WITH THE TERMS OF THE AMENDED AND RESTATED EASEMENT WITHIN 30 DAYS OF RECEIVING SUCH NOTICE.

- REVISED SECTION 9 TO: (1) CLARIFY THAT THE ENTIRE LOT UPON WHICH THE HISTORICAL DESIGN CORE IS LOCATED MUST BE MADE AVAILABLE TO THE PUBLIC UPON GRANTEE'S REQUEST (NOT JUST THE GARDENS WHICH WAS AN UNDEFINED CAPITALIZED TERM); (2) REDUCE AVAILABILITY FROM TWICE TO ONCE PER YEAR; (3) CLARIFY THAT PUBLIC AVAILABILITY IS TO BE MADE ONLY UPON GRANTEE'S REQUEST AND IN GRANTEE'S DISCRETION; AND (4) REMOVE VERBIAGE ABOUT GRANTOR'S ABILITY TO REASONABLY RESTRICT PUBLIC ACCESS AND SUBJECT ENTRANCE TO A FEE.

- INSERTED NEW SECTION 10 TO AFFIRMATIVELY REQUIRE THE GRANTOR TO MAINTAIN THE LOT COMPRISING THE HISTORICAL DESIGN CORE TO THE 2003 BASELINE STANDARD. THIS AFFIRMATIVE MAINTENANCE OBLIGATION WAS ENTIRELY MISSING IN THE ORIGINAL 2004 CONSERVATION EASEMENT.

PART II, LINE 9:

CONSERVATION EASEMENTS ARE VALUED AT \$100 EACH.

PART V, LINE 4:

THE CONSERVANCY ESTABLISHED A GENERAL ENDOWMENT FUND TO PROVIDE A STABLE SOURCE OF UNRESTRICTED REVENUES, IN PERPETUITY, FOR THE CONSERVANCY'S PROGRAMS AND OPERATIONS.

PART X, LINE 2:

THE CONSERVANCY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. NO PROVISION FOR FEDERAL OR STATE INCOME TAXES OR FOR TAXES ON UNRELATED BUSINESS INCOME HAS BEEN RECORDED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE NETTED WITH REVENUE ON FINANCIALS -3,000.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES -104,347.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES 104,347.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE NETTED WITH REVENUE ON FINANCIALS 3,000.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		NY HOLIDAY DINNER (event type)	SAN FRANCISCO FA (event type)	NONE (total number)	
Revenue	1	Gross receipts	60,850.	59,000.	119,850.
	2	Less: Contributions	31,450.	32,300.	63,750.
	3	Gross income (line 1 minus line 2)	29,400.	26,700.	56,100.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	3,500.	5,000.	8,500.
	7	Food and beverages	26,393.	21,775.	48,168.
	8	Entertainment			
	9	Other direct expenses	18,824.	28,855.	47,679.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			104,347.
11	Net income summary. Subtract line 10 from line 3, column (d)			-48,247.	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter the name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: CREATIVE FUNDRAISING ADVISORS

(I) ADDRESS OF FUNDRAISER:

1041 GRAND AVENUE, SUITE 225, ST. PAUL, MN 55105

PART I, LINE 2B, COLUMN (V):

CAPITAL CAMPAIGN AND A FEASIBILITY STUDY.

Part IV Supplemental Information *(continued)*

Lined area for supplemental information.

**SCHEDULE I
(Form 990)**

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

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

THE GARDEN CONSERVANCY, INC.

Employer identification number
** - ** * 0145

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE ARCHITECTURAL LEAGUE OF NEW YORK - 594 BROADWAY, NO. 607 - NEW YORK, NY 10012	** - ***1027	501 (C) (3)	10,000.	0.			GENERAL OPERATING SUPPORT FOR THE ANN NORTON SCULPTURE GARDEN, WEST PALM BEACH, FL
ATLANTA HISTORICAL SOCIETY 103 W. PACES FERRY ROAD NW ATLANTA, GA 30305-1303	** - ***6162	501 (C) (3)	10,000.	0.			GENERAL OPERATING SUPPORT FOR THE CHEROKEE GARDEN LIBRARY OF ATLANTA HISTORY CENTER
BARD COLLEGE 30 CAMPUS RD. ANNANDALE-ON-HUDSON, NY 12504	** - ***3034	501 (C) (3)	21,885.	0.			RESTORATION OF BLITHEWOOD GARDEN
BOSCOBEL RESTORATION, INC. 1601 ROUTE 9D GARRISON, NY 10524	** - ***8845	501 (C) (3)	10,000.	0.			GENERAL OPERATING SUPPORT OF BOSCOBEL HOUSE & GARDEN
CHARLESTON PARKS CONSERVANCY PO BOX 31187 CHARLESTON, SC 29417	** - ***5561	501 (C) (3)	7,500.	0.			GENERAL OPERATING SUPPORT
ECOLOGICAL CITIZENS PROJECTS, INC. 69 SOUTH MOUNTAIN PASS GARRISON, NY 10524	** - ***3289	501 (C) (3)	7,500.	0.			GENERAL OPERATING SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **12.**
- 3** Enter total number of other organizations listed in the line 1 table **1.**

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

Schedule I (Form 990) (Rev. 12-2024)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF GRANDMOTHERS' GARDEN INC. - PO BOX 1432 - WESTFIELD, MA 01086-1432	**-***7287	501 (C) (3)	10,000.	0.			GENERAL OPERATING SUPPORT
FRIENDS OF THE ROGERSON CLEMATIS COLLECTION - PO BOX 734 - LAKE OSWEGO, OR 97034	**-***0690	501 (C) (3)	7,500.	0.			GENERAL OPERATING SUPPORT
MCKEE BOTANICAL GARDEN, INC. 350 US HIGHWAY 1 VERO BEACH, FL 32962	**-***9895	501 (C) (3)	45,000.	0.			GENERAL OPERATING SUPPORT
OAKLAND MUSEUM OF CALIFORNIA 1000 OAK ST. OAKLAND, CA 94607	**-***8892	501 (C) (3)	20,000.	0.			TO SUPPORT THE GARDEN RELATED ASPECTS OF THE ALL IN: THE CAMPAIGN OF OMCA
PECKERWOOD GARDENS CONSERVATION FOUNDATION, INC. (DBA THE JOHN FAIREY GARDEN) - 20559 FM 359 ROAD - HEMPSTEAD, TX 77445	**-***7635	501 (C) (3)	12,000.	0.			STEWARDED EDEN AND STORM CLEANUP
QUIET CORNER GARDEN CLUB, FEDERATED GARDEN CLUBS OF CONNECTICUT, INC. - PO BOX 1004 - WOODSTOCK, CT 06281	**-***5662	501 (C) (3)	10,000.	0.			GENERAL OPERATING SUPPORT
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY - 1111 FRANKLIN ST, STE 10 - OAKLAND, CA 94607	**-***2123						GENERAL OPERATING SUPPORT FOR ENVIRONMENTAL DESIGN ARCHIVES
URBA WOODLANDS COMMUNITY GARDENS, INC., (DBA THE LOTUS GARDEN) - PO BOX 134 CATHEDRAL STATION - NEW YORK, NY 10025	**-***7073	501 (C) (3)	10,000.	0.			GENERAL OPERATING SUPPORT

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:
THE GARDEN CONSERVANCY MAINTAINS COMMUNICATION WITH THE GRANTEE ORGANIZATIONS THROUGHOUT THE YEAR TO ENSURE THAT THE GRANTS ARE BEING USED IN ACCORDANCE WITH THE GRANT AGREEMENTS/CONTRACTS.

**SCHEDULE J
(Form 990)**

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

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
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

THE GARDEN CONSERVANCY, INC.

Employer identification number

****-***0145**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

Schedule J (Form 990) (Rev. 12-2024)

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

THE GARDEN CONSERVANCY, INC.

Employer identification number

****-***0145**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	5	71,354.	NYSE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **0**

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2024

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

THE GARDEN CONSERVANCY, INC.

Employer identification number

**** - ***0145**

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

IN 2024, THE GARDEN CONSERVANCY CONTINUED TO STRENGTHEN AND EXPAND ITS PROGRAMS THANKS TO THE GENEROSITY AND ENGAGEMENT OF A GROWING COMMUNITY OF MEMBERS, DONORS, AND EVENT PARTICIPANTS.

DURING THE 2024 SEASON, OPEN DAYS WELCOMED MORE THAN 37,000 VISITORS TO 339 GARDEN-VISITING OPPORTUNITIES AND PRESENTED SIXTEEN VIRTUAL PROGRAMS TO NEARLY 6,000 PARTICIPANTS. THE NATIONAL SPEAKING TOUR FEATURED EDMUND HOLLANDER WITH PARTNERS OF HOLLANDER LANDSCAPE ARCHITECTS, WHO DISCUSSED THE EVOLVING ROLE OF OUTDOOR SPACES IN OUR LIVES TO AUDIENCES IN SEVERAL U.S. CITIES. THE CONSERVANCY ALSO HOSTED THE FRANK LLOYD WRIGHT GARDEN SYMPOSIUM HIGHLIGHTING HIS RARELY EXPLORED SOUTHERN CALIFORNIA WORK AND LEGACY.

OUR GARDEN FUTURES GRANTS PROGRAM (INCLUDING THE PAGE DICKEY GRANT FOR AMERICAN GARDENS AND THE JEAN AND JOHN GREENE PRIZE FOR EXCELLENCE IN THE FIELD OF AMERICAN GARDENING) SUPPORTED TWENTY-SIX NON-PROFIT ORGANIZATIONS MAKING A DIFFERENCE IN THEIR LOCAL COMMUNITIES THROUGH GARDEN-BASED PROGRAMMING AND THE STUDY OF GARDEN HISTORY.

OUR PRESERVATION PROGRAM CONTINUED TO OFFER GUIDANCE AND ASSISTANCE TO THOSE SEEKING RESOURCES TO PRESERVE OR RESTORE GARDENS; WHILE ALSO ENSURING THE LONGEVITY OF THE EIGHT GARDENS THE GARDEN CONSERVANCY PROTECTS THROUGH CONSERVATION EASEMENTS. THROUGH THE SUZANNE AND FREDERIC RHEINSTEIN FUND FOR DOCUMENTARY FILMS, WE CONTINUED THE FILM DOCUMENTATION OF THE ANNE SPENCER HOUSE AND GARDEN MUSEUM IN LYNCHBURG, VA, AND HELD OUR FIRST DOCUMENTARY FILM PREMIERE IN BIRMINGHAM, AL, CELEBRATING LOUISE AGEE WRINKLE'S INSPIRATIONAL SOUTHERN WOODLAND SANCTUARY.

FORM 990, PART VI, SECTION A, LINE 4:

THE NUMBER OF BOARD MEMBERS WAS INCREASED FROM 34 TO 40 IN THE BYLAWS.

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

THE PUBLIC IS WELCOME TO BECOME MEMBERS. THERE ARE DIFFERENT LEVELS OF MEMBERSHIP, EACH OF WHICH HAS A VARIETY OF COMPLIMENTARY AND DISCOUNTED ADMISSIONS TO OPEN DAYS AND VIRTUAL TALKS, INVITATIONS TO EVENTS AND SPECIAL PROGRAMS, AND SUBSCRIPTIONS TO PRINT AND ELECTRONIC NEWSLETTERS.

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

MANAGEMENT REVIEWS THE FORM 990 AND ALL SCHEDULES FOR ACCURACY. ONCE MANAGEMENT COMPLETES ITS REVIEW, THE FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS BEFORE THE RETURN IS FILED WITH THE INTERNAL REVENUE SERVICE.

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

PRIOR TO THE ANNUAL MARCH BOARD MEETING, BOARD MEMBERS RECEIVE THE CONFLICT OF INTEREST QUESTIONNAIRE. THE CHIEF OF STAFF AND BOARD LIAISON ARE RESPONSIBLE FOR COLLECTING COMPLETED QUESTIONNAIRES. PER THE ORGANIZATION'S BYLAWS, THE AUDIT, FINANCE AND INVESTMENTS COMMITTEE IS CHARGED WITH COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY.

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

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization THE GARDEN CONSERVANCY, INC.	Employer identification number ** - ***0145
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BOARD LEADERSHIP MEETS ANNUALLY TO REVIEW AND APPROVE COMPENSATION OF THE PRESIDENT. THE ORGANIZATION ENGAGED A FIRM SPECIALIZING IN COMPENSATION THAT PERFORMED A STUDY THAT WAS COMPLETED DURING THE FISCAL YEAR AND SHARED WITH THE BOARD AND APPROPRIATE MANAGEMENT PERSONNEL.

THE PRESIDENT MEETS ANNUALLY TO REVIEW AND APPROVE COMPENSATION OF SENIOR MANAGEMENT.

FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON WRITTEN REQUEST TO THE ORGANIZATION. FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROFESSIONAL SERVICES:	
PROGRAM SERVICE EXPENSES	740,226.
MANAGEMENT AND GENERAL EXPENSES	138,017.
FUNDRAISING EXPENSES	45,554.
TOTAL EXPENSES	923,797.

SPEAKER FEES AND TRAVEL:	
PROGRAM SERVICE EXPENSES	14,297.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	14,297.

ADMISSION FEES:	
PROGRAM SERVICE EXPENSES	38,479.
MANAGEMENT AND GENERAL EXPENSES	900.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	39,379.

OUTSIDE SERVICES:	
PROGRAM SERVICE EXPENSES	1,350.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,350.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	978,823.