Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2021

Open to Public Inspection

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

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

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

Α	For the	2021 cal	<u>lendar year, or tax year beginnin</u>	g	, and er	<u>nding</u>			
В	Check if a	applicable:	C Name of organization Granby	Land Trust Inc		D Em	ployer identif	ication number	
	Address o	change	Doing business as						
_		•	Number and street (or P.O. box if ma	il is not delivered to street address)	Room/suite	23-724	3316		
	Name cha	ange	PO Box 23			E Tele	phone numbe	er	
\Box	Initial retu	rn	City or town	State	ZIP code	(222)			
			Granby	СТ	06035	(860) 6	353-7441		
!	Final return/	terminated/	•	oreign province/state/county	Foreign postal	code			
\neg	Amended	return	3 ,	3 1	3 1		ss receipts \$		467,361
		ı				<u>=</u>			
	Applicatio	n pending	F Name and address of principal office			H(a) Is this a group	return for subord	dinates? Yes	X No
			Kathleen Lombardo 61 Day Str	eet, Granby, CT 06035		H(b) Are all subo	rdinates includ	ded? Yes	No No
1	Tax-exen	npt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If "No," atta	ch a list. See ii	nstructions	
				, . ()	,	Way 0		_	
			w.granbylandtrust.org			H(c) Group exem	puon number		
K	Form of c	organization	: X Corporation Trust	Association	L Yea	r of formation: 1	972 M S	State of legal domicile	e: CT
:	art I	Sui	mmary		•				
	1		escribe the organization's missi	on or most significant activitie	s: Gran	by Land Trust	achieves t	he lona term	
Se			on of land by seeking, holding, n						
ā			unicates its objectives and regu	·					
& Governance									
Š	2		nis box 🕨 🔛 if the organization				1 1	net assets.	
(Ú)	3		of voting members of the gover						17
ŝ	4		of independent voting members						17
ij	5	Total nu	mber of individuals employed in	calendar year 2021 (Part V,	line 2a) . .		. 5		0
Activities	6	Total nu	mber of volunteers (estimate if r	necessary)			. 6		95
Ac	7a	Total un	related business revenue from I	Part VIII, column (C), line 12.			. 7a		0
	b	Net unre	elated business taxable income	from Form 990-T, Part I, line	11		. 7b		
						Prior Y		Current Ye	ar
4	8	Contribu	itions and grants (Part VIII, line	1h)			1,275,191		275,206
Revenue	9		n service revenue (Part VIII, line				0	·	0
Ş.	10		ent income (Part VIII, column (A				194,334		192,155
æ	11						194,334		192,133
			evenue (Part VIII, column (A), lin				407.004		
	12		enue—add lines 8 through 11 (mu				1,469,525	•	467,361
	13		and similar amounts paid (Part I)				0		0
	14		paid to or for members (Part IX				0		0
es	15		other compensation, employee be		, ,		0		0
Expenses	16a		onal fundraising fees (Part IX, c				0		0
ĝ	b	Total fur	ndraising expenses (Part IX, col	ımn (D), line 25) ▶	989				
Ш	17	Other ex	rpenses (Part IX, column (A), lin	es 11a-11d, 11f-24e)			131,493		105,571
	18	Total ex	penses. Add lines 13-17 (must	equal Part IX, column (A), lin	e 25)		131,493		105,571
	19	Revenue	e less expenses. Subtract line 1	8 from line 12			1,338,032	,	361,790
Net Assets or Fund Balances	1					Beginning of C		End of Yea	
ets	20	Total as	sets (Part X, line 16).....		1	1	3,518,684	14.:	216,904
Ass HBa	21		bilities (Part X, line 26)			<u> </u>	0	,	5,637
Net	22		ets or fund balances. Subtract lin	ne 21 from line 20		1	3,518,684	14	211,267
	art II		nature Block	10 2 1 110111 11110 20		•	0,010,001	1-1,	211,201
			y, I declare that I have examined this retu	rn including accompanying schedules	and statements	and to the best of	my knowledge	Δ	
			ect, and complete. Declaration of preparer					C	
			,						
Siç	gn		Signature of officer				ate		
He	re		•		Т		ale		
			Kathleen Lombardo		Treas	surer			
		<u> </u>	Type or print name and title	15		15.		··	
_		Print	t/Type preparer's name	Preparer's signature		Date	Check	PTIN	
Pa		Fric	Rowley, CPA	COPY		6/14/2022			00
	eparer							· ·	-
Us	e Only	' 1	's name ► Rowley & Associate			Firm's E	IN ► 02-05		
		Firm	i's address ▶ 46 N. State Street, 0	Concord, NH 03301		Phone r	ю. (603)	228-5400	
N 4 -	v the IR	S discus	s this return with the preparer sl	nown above? See instructions	S			. X Yes	No

Form 9	990 (2021) Granby Land Trust Ind	С	23-7243316	Page 2
Pa		m Service Accomplishments		
		contains a response or note to any line in th	s Part III............	
1		nission: Trust (GLT) works to preserve the natural heritag scenic and historic vistas, open space corridors,	e of the	
	wildlife habitat, ecologically sensitive			
2	Did the ergonization undertake any	cignificant program continue during the year which	ware not listed on	
2		significant program services during the year which		X No
3	Did the organization cease conducti	ing, or make significant changes in how it conduct		
	services?	Schodulo O	· · · · · · Yes	X No
4	Describe the organization's program expenses. Section 501(c)(3) and 50	n service accomplishments for each of its three land of the state of the arms of the arms of the state of the		
4a	associated natural resources throug the GLT. These activities are condu- natural resource inventories, site an site visits on lands and easements.	STEWARDSHIP - This program involves the protein stewardship and maintenance of land and ease ucted by volunteers and professionals and included boundary maintenance, habitat management and an action of the state o	ments owned by conducting ad monitoring	
4b	PROPERTY ACQUISITION - This p by purchase or donation, or by cons determine appropriate priority corrid	s \$ 18,268 including grants of \$ program includes the permanent protection of progressivation easement. The GLT conducts long term lors in the town, and concentrates its acquisition educted by volunteers and professionals and includion of new land acquisition projects.	erty acquired either planning to fforts in	
		70		
		•••		
		<u> </u>		
4c	PUBLIC OUTREACH - This program	s \$ 23,538 including grants of \$ m is focused on promoting public awareness in the d conservation and activities of the Granby Land Town.	community about the rust to	
4d	Other program services (Describe o	•	venue \$ 0)	

73,540

4e Total program service expenses

		7243316	F	age 3
Part	V Checklist of Required Schedules		1	ı
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A	1	X	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	. 2	 ^	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	. 3		^
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	· · 		<u> </u>
•	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	. 5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			Ť
-	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		Х
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		Х
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		Х
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	Х	
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			.,
لہ ما	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
u	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.	114	Х	
^	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> .	. 11d		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	. ITE		_^
•	the organization's separate or consolidated infancial statements for the tax year include a footbode that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	. 11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	· · · ·		<u> </u>
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes,"</i>		Ϊ́	1
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			Х
14a				Х
b	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		Х
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		Х
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	<u> </u>	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
4-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	-	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		I	I

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?..
 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.....

19

20a

20b

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Par	t IV Checklist of Required Schedules (continued)				
		_	١	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	· -2	22	-	Χ
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	`			<u> </u>
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines				
	24b through 24d and complete Schedule K. If "No," go to line 25a	. 2	4a		Χ
b		. 2	4b		
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?		4c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 2	4d	-	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part F	,	5a		Χ
b		. 2	Ja		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or				
	990-EZ? If "Yes," complete Schedule L, Part I	. 2	5b		Χ
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	. 2	26		Χ
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.		27		Χ
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,		-/		Â
	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		8a		Χ
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	<u>2</u>	8b	Х	
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If		اء		v
20	"Yes," complete Schedule L, Part IV		8c 29	Χ	Χ
29 30	Did the organization receive more than \$25,000 in non-cash contributions? In res, complete schedule in	·	29	^	
30	conservation contributions? If "Yes," complete Schedule M		30	х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .		31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"				
	complete Schedule N, Part II	. 3	32		Χ
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	. 3	33		Χ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	.	,		v
35a	III, or IV, and Part V, line 1		34 5a	-	X
b		.	Ja		
-	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 3	5b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related				
	organization? If "Yes," complete Schedule R, Part V, line 2	. 3	36		Χ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	· · <u> 3</u>	37		Χ
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	.		Ţ	
Par	19? Note: All Form 990 filers are required to complete Schedule O	3	38	Χ	
r al	Check if Schedule O contains a response or note to any line in this Part V			. [\neg
	, , , , , , , , , , , , , , , , , , , ,		١	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	10			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?	1 1	1c l	X	

If "Yes," complete Form 6069.

Form 990 (2021) Granby Land Trust Inc 23-7243316 Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) No Part V Yes Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file*. See instructions. Did the organization have unrelated business gross income of \$1,000 or more during the year? Χ 3a За If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, 4a a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . Χ 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Χ 5a Χ Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?. 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c С Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Χ If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . g 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?. h 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the Sponsoring organizations maintaining donor advised funds. 9 а Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter а Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. h Enter the amount of reserves the organization is required to maintain by the states in which 13c С Χ 14a 14a 14b b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Χ 15 If "Yes," see the instructions and file Form 4720, Schedule N. 16 Χ 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? Χ

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Sect	ion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 17									
	If there are material differences in voting rights among members of the governing body, or									
	if the governing body delegated broad authority to an executive committee or similar									
	committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with									
	any other officer, director, trustee, or key employee?	2		Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct									
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Χ						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	<u>5</u>	Х	X						
6	<u> </u>									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	l _	\ \							
	one or more members of the governing body?	7a	Χ	<u> </u>						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l		\ <u>\</u>						
•	stockholders, or persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during									
_	the year by the following: The governing body?	8a	Χ							
a 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	00		 						
3	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х						
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	_)							
0000	isti Bi i didice (Tine decisi B requeste information about peneree net required by the internal revenue c	<i>,</i> 0 a 0 .	Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,									
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"									
	describe on Schedule O how this was done	12c	Χ							
13	Did the organization have a written whistleblower policy?	13	Χ							
14	Did the organization have a written document retention and destruction policy?	14	Χ							
15	Did the process for determining compensation of the following persons include a review and approval by									
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
a	The organization's CEO, Executive Director, or top management official.	15a		X						
b	Other officers or key employees of the organization	15b		Х						
160	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement									
16a	with a taxable entity during the year?	16a		V						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	Iba		Х						
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard									
	the organization's exempt status with respect to such arrangements?	16b								
Sect	ion C. Disclosure	100		<u> </u>						
17	List the states with which a copy of this Form 990 is required to be filed ► CT									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	501(c)								
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	. ,								
	Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	icy,								
	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	•								
	David W. Russell, Controller (860) 653-7441									
	33 Spring Glen Drive, Granby, CT 06035									

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

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

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

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

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

X Check this box if neither the organization 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 dotted line)	box,	unles er and	s pe	ition more rson irecto	than of 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) Richard J Orluk Jr President	0.00	Х		Х						
(2) Kathleen Lombardo	3.00			^						
Treasurer	0.00			Χ						
(3) David Russell	10.00			, ·						
Controller	0.00	Х		Х						
(4) Leslie Judge	2.00									
Secretary	0.00	Х		Х						
(5) David A Schupp	2.00									,
Board member	0.00	Х								
(6) Daniel P Brown Jr	6.00									
Board member	0.00	Х								
(7) Mark R Wetzel	4.00									
Board member	0.00	Χ								
(8) David Emery	10.00									
Vice President	0.00	Χ		Χ						
(9) Paula Johnson	2.00									
Board member	0.00	Χ								
(10) Eric Lukingbeal	3.00									
Board member	0.00	Х								
(11) Lowell Kahn	3.00									
Board member	0.00	Х								
(12) Shirley Murtha	2.00									
Board member	0.00	Х								
(13) Jennifer Plourde	2.00									
Board member	0.00	Х								
(14) Tim Heinze	2.00	,,								
Board member	0.00	Χ								

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P	Section A. Officers, Directors, Tru	ıstees, Key Em _l	oloye	ees,	and	iH t	ghes	t Co	ompensated En	<u>iployees (</u>	contin	ued)		
	(A) Name and title	(B) Average hours	box,	unle: er an	Pos neck ss pe d a d	rson	than o	an ee)	(D) Reportable compensation from the	(E) Reporta compens from rela	ation		(F) ated amo	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organization 1099-MI 1099-NE	ns (W-2/ ISC/	orga	npensation from the nization a organiza	ınd
	Karen Dowd	2.00								1				
	d member John Weeks	0.00 2.00	Х							$\overline{}$				
	Jonn vveeks d member	0.00	Х											
	Stacy Kroninger	2.00	\ \											
(18)	d member	0.00	Х											
(19)														
(20)									D					
(21)				1										
(22)			*											
(23)			Y											
(24)														
(25)		· •												
1b	Subtotal		<u> </u>	١.	<u>.</u>	<u> </u>		>	0		0			0
C	Total from continuation sheets to Part VII, So							>	0		0			0
<u>d</u>	Total (add lines 1b and 1c)							ved	, , ,	0,000 of	0			0
	reportable compensation from the organization	J ►											1	0
3	Did the organization list any former officer, dire	ector, trustee, ke	y em	ploy	ee,	or h	nighes	st co	ompensated		ļ		Yes	NO
	employee on line 1a? If "Yes," complete Sched	ule J for such in	dividu	ual.	•							3		Χ
4	For any individual listed on line 1a, is the sum of the organization and related organizations greater	•							•	h				
	individual						•					4		Χ
5	Did any person listed on line 1a receive or accr	•			-			_						
Sec	for services rendered to the organization? If "Yo tion B. Independent Contractors	es," complete Sc	hedu	ıle J	for	suc	h per	son	1		<u></u>	5		Χ
1	Complete this table for your five highest compe													
	compensation from the organization. Report co	mpensation for t	he ca	alen	dar	yea	r end	ing	with or within the	e organiza	tion's t	ax ye (c		
	Name and business add	ress							Description of ser	vices	С	Compen		
														0
														0
														0
2	Total number of independent contractors (include	ding but not limit	ed to	tho	se l	iste	d abo	ve)	who received					0
	more than \$100,000 of compensation from the	organization 🕨	<u> </u>					0						

Part VIII Statement of Revenue Check if Schedule O contain

		Check if Schedule O contains a respons	e or i	note to any line in	this Part VIII			🔲
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
σ ₍₀	1a	Federated campaigns	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	41,792				
يق ك	c	Fundraising events	1c	0				
ts, An	d	Related organizations	1d	0				
ar	u		1e	0				
S, E	e	Government grants (contributions)	ie	U				
io Si	T	All other contributions, gifts, grants, and		202 444				
je je		similar amounts not included above	1f	233,414				
호텔	g	Noncash contributions included in						
9 P		lines 1a-1f	1g	\$ 116,000				
Ow	h	Total. Add lines 1a–1f		▶	275,206			
				Business Code				
e	2a		l		0			
ξ	b				0			
Ser	C				0			
ž į	d				0			
e a	u							
Program Service Revenue	e	All d			0			
፭	T	All other program service revenue			0			
	g	Total. Add lines 2a–2f			0			
	3	Investment income (including dividends, into						
		other similar amounts)			192,155			192,155
	4	Income from investment of tax-exempt bond	d pro	ceeds 🗪	0			
	5	Royalties			0			
		(i) Real		(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses . 6b						
	С	Rental income or (loss) 6c	0	0				
	d	Net rental income or (loss)			0			
	7a		es .	(ii) Other				
	, u	sales of assets	-	()				
				0				
a)		other than inventory	0	0				
Revenue	b	Less: cost or other basis						
Ş.		and sales expenses 7b	0	0				
æ	С	Gain or (loss)	0	0				
e	d	Net gain or (loss)	<u></u>		0			
oth	8a	Gross income from fundraising						
0		events (not including \$ 0						
		of contributions reported on line 1c).						
		See Part IV, line 18	8a	0				
	b	Less: direct expenses	8b	0				
	С	Net income or (loss) from fundraising events	s	•	0			
		Gross income from gaming activities.	Ī					
	Ju	See Part IV, line 19	9a	0				
	L		9b	0				
		Net income or (loss) from gaming activities			0			
	10a	Gross sales of inventory, less						
		_	10a	0				
	b	Less: cost of goods sold	10b	0				
	С	Net income or (loss) from sales of inventory	<u> </u>		0			
S				Business Code				
e or	11a		ſ		0			
nu	b				0			
cellaneo Revenue	C				0			
Miscellaneous Revenue	d	All other revenue			0			
Ξ̈́	-	Total. Add lines 11a–11d	L	•	0			
	12	Total revenue. See instructions			467,361	0	0	192,155
		i otal levellue. Occ ilibiliutiitiib		<u></u> -	100, 10 1	. 0	. 0	132,130

23-7243316 Page **10**

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 contain ote to any line in this Part IX

	Check if Schedule O contains a response or note	to any line in this Pa	ап іх		
	not include amounts reported on lines 6b, 7b, 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		'	ů i	·
	domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0		0	
6	Compensation not included above to disqualified			,	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (nonemployees):	4 4			
a	Management	0			
b	Legal	716	491	225	0
C	Accounting	7,064	0	7,064	0
d	Lobbying	0		.,	
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	7,750	7,750	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	3,942	1,304	2,638	0
14	Information technology	4,142	4,142	0	0
15	Royalties	0	,		
16	Occupancy	2,400	0	2,400	0
17	Travel	0		,	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	4,400	4,400	0	0
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,279	1,279	0	0
23	Insurance	7,903	0	7,903	
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.)				
а	Property stewardship, maintenance and trails	28,307	28,307	0	0
b	Membership development	10,083	9,094	0	989
С	Consulting services	9,084	0	9,084	0
d	Land project expenses	10,027	10,027	0	0
е	All other expenses Miscellaneous expense	8,474	6,746	1,728	0
25	Total functional expenses. Add lines 1 through 24e	105,571	73,540	31,042	989
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)				

23-7243316

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X .			
			(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	36,984	1	17,410
	2	Savings and temporary cash investments	60,152	2	60,185
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	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	0	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)	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use	0	8	
∢	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 8,984,544			
	b	Less: accumulated depreciation	8,867,510	10c	8,982,231
	11	Investments—publicly traded securities	3,278,127	11	3,746,923
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	1,275,911	15	1,410,155
	16	Total assets. Add lines 1 through 15 (must equal line 33)	13,518,684	16	14,216,904
	17	Accounts payable and accrued expenses	0	17	5,637
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons	0	22	
⊐	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	5,637
S		Organizations that follow FASB ASC 958, check here ► X			
Š		and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	4,313,899	27	4,757,023
Ä	28	Net assets with donor restrictions	9,204,785	28	9,454,244
ŭ		Organizations that do not follow FASB ASC 958, check here ▶	·		
ŕ		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds	0	29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	
\ss	31	Retained earnings, endowment, accumulated income, or other funds	0	31	
Net Assets or Fund Balances	32	Total net assets or fund balances	13,518,684	32	14,211,267
ž	33	Total liabilities and net assets/fund balances	13,518,684		14,216,904

Part XI

1

2

3

4

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6

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8

9

1

Part XII

Schedule O.

the Single Audit Act and OMB Circular A-133? . .

10

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

Form **990** (2021)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Attach to Form 990 or Form 990-EZ.

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

Employer identification number

Gran	by I	_and Trust Inc					23-72	43316				
Par	t I	Reason for Public Char	ity Status. (All or	ganizations must co	mplete t	his part.)	See instructions.					
The o	orga	nization is not a private foundati	on because it is: (F	or lines 1 through 12, o	check only	one box.)					
1		A church, convention of church	es, or association o	f churches described in	n section	170(b)(1)	(A)(i).					
2		A school described in section 1	70(b)(1)(A)(ii). (Atta	ach Schedule E (Form	990).)		A					
3	Ħ	A hospital or a cooperative hos		,	, ,	b)(1)(A)(iii	0.					
1	H	A medical research organizatio	·		-			tor the				
4		hospital's name, city, and state:	•	notion with a nospital o	iescribeu i	Section	170(b)(1)(A)(iii). E1	iei ilie				
_		•				حرم مريطالم		منالم ما انم				
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6	Ш	A federal, state, or local govern	ment or governmen	ital unit described in se	ection 170)(b)(1)(A)(v).					
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8		A community trust described in	section 170(b)(1)(A	A)(vi). (Complete Part	II.)							
9		An agricultural research organiz	zation described in	section 170(b)(1)(A)(ix) operated	d in conjur	nction with a land-gra	ant college	е			
		or university or a non-land-gran										
	_	university:										
10	Χ	An organization that normally re							S			
		receipts from activities related t										
		support from gross investment acquired by the organization af						sses				
44	П	An organization organized and				•						
11	H	•	•		•							
12	Ш	An organization organized and of one or more publicly support										
		Check the box on lines 12a thro										
а	[Type I. A supporting organiz	ation operated, sup	ervised, or controlled b	ov its supr	orted ora	anization(s), typically	bv aivinc	1			
-		the supported organization(s										
		organization. You must con							J			
b	Į	Type II. A supporting organize										
		control or management of th			ime perso	ns that co	ntrol or manage the	supported	i			
	ſ	organization(s). You must c					16 0 11 11					
С	Į	Type III functionally integra its supported organization(s)						rated with	١,			
٨	ſ	Type III non-functionally in						anization/	(c)			
d	L	that is not functionally integral										
		requirement (see instruction										
е		Check this box if the organize						e III				
		functionally integrated, or Ty		lly integrated supportir	ng organiz	ation.		-				
f		Enter the number of supported of	•					[0			
g		Provide the following information			T							
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10		organization or governing	(v) Amount of monetary support (see		nount of pport (see			
				above (see instructions))		ment?	instructions)		ctions)			
						ı						
					Yes	No						
(A)												
(B)												
(C)												
(C)												
(D)												
ν, – ,												
(E)												
` '												
Tota	ı						Λ		Λ			

Part II

_	Part III. If the organization fail	ls to qualify un	der the tests lis	sted below, plea	ase complete F	Part III.)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 5	Total. Add lines 1 through 3	0	0	0		0	0
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						0
	tion B. Total Support	T				1	
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						
	similar sources						0
9	Net income from unrelated business activities, whether or not the business is regularly carried on	*	()				0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11	Total support. Add lines 7 through 10						0
12	Gross receipts from related activities, etc. (se	e instructions)				12	
13	First 5 years. If the Form 990 is for the organ organization, check this box and stop here .			or fifth tax year as a			▶
Sec	tion C. Computation of Public Sup	_	•			 	
14	Public support percentage for 2021 (line 6, co		•	. , ,		14	0.00%
15	Public support percentage from 2020 Schedu					15	0.00%
16a	33 1/3% support test—2021. If the organiza and stop here. The organization qualifies as						
b	33 1/3% support test—2020. If the organization and stop here. The organization qualifies						
17a	10%-facts-and-circumstances test—2021. 10% or more, and if the organization meets the Part VI how the organization meets the facts-organization	ne facts-and-circur and-circumstance	nstances test, che s test. The organiz	ck this box and sto zation qualifies as a	op here . Explain ir publicly supporte	ı d	▶ □
b	10%-facts-and-circumstances test—2020. 15 is 10% or more, and if the organization me in Part VI how the organization meets the fact organization	eets the facts-and- ts-and-circumstan	circumstances tes ces test. The orga	t, check this box ar nization qualifies a	nd stop here . Exp s a publicly suppor	lain ted	▶ □
18	Private foundation. If the organization did no instructions						▶

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under

Granby Land Trust Inc 23-7243316

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

Schedule A (Form 990) 2021

(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			, I	,		
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	1,278,608	103,936	248,295	1,275,191	275,206	3,181,236
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						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	11,742	4,000				15,742
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	1,290,350	107,936	248,295	1,275,191	275,206	3,196,978
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	1,147,751	35,780	174,500	78,177	186,139	1,622,347
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	4 4 4 7 7 7 7	25.700	474.500	70.477	400 400	1 222 247
-	Add lines 7a and 7b	1,147,751	35,780	174,500	78,177	186,139	1,622,347
8	Public support (Subtract line 7c from						4 574 004
800	line 6.)						1,574,631
	ction B. Total Support ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	1,290,350	107,936	248,295	1,275,191	275,206	3,196,978
	Gross income from interest, dividends,	1,230,000	107,500	240,200	1,270,101	210,200	0,100,070
IVU	payments received on securities loans, rents,						
	royalties, and income from similar sources	24,087	43,677	80,630	138,111	192,155	478,660
b	Unrelated business taxable income (less	21,001	10,011	00,000	100,111	102,100	110,000
-	section 511 taxes) from businesses		·				
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	24,087	43,677	80,630	138,111	192,155	478,660
11	Net income from unrelated business		•	•	,	,	•
	activities not included on line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or)					
	loss from the sale of capital assets						
	(Explain in Part VI.)			2,949	0		2,949
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	1,314,437	151,613	331,874	1,413,302	467,361	3,678,587
14	First 5 years. If the Form 990 is for the orga		ond, third, fourth, c	or fifth tax year as a	a section 501(c)(3)		
	organization, check this box and stop here.						▶
Sec	tion C. Computation of Public Sup		_				
15	Public support percentage for 2021 (line 8, c	. , ,	•	· //		15	42.81%
	Public support percentage from 2020 Sched					16	70.60%
	tion D. Computation of Investmen						
17	Investment income percentage for 2021 (line					17	13.01%
18	Investment income percentage from 2020 Sc					18	5.34%
19a	33 1/3% support tests—2021. If the organi						⊾ 1⊽
L	not more than 33 1/3%, check this box and s	-			-		▶ X
D	33 1/3% support tests—2020. If the organi line 18 is not more than 33 1/3%, check this						. □
20		-	_				
20	Private foundation. If the organization did r	IOT CHECK & DOX OU	IIIIC 14, 19a, 01 19	D, CHECK THIS DOX A	กน ระษ เกรแนบแอกร		

Page 3

Schedule A (Form 990) 2021 Granby Land Trust Inc 23-7243316 Page **4**

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
16		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Schedul	e A (Fori	m 990) 2021	Granby Land Trust Inc	23-7243316		Р	age 5
Part I	V	Supporting Organ	nizations (continued)				
				-		Yes	No
11			ted a gift or contribution from any of the following persons?				
а	•	<u>-</u>	irectly controls, either alone or together with persons described on lines 11b				
			ody of a supported organization?		1a		
b		-	n described on line 11a above?	-	1b		
С		-	person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,		4 -		
Socti		in Part VI. Type I Supporting	Organizations	1	1c		<u> </u>
Secu	UII D.	Type I Supporting	Organizations			Yes	No
1	Did th	a governing hady, mamb	pers of the governing body, officers acting in their official capacity, or membership of c	non I		162	NO
•		0 0	have the power to regularly appoint or elect at least a majority of the organization's o				
			es during the tax year? If "No," describe in Part VI how the supported organization(s,				
			ed, or controlled the organization's activities. If the organization had more than one				
			e powers to appoint and/or remove officers, directors, or trustees were allocated am	~ .			
	-		what conditions or restrictions, if any, applied to such powers during the tax year.		1		
2		-	e for the benefit of any supported organization other than the supported		_		
			d, supervised, or controlled the supporting organization? If "Yes," explain in P	art			
	VI ho	w providing such bene	fit carried out the purposes of the supported organization(s) that operated,				
	super	vised, or controlled the	e supporting organization.		2		
Secti	on C.	Type II Supporting	g Organizations				
				_		Yes	No
1			nization's directors or trustees during the tax year also a majority of the direct				l
			ganization's supported organization(s)? <i>If</i> "No," describe in Part VI how contr				
			orting organization was vested in the same persons that controlled or manage	∍d			
• 41		pported organization(1		<u> </u>
Secti	on D.	All Type III Suppo	rting Organizations				
	5					Yes	No
1			e to each of its supported organizations, by the last day of the fifth month of the				
	_		written notice describing the type and amount of support provided during the				
			990 that was most recently filed as of the date of notification, and (iii) copies cuments in effect on the date of notification, to the extent not previously provide		1		
2	_		n's officers, directors, or trustees either (i) appointed or elected by the suppor		•		
_			g on the governing body of a supported organization? <i>If "No," explain in Part</i>				l
	_		a close and continuous working relationship with the supported organization		2		
3			p described on line 2, above, did the organization's supported organizations h	· ·	_		
	•		anization's investment policies and in directing the use of the organization's				l
	•		s during the tax year? If "Yes," describe in Part VI the role the organization's				
		orted organizations pla			3		
Secti	on E.	Type III Functiona	Ily Integrated Supporting Organizations	•			
1	Check	k the box next to the m	nethod that the organization used to satisfy the Integral Part Test during the ye	ear (see instruct i	ions	s).	
а			d the Activities Test. Complete line 2 below.				
b	☐ Th	e organization is the p	parent of each of its supported organizations. Complete line 3 below.				
С		-	ted a governmental entity. Describe in Part VI how you supported a governme	ental entity (see ins	tructi	ons)	
2		ties Test. Answer line	•	Trial Criticy (ede mo	1	Yes	No
a			rganization's activities during the tax year directly further the exempt purpose:	s of		162	NO
a			b) to which the organization was responsive? <i>If</i> "Yes," <i>then in Part VI identify</i>				
			ntions and explain how these activities directly furthered their exempt purpos				
			esponsive to those supported organizations, and how the organization determ				
		=	ted substantially all of its activities.		2a		
b			on line 2a, above, constitute activities that, but for the organization's involvem	-			
			tion's supported organization(s) would have been engaged in? If "Yes," expla				
		_	organization's position that its supported organization(s) would have engaged				
			rganization's involvement.		2b		
3			zations. Answer lines 3a and 3b below.				
а			ne power to regularly appoint or elect a majority of the officers, directors, or				
			orted organizations? If "Yes" or "No," provide details in Part VI.	-	3a		
b		-	e a substantial degree of direction over the policies, programs, and activities				
	of its	supported organizatior	ns? If "Yes," describe in Part VI the role played by the organization in this reg	ard.	3b		

 Schedule A (Form 990) 2021
 Granby Land Trust Inc
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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organi		. , ,	,
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	0	0
5 Depreciation and depletion	5	A	
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	0	0
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	0	0
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	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount	•		Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
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		0
7 Check here if the current year is the organization's first as a non-functionally	inte	egrated Type III supporting	
instructions).			·

Part	Type III Non-Functionally integrated 509(a)(3) Supporting Organi	zations (continuea)	1
Section	n D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported	d	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpos	ations 3		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required—	provide details in Part V i	5	
6	Other distributions (describe in Part VI). See instructions.		_6	
7	Total annual distributions. Add lines 1 through 6.		7	0
8	Distributions to attentive supported organizations to which t	he organization is respor	nsive	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	0
10	Line 8 amount divided by line 9 amount	T	10	0.000
8	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2021			
	(reasonable cause required—explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2021			
<u>a</u>	From 2016			
<u>b</u>	From 2017			
C	From 2018			
<u>d</u>	From 2019			
	From 2020	0		
	Total of lines 3a through 3e Applied to underdistributions of prior years	0	0	
	Applied to 2021 distributable amount		U	0
<u>''</u>	Carryover from 2016 not applied (see instructions)			0
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0		
4	Distributions for 2021 from	, U		
7	Section D, line 7: \$ 0			
а	Applied to underdistributions of prior years		0	
b	Applied to 2021 distributable amount			0
С	Remainder. Subtract lines 4a and 4b from line 4.	0		
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.		0	
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain			
	in Part VI. See instructions.			0
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.	0		
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
<u> </u>	Excess from 2019			
d	Excess from 2020 0			
е	Excess from 2021			

Schedule A (Form 990) 2021 Granby Land Trust Inc 23-7243316 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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 D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public

Name of the organization Employer identification number Granby Land Trust Inc. 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 1 Total number at end of year 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 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? 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 Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). X Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area X Protection of natural habitat Preservation of a certified historic structure X Preservation of open space 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. Total number of conservation easements 945.00 c Number of conservation easements on a certified historic structure included in (a) 2c 0 Number of conservation easements included in (c) acquired after 7/25/06, and not on a 0 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 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. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: **b** Assets included in Form 990, Part X.

Sched	ule D (Form 990) 2021 Granby Land Trust	Inc			23-72433	316 Page	2
Part	Organizations Maintaining						
3	Using the organization's acquisition, a	ccession, and other	records, check any	of the following that	t make significant u	se of its	
	collection items (check all that apply):		. 🖂 .				
а	Public exhibition		d Loan or	exchange program			
b	Scholarly research		e Other				
С	Preservation for future generation	s					
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 s assets to be sold to raise funds rather	than to be maintain				Yes No)
Part	Complete if the organization a 990, Part X, line 21.	answered "Yes" o				on Form	
1a	Is the organization an agent, trustee, c included on Form 990, Part X?				sets not	Yes No)
b	If "Yes," explain the arrangement in Pa	art XIII and complete	e the following table	:			
_	Designing helenes				c Ar	mount	_
C d	Beginning balance			_	d		0
e	Distributions during the year				e		_
f	Ending balance				f		0
	Did the organization include an amour		t V line 21 for each		L L	Yes X No	
2a				,			,
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	ir the explanation ha	as been provided or	1 Part XIII	· · · <u> </u>	
Part	V Endowment Funds. Complete if the organization a	anawarad "Vaa" a	n Form 000 Port	IV line 10			
	Complete if the organization a	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back	_
1a	Beginning of year balance	(a) Current year		(c) Two years back	(a) Three years back	` '	0
b	Contributions		,	0	Ŭ		-
C	Net investment earnings, gains,						_
	and losses	. (
d	Grants or scholarships						_
е	Other expenditures for facilities and programs		•				_
f	Administrative expenses						_
g	End of year balance		•	0	0		0
2	Provide the estimated percentage of the	ne current year end	balance (line 1g, co	lumn (a)) held as:			
а	Board designated or quasi-endowmen	t •	%				
b	Permanent endowment	%					
С	Term endowment	%					
	The percentages on lines 2a, 2b, and						
3a	Are there endowment funds not in the	possession of the c	organization that are	held and administe	ered for the	<u> </u>	_
	organization by:					Yes No	<u>) </u>
	(i) Unrelated organizations					3a(i)	
	()					3a(ii)	
b	If "Yes" on line 3a(ii), are the related o	-	•			3b	
4 Dort	Describe in Part XIII the intended uses		is endowment fund:	S.			
Part			n Form 000 Dar	IV line 11a C	Form 000 Dort	V line 10	
	Complete if the organization a		on Form 990, Part		S FORM 990, Part	<u>√, III l€ 10.</u>	—

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	8,934,008		8,934,008
b	Buildings	0	49,900	1,705	48,195
С	Leasehold improvements	0	0	0	0
d	Equipment	0	608	608	0
е	0.0	0	28	0	28
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					

G. a			
Part VII Investments—Other Securities.	Ves" 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	0	Cook of Grid of your market value	
(2) Closely held equity interests	0		
(3) Other	J		
(A)			
(B)			
(C)		<u> </u>	
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	0		
Part VIII Investments—Program Related.	\		
Complete if the organization answered "	Yes" on Form 990, I	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	
(4)		Cook of one of your market value	
<u>(1)</u>			
(2)			_
(4)	A 4		_
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) .	0		
Part IX Other Assets.			_
	Yes" on Form 990, I	Part IV, line 11d. See Form 990, Part X, line 15.	
(a) Descri		(b) Book value	
(1) Mary Edwards Charitable Fund		743,2	205
(2) GLT General Fund		123,3	386
(3) Bertha Dimock Fund		543,5	564
(4)	7		
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	▶ 1,410,1	155
Part X Other Liabilities.			
	Yes" on Form 990, I	Part IV, line 11e or 11f. See Form 990, Part X,	
line 25.			
	ion of liability	(b) Book value	_
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9) Total (Column (b) must equal Form 990, Part X, col. (B) lii	ne 25)	—	
- waa, comminum musi emarcomi 990 can x col (B) III	IC 70.1	₽	

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

 Schedule D (Form 990) 2021
 Granby Land Trust Inc
 23-7243316
 Page 4

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	turn.	
1	Total revenue, gains, and other support per audited financial statements	1	798,154
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		7 90, 104
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	330,793
3	Subtract line 2e from line 1	3	467,361
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		407,001
·	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line</i> 12.)	5	467,361
Part		Return.	,
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	105,571
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	105,571
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	105,571
	XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par		; Part X, line
2; Pa	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional informa	tion.	
Part I	I Line 9 Conservation easements are recorded at cost if purchased. Once the easement		
has b	een acquired the value of the asset is written down to a value of \$1 on the Statement		
of Ein	ancial Position with a corresponding entry to Program Service costs. Donated		
01111	ancial resition with a corresponding only to ringram service costs. Donated		
conse	ervation easements are recognized as an acquired asset on the statement of financial		
	~ ~ ~		
positi	on with a value of \$1.		
	. (7)		
Part 2	KLine 2 The Organization has been notified by the Internal Revenue Service that it		
is exe	empt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code.		
The C	Organization is further classified as an organization that is not a private foundation		
unde	Section 509(a)(3) of the Code. The most significant tax positions of the		
Orga	nization are its assertion that it is exempt from income taxes and its determination		
of wh	ether any amounts are subject to unrelated business tax (UBIT). The Organization		
	\		
follow	s the guidance of Accounting Standards Codification (ASC) 740, Accounting for Income		
Taxe	s, related to uncertain income taxes, which prescribes a threshold of more likely than		

Granby Land Trust in	Schedule D (Form 990) 2021	Granby Land Trust Inc
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Schedule D (Form 990) 2021 Granby Land Trust Inc	23-7243316	Page 5
Part XIII Supplemental Information (continued)		
not for recognition and recognition of tax positions taken or expected to be taken in a		
not for recognition and recognition of tax positions taken or expected to be taken in a		
tax return. All significant tax positions have been considered by management. It has been		
determined that it is more likely than not that all tax positions would be sustained upon		
determined that it is more likely than not that all tax positions would be sustained upon		
examination by taxing authorities. Accordingly, no provision for income taxes has been		
recorded		
recorded.		
30		

SCHEDULE L (Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► 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

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

Gran	by Land Trust Inc							23-72	243316	3				
Par		it Transactions e organization ar	(section 501(c)(3), se on Forr	ction 50 m 990, F	11(c)(4), and Part IV, line	d secti 25a o	on 501(c)(29) or r 25b, or Form 9	ganiza 90-EZ	itions , Part	only). V, lin	e 40b.		
4 (a) Name of discussified warsen			(b) Relationship between disqualified person and					(a) Description of the constitute					(d) Cor	ected?
1 (a) Name of disqualified person		led person	organization					(c) Description of transaction				•	Yes	No
(1)									1					
(2)								_						
(3)														
(4)										1)			
(5)								4						
(6)														
2	Enter the amount of under section 4958	•	the organizatio		agers or	•	d pers	ons during the ye	eăr 		> \$			
3	Enter the amount of	tax, if any, on lin	ne 2, above, re	imburs	ed by th	e organizat	ion .			1	> \$			
Part	Complete if the	or From Interese organization are	swered "Yes"				ine 38	a or Form 990, F	Part IV	, line 2	26; or	if the		
		(b) Relationship with organization	on loan fr		Loan to or rom the anization?		nal nount	al (f) Balance due ount	(g) In default?				(i) Written agreement?	
				То	From		*		Yes	No	Yes	No	Yes	No
(1)														
(2)					7									
(3)														
(4)						•								
(5)														
(6)				1										
(7)														
(8)														
(9)														
(10)														
Total	<u> </u>						.▶ \$	0		•				
Part		sistance Benefit e organization ar				Part IV, line	27.							
(a) Name of interested person (b) Relationship between interested person and the organization			(c) Amount of assistance (d) Type of assistance (e)				e) Purpose of assistance							
(1)														
(2)		. (74												
(3)		V												
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(40)														

Schedule L (Form 990) 2021 Granby Land Trust Inc 23-7243316 Page **2**

Part IV	Business Transactions Invo	Iving Interested Persons. Inswered "Yes" on Form 990, P	art IV, line 28a, 28b	, or 28c.		age a	
(a) Name of interested person		(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	(e) Sharing o organization! revenues?	
					Yes	No	
(1) Trish	Percival	Wife of Board Member	23,644	Consulting & Other Services		Х	
(2)			·	<u> </u>			
(3)							
(4)				•			
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
Part V	Supplemental Information.	for responses to questions on					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Granby Land Trust Inc

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

Attach to Form 990.

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

23-7243316

Employer identification number

Part I Types of Property		
(a) Check if applicable applicable (b) (b) Number of contributions or items contributed (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	etermining	
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		
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 X 1 116,000 Fair Market Va	ue	
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		0
	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through		
28, that it must hold for at least three years from the date of the initial contribution, and which isn't required		
to be used for exempt purposes for the entire holding period?	а	Χ
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?	ı X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell		
noncash contributions?	a l	Χ
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		
(/		

	(Form 990) 2021 Granby Land Trust Inc	23-7243316	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, an the organization is reporting in Part I, column (b), the number of contributions, the number or a combination of both. Also complete this part for any additional information.	d 33, and whe	∍ther ived,
	or a combination of both. Also complete this part for any additional information.		
	•		
		.)	

SCHEDULE O (Form 990)

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 the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Granby Land Trust Inc 23-7243316 Form 990, Part VI, Section A, Line 6: Members are individuals, families or other entities from the community who make an annual member donation. There are approximately 429 members Form 990, Part VI, Section A, Line 7a: Members elect the members of the Board. Form 990, Part VI, Section B, Line 11b: The Form 990 is reviewed by the President, Controller Treasurer and Finance Committee Chair before it is filed. The Board of Directors is also provided with a pdf copy for inspection before the return is filed. Form 990, Part VI, Section B, Line 12c: Annually, each director receives a copy of the Conflict of Interest Policy and is required to review it and positively affirm in writing that they have disclosed any conflicts or any reportable potential conflicts. Form 990, Part VI, Section B, Line 15a. & 15b.: The Organization does not compensate it's management. Form 990, Part VI, Section C, Line 19: Upon request, any member or other person will be provided with a copy of the organization's governing documents, Policies, Financial Report and Form 990.

Schedule O (Form 990) 2021	Page	2
Name of the organization	Employer identification number	
Granby Land Trust Inc	23-7243316	
	<u> </u>	