WEGNER CPAS LLP 2921 LANDMARK PL STE 300 MADISON, WI 53713-4236

> GROUNDSWELL CONSERVANCY, INC. 303 S PATERSON ST, 6 MADISON, WI 53703-4534

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Form	-	-		

Return of Organization Exempt From Income Tax

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.



Depa	artment o nal Reve	f the Treasury nue Service Go to www.irs.gov/Form990 for instructions and the lates	t information	Open to Public Inspection
	the similar and a literation of the	e 2021 calendar year, or tax year beginning JUL 1, 2021 and ending		moproviden
в	Check if applicab	C Name of organization	D Employer identifi	cation number
	Addre	GROUNDSWELL CONSERVANCY, INC.		
F	Name		39-14528	25
F	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/suit		
Ē	Final		608-258-	
	termir ated		G Gross receipts \$	3,994,382.
	Amen		H(a) Is this a group re	
Γ	Applic		for subordinates	
(H	pendi	¹⁹ SAME AS C ABOVE	H(b) Are all subordinates in	
J. T	Tax-ex	empt status: 🚺 501(c)(3) 🚺 501(c) ()◀ (insert no.) 🚺 4947(a)(1) or 🚺 52		list. See instructions
J	Websi	e: CROUNDSWELLWISCONSIN.ORG	H(c) Group exemption	
K	orm of	organization: X Corporation Trust Association Other L Yea		State of legal domicile; W
Pa	art I	Summary		
đ	1	Briefly describe the organization's mission or most significant activities: WE ARE A	LEADER IN PRO	DTECTING
Activities & Governance		PLACES PEOPLE LOVE IN SOUTHERN WISCONSIN.		
ŝrnê	2	Check this box 🕨 🦲 if the organization discontinued its operations or disposed of mor	e than 25% of its net ass	
0V6	3	Number of voting members of the governing body (Part VI, line 1a)		15
ي مو	4	Number of independent voting members of the governing body (Part VI, line 1b)		15
es	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		11
iviti	6	Total number of volunteers (estimate if necessary)		124
Act	7a	Total unrelated business revenue from Part VIII, column (C), line 12		0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
			Prior Year	Current Year
ue		Contributions and grants (Part VIII, line 1h)	1,001,029. 51,751.	2,706,312.
Revenue		Program service revenue (Part VIII, line 2g)	24,740.	74,424. 415,408.
Re	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,884.	4,594.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,084,404.	3,200,738.
-		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	37,714.	421,225.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	421,223.
	40	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	377,458.	453,577.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
per	Ь	Total fundraising expenses (Part IX, column (D), line 25) 179,585.		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	529,400.	792,881.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	944,572.	1,667,683.
	19	Revenue less expenses. Subtract line 18 from line 12	139,832.	1,533,055.
Net Assets or Fund Balances			eginning of Current Year	End of Year
sets	20	Fotal assets (Part X, line 16)	9,070,920.	10,038,713.
t As	21	Fotal liabilities (Part X, line 26)	111,314.	99,723.
ING	22	Net assets or fund balances. Subtract line 21 from line 20	8,959,606.	9,938,990.
	rt II	Signature Block		
		ties of perjury, I declare that I have examined this return, including accompanying schedules and statem	-	knowledge and belief, it is
true,	correc	, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	has any knowledge.	1.5
		Cinque Nut Dance	4/27	23
Sigr			Date	
Here	e	ANGELA WEST BLANK, EXECUTIVE DIRECTOR Type or print name and title		
			Date Check	TI PTIN
Paid		Tropardi S signature		30.55
Prep		BRUCE MAYER, CPA BRUCE MAYER, CPA (Firm's name ► WEGNER CPAS LLP	4/27/23 self-employe	₫ <u>₽00187180</u> 39-0974031
- ich			FIRM S EIN .	JJ~VJ/4VJL

May the IRS discuss this return with the preparer shown above? See instructions	

MADISON, WI 53713-4236

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address 2921 LANDMARK PL STE 300

Use Only

132001 12-09-21

Phone no. (608) 274-4020

				Form 990 (202
4e	Total program service expenses	1,415,552.		
4d	Other program services (Describe on Sche (Expenses \$	edule O.) including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (R	evenue\$
			, , ,	
4b	DONATED TO THE VILLAG (Code:) (Expenses \$	E TO CREATE ACCES	S FOR CANOERS ANI	
	BLACK EARTH CREEK WIT THIS PROPERTY INCLUDE	HIN THE VILLAGE C	F BLACK EARTH FRO	OM DAVID COOPER.
	LAND PROTECTED FOREVE			
	THROUGH A CONSERVATION OF PROTECTION TO THE PARK, THE SECOND HIGH		0-ACRE HAUGE HIST	FORIC DISTRICT
	PLACES IN SOUTH-CENTR.		ירא הפת ופון	
	CONSERVATION, OUTREAC	INDED COMMUNITIES		
4a		including grants of \$	421,225.) (R	
4	Describe the organization's program servic Section 501(c)(3) and 501(c)(4) organizatio	ns are required to report the amo		• •
-	If "Yes," describe these changes on Schee	dule O.		······
3	If "Yes," describe these new services on S Did the organization cease conducting, or		it conducts, any program service	s? Yes X No
2	Did the organization undertake any signific prior Form 990 or 990-EZ?	cant program services during the		
•	WE PROTECT SPECIAL PL.			
1	Briefly describe the organization's mission			

Form	990	(2021)

Form 990 (2021) GROUNDSWELL CONSERVANCY, INC.
Part IV Checklist of Required Schedules

1 In the regarization description (SQI) or 4447(a)(1) (ther than a private foundation)? 1 X 2 Is the organization require indice or miders boncule B, Schedule C Combutors? 2 X 3 X 3 X 4 Section 501(c)(R) organization and compared in a compared activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 4 X 5 Section 501(c)(R) organization and compared in the organization in a section 501(c)(R), 501(c)(G); or 501(c)(R) or 501(c)(R) organization in the receives membership dues, assessments, or similar analysis of accounts for which donoes have the right to provide active on the distribution or investment of a mouths in a child have? complete Schedule D, Part I 5 X 6 the organization magain in doises that a conservation assests? If Yes," complete Schedule D, Part I 7 X 6 7 X E B the organization magain in clocics or divers of at. Instronal treasures, or other similar assets? If Yes," complete Schedule D, Part II 7 X 8 Did the organization mouth in Part X, line 21, for encore or an anount in Part X, line 12, that is 5% or more of the total assets in portagin addowments? 9 X 9 Did the organization report an anount in Part X, line 21, for encorone schedule D, Part X				Yes	No
2 tet arganization require index on picter 6 schedule 0, Centrituters 7 See instructions 2 X 3 Dift the organization require index or index of bidding campage activities on balled of or incoposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X 4 Section S01(Q)(0) organizations. Did the organization engage in lobbying activities, or have a section S01(Q) election in effect of index opplete Schedule C, Part I 4 X 5 Is the organization asseement investments that receives membership dues, assessments, or similar assets the first organization investment of anounts in such that receives membership dues, assessments, or similar assets the first organization investment of anounts in such that or accounts? If "Yes," complete Schedule D, Part I 6 X 7 Dif the organization receive or hold a conservation assement, including easements to preserve open space. The anionamism assement including easement, credit repair, or debt negotiation services? 7 X 8 Did the organization receive or hold as conservation assement, credit repair, or debt negotiation services? 9 X 9 Did the organization resolute DR and X, romplete Schedule D, Part I 8 X 10 Did the organization resort an amount in Part X, line 21, for serve or custodial account liability, serve as a custodian for amount for investments - other securities in Part X, line 12, that is 5% or more of as total assets r	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
 3) Did the organization engage in direct or patical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4) Sociols 50(c)(3) organizations. Did the organization engage in toobying activities, or have a section 501(h) election in effort during the tax year? If "Yes," complete Schedule C, Part II 6) Did the organization maxima and yound avides that accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to B Did the organization maxima celectrons of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 9) Did the organization maxima celectrons of works of art, historical treasures, or dotter similar assets? If "Yes," complete Schedule D, Part II 9) Did the organization maxima celectrons of works of art, historical treasures, or dotter similar assets? If "Yes," complete Schedule D, Part IV 10) Did the organization report an amount for insultivation guestons is "Yes," the organization report an amount for insultivation guestons in Yes," complete Schedule D, Part V 11) Did the organization report an amount for insultments - other sacutifies in Part X, line 10? If "Yes," complete Schedule D, Part V 11) Did the organization report an amount for insultments - tops are classes in Part X, line 10? If "Yes," complete Schedule D, Part V 11) Did the organization report an amount for insultments - program related in Part X, line 10? If "					
public office? # 'Yes,' complete Schedule Q. Part I 3 X 4 Section 501(k) expension. Did the organization engage in lobbying activities, or have a section 501(k) election in effect 4 X 5 Is the organization a section 501(c)(k), 501(c)(k) or ganization that receives membership dues, assessments, or similar anumatian any doors advised funds or any similar funds or accounts? // 'Nes,' complete Schedule D, Part I 6 X 6 Did the organization measure and somewith such funds or accounts? // 'Nes,' complete Schedule D, Part I 6 X 7 X End the organization measure in characterized regains controls in structures? // 'Nes,' complete Schedule D, Part I 7 X 8 X Point enganization measure in characterized regains controls in structures? // 'Nes,' complete Schedule D, Part I 7 X 7 X Enganization regorts in other similar assets? // 'Nes,' complete Schedule D, Part I 8 X 9 Did the organization, florely through a related organization, hold assets in donor restricted endowments controls related organization, florely through a related organization, relation Part X, ine 12, for sistem 24 9 X 10 Did the organization report an amount for investments - other securities in Part X, ine 12, this 15 % or more of its total assets reported in Part X, ine 12, this 15 % or more of its total	2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(b) election in effect during the tax year? // Yes, 'complete Schedule C, Part II	3				
during the tax year? If Yes, * complete Schedule C, Part II 4 X 5 Is the organization a section S(16(4), 501(6)(3) or 501(6)(6) or 501(6)(6) or 501(6)			3		<u> </u>
5 Is the organization a sector 501(c)(4, 501(c)(5), or 501(c)(6) organization that recovers membership dues, assessments, or similar amounts as defined in Rev. Proc. 99.197 (ff "vgs, "complete Schedule C, Part II 5 X D Did the organization marking and phone advised funds or any similar indix or accounts? (ff "vgs," complete Schedule D, Part II 6 X D Did the organization nerview of hold a conservation funding easement is not funds or accounts? (ff "vgs," complete Schedule D, Part II 7 X B Did the organization nerview of hold a conservation funding easement is not funds or any similar assets? (ff "vgs," complete Schedule D, Part II 7 X B Did the organization nerview of through a related organization, hold asset in donor-restricted endowments or in quasi endowment? (ff "vgs," complete Schedule D, Part V 8 X D Did the organization is and the organization, hold asset in donor-restricted endowments or in quasi endowment? (ff "vgs," complete Schedule D, Part V 10 X D Did the organization is and the related organization, hold asset in adomization are vised in any of the following questions is "Yes," then complete Schedule D, Part VI 10 X D Did the organization report an amount for investments - offer socurities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 /f "Ygs," complete Schedule D, Part VI 114 X D Did the organization report an amount for other assets in Part X, line 12, that is 5% or	4				
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6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? // 'Yes,' complete Schedule D, Part // 6 X 0 Did the organization readines of holds or caresvorters? // 'Yes,' complete Schedule D, Part // 7 X 0 Did the organization maintain collections of works of art, historical treasures, or other similar assets? // 'Yes,' complete Schedule D, Part // 7 X 0 Did the organization maintain collections of works of art, historical treasures, or other similar assets? // 'Yes,' complete Schedule D, Part // 8 X 0 Did the organization directive through a related organization, includ assets in donor restricted andowments or in quasi endowment? // 'Yes,' complete Schedule D, Part V 10 X 0 Did the organization report an amount for lead, buildings, and equipment in Part X, line 10? // 'Yes,' complete Schedule D, Part V/ 0 Did the organization report an amount for investments - program related in Part X, line 10? // 'Yes,' complete Schedule D, Part V/ 0 Did the organization report an amount for investments in Part X, l	5				
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11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VX, or X, as applicable. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a X Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 11a X Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c X Did the organization report an amount for other assets in Part X, line 15% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11d X Did the organization report an amount for other assets in Part X, line 15% or more of its total assets reported in Part X, line 16% If "Yes," complete Schedule D, Part X 11d X Did the organization report an amount for other assets in Part X, line 15% or more of its total assets reported in Part X, line 16% If "Yes," complete Schedule D, Part X 11d X 11 U X 11d X 11d X 12 Did the organization asparate or consolidated financial statements for the tax year? 11f 'Yes," complete Schedule D, Part X / AN ////////////////////////////////	10				
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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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1 c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18 X 19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 19 X 20a 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? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 21 X			4.4%		v
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 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? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> 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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a 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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21 X 	13		45		x
or for foreign individuals? /f "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? /f "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? /f "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes," 19 X 20a Did the organization operate one or more hospital facilities? /f "Yes," complete Schedule H 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? /f "Yes," complete Schedule I. Parts I and II 21 X	16		15		
 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part II</i> 19 Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> 19 Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> 20a 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? <i>If "Yes," complete Schedule I. Parts I and II</i> 21 X 	10		16		x
column (A), lines 6 and 11e? /f "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes," 18 X 19 Did the organization operate one or more hospital facilities? /f "Yes," complete Schedule H 19 X 20a 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? /f "Yes," complete Schedule I. Parts I and II 20a X	17				- 23
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 18 X 20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 19 X 20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes." <i>complete Schedule I. Parts I and II</i> 21 X	"		17		x
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes," 19 X 20a Did the organization operate one or more hospital facilities? /f "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization operate on Part IX, column (A), line 1? /f "Yes," complete Schedule I. Parts I and II 21 X	.0		18		х
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21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II					
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		
			21	x	
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 Form 990 (2021)
 GROUNDSWELL CONSERVANCY, INC.
 39-1452825
 Page 4

 Part IV
 Checklist of Required Schedules (continued)
 (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
-	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		x
06	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			- v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	37	X X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			<u>-</u> -
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Der	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 12	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
40055	(gambling) winnings to prize winners?	1c	990	<u> </u> (2021)
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2	.1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a		X
b	If "Yes," enter the name of the foreign country	_		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5 b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. <u>5</u> c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	. 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	r? 7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	_		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13 a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b	_		
	Enter the amount of reserves on hand 13c	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			<u>-</u> -
	excess parachute payment(s) during the year?	. 15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		X
	If "Yes," complete Form 4720, Schedule O.			

Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any 17 activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069. 5

Form **990** (2021) 06353.11

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Form 990 (
Part VI	Go

GROUNDSWELL CONSERVANCY, INC. 39-1452825 Page 6

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

Y	

Sec	tion A. Governing Body and Management									
19	Enter the number of voting members of the governing body at the end of the tax year	1 a	15		Yes	No				
ia	If there are material differences in voting rights among members of the governing body at the end of the tax year									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b	15							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		any other							
	officer, director, trustee, or key employee?			2		X				
3	Did the organization delegate control over management duties customarily performed by or under th									
	of officers, directors, trustees, or key employees to a management company or other person?			3		X				
4										
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?			6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	opoint	one or							
	more members of the governing body?			7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s									
	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-							
	The governing body?			8a	X					
	Each committee with authority to act on behalf of the governing body?			8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					x				
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		<u> </u>	9		_ A				
000	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	<u>Code.)</u>		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a	103	X				
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					<u> </u>				
-		•	,,,	10b						
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	,	0	11a						
12a	12a Did the organization have a written conflict of interest policy? If "No," go to line 13									
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?									
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	Yes," c	lescribe							
	on Schedule O how this was done			12c	Х					
13	Did the organization have a written whistleblower policy?			13	<u>X</u>					
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and approva	al by in	dependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				37					
	The organization's CEO, Executive Director, or top management official			15a	Х					
b	Other officers or key employees of the organization			15b		X				
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	mantu	with a							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger			16-		x				
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			16a						
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluate	-	-							
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright WI									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, a	nd 990)-T (section 501(c)(3)s	only)	availal	ble				
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain	n on S	chedule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict	of interest policy, and	financ	ial					
	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 bo	oks an	d records							
	ANGELA WEST BLANK - 608-258-9797									
	303 S PATERSON ST STE 6, MADISON, WI 53703-4534			-	000	(000 1)				
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Form 990 (2021)	GROUNDSWELL CONSERVANCY, INC.	39-1452825	Page 7						
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated									
Employe	ees, and Independent Contractors								
Check if Sc	chedule 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	e for all persons required to be listed. Report compensation for the calendar year endir	ng with or within the organization's	s tax year.						
List all of the orga	anization's current officers, directors, trustees (whether individuals or organizations),	regardless of amount of compens	ation.						

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.

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

Name and title Average hours per week (ist any hours for week (ist any hours for week (ist any hours for week (ist any hours for gainzation (it) JAMES WELSH Reportable compension prom traited organization (W-2/1098-NEC) Estimated compension from organization (W-2/1098-NEC) Estimated compension from organization (W-2/1098-NEC) Estimated compension prom traited organization (1) JAMES WELSH 40.000 X X 87,537. 0. 7,370. (2) ANEELA WEEST ELANK EXECUTIVE DIRECTOR (TRAU PEBRUARY) 40.000 X X 0. 0. 0. (3) CARRIE BREDNIG (1) TARCY WIELDANK (2) ANEELA WEEST ELANK EXECUTIVE DIRECTOR (TRAU PEBRUARY) 1.000 X X 0. 0. 0. 0. (4) TRACY WIELDANK (3) CARRIE BREDNIG 1.000 X X 0. 0. 0. 0. (6) PAR LEANKSCPP 1.000 X X 0. 0. 0. (7) ALTON MULTHAUY 1.000 X X 0. 0. 0. (6) PAR LEANKSCPP 1.000 X X 0. 0. 0. (10) MATT FRANK 0.0 0. 0. 0.	(A)	(B)		(C)		(D)	(E)	(F)			
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132007 12-09-21

Form 990 (2021)

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2021.05080 GROUNDSWELL CONSERVANCY, 06353.11

	990 (2021) GROUNDSWE	LL CONS	ER	VA	NC	Ϋ́,	I	NC	1 • •	39-14	1528	325	P	age 8
Par	t VII Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	anc	d Hig	ghes	st C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week (list any	box offi	not c , unles	Pos heck ss per	more rson i	1 than o is both pr/trus	n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		an	(F) timate nount other pensa	of
		hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)		fr org and	om th anizat d relat anizati	e ion ed
	Subtotal Total from continuation sheets to Part VII								<u>87,537.</u> 0.		0.		7,3	70.
	Total (add lines 1b and 1c)								87,537.		0.	1	7,3	70.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable	1		Yes	0 No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su	-		•	•			Ŭ	• •		[3		X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any percentilized on line 1a receive or a	,000? If "Yes,	" со	mple	ete S	Sche	edule	e J fe	or such individual	-		4		x
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes." com</i>											5		Х
	tion B. Independent Contractors									100.000 of come		: .		
1	Complete this table for your five highest con the organization. Report compensation for t	•	•							•	ensat	ion fro	om	
	(A) Name and business	address	N	ONE	2				(B) Description of s	ervices	C	(C ompe	;) nsatio	n
2	Total number of independent contractors (in \$100,000 of compensation from the organiz	-	ot lin	niteo	d to f	thos (•	ted	above) who received mo	ore than			000	

132008 12-09-21

		GROUNDSWELL CC	DNSERVANCY	Z, INC.		39-1452	825 Page 9
Pa	rt V	Statement of Revenue					
		Check if Schedule O contains a response o	r note to any line i	in this Part VIII	(B)		
				(A) Total revenue	Related or exempt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s s	1	a Federated campaigns 1a					
anta							
S D		b Membership dues 1b c Fundraising events 1c	6,480.				
fts,		d Related organizations	-,				
, Gi		e Government grants (contributions) 1e	1,133,315.				
Sin		f All other contributions, gifts, grants, and					
uti(similar amounts not included above 1f	1,566,517.				
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contributions included in lines 1a-1f	693,757.				
no'		h Total. Add lines 1a-1f		2,706,312.			
0 0			Business Code	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	2		531190	64,924.	64,924.		
/ice	_		813312	9,500.	9,500.		
er,			013312	5,500.	5,500.		
Program Service Revenue		c					
grai Re		d					
, ro							
-		f All other program service revenue		74,424.			
	0	g Total. Add lines 2a-2f Investment income (including dividends, interes		/1,121.			
	3		· .	25,564.			25,564.
		other similar amounts)		23,304.			25,504.
	4	Income from investment of tax-exempt bond pro	· · ⊢				
	5	Royalties(i) Real	(ii) Personal				
	•						
	6						
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 1,176,296.					
		b Less: cost or other basis					
evenue		and sales expenses 7b 786, 452.					
evel		c Gain or (loss)		200.044			
		d Net gain or (loss)	····· •	389,844.			389,844.
Other R	8	a Gross income from fundraising events (not					
ō		including \$6,480. of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a	7,557.				
	I	b Less: direct expenses 8b	7,192.				
		· · · · · · · · · · · · · · · · · · ·	····· ►	365.			365.
	9	a Gross income from gaming activities. See					
		Part IV, line 19 9a					
		b Less: direct expenses9b					
		c Net income or (loss) from gaming activities	🕨				
	10	a Gross sales of inventory, less returns					
		and allowances 10a					
	I	b Less: cost of goods sold 10b					
		c Net income or (loss) from sales of inventory					
s		Ļ	Business Code				
e jou	11	a					
ane	I	b					
eve		c					
Miscellaneous Revenue		d All other revenue	900099	4,229.			4,229.
2		e Total. Add lines 11a-11d	►	4,229.			
	12	Total revenue. See instructions		3,200,738.	74,424.	٥.	420,002.
132009	9 12-0	09-21					Form 990 (2021

GROUNDSWELL CONSERVANCY, INC.

9

39-1452825 Page 9

GROUNDSWELL CONSERVANCY, 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).

INC.

_	Check if Schedule O contains a respons	e or note to any line in t (A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	401 005	401 005		
	and domestic governments. See Part IV, line 21	421,225.	421,225.		
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,	97,099.	63,114.	19,420.	14,565
~	trustees, and key employees	97,099.	05,114.	19,420.	14,505
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	301,957.	174,617.	2,690.	124,650
7 8	Pension plan accruals and contributions (include		<u> </u>	2,000	
0	section 401(k) and 403(b) employer contributions)	8,071.	4,808.	447.	2 816
9	Other employee benefits	15,319.	9,126.	849.	<u>2,816</u> 5,344
0	Payroll taxes	31,131.	18,546.	1,725.	10,860
1	Fees for services (nonemployees):	01/1011			
	Management				
	Legal	8,145.	8,145.		
	Accounting	19,467.		19,467.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	5,542.		5,542.	
g	Other. (If line 11g amount exceeds 10% of line 25,			-	
Ū	column (A), amount, list line 11g expenses on Sch 0.)	82,953.	78,322.	4,631.	
2	Advertising and promotion	6,699.	5,592.	152.	955
3	Office expenses	35,548.	20,062.	10,726.	4,760
4	Information technology	2,424.	2,024.	55.	345
5	Royalties				
6	Occupancy	33,323.	22,814.	1,440.	9,069
7	Travel	9,380.	5,588.	520.	3,272
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	10,106.	10,106.		
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	770.	459.	42.	269
3	Insurance	12,909.	9,803.	426.	2,680
4	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 0.)				
а	EASEMENT ACQUISITION	453,816.	453,816.		
b	LAND MANAGEMENT	107,385.	107,385.		
с					
d					
	All other expenses	4,414.		4,414.	
5	Total functional expenses. Add lines 1 through 24e	1,667,683.	1,415,552.	72,546.	179,585
6	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 Fight if following SOP 98-2 (ASC 958-720)				

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Form **990** (2021)

GROUNDSWELL CONSERVANCY, INC.

Beginning of year Eth of year 1 Cash - non-interest-baaring 1, 017. 1 862. 2 Savings and temporary cash investments 288,450. 2 181,473. 3 Pedges and grants reactables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or frainly member dary of these persons 5 5 6 Laans and other receivables from other disqualified persons (as defined under saction 4958(f)(1), and persons described in section 4958(c)(3)(5) 6 6 7 Notes and loans receivable, net 0 7 550,0000. 9 Prepried expenses and deferred charges 0,7,500,786. 6 10ar Land, buildings, and quajament: cost or other back contributs. 10,481. 7,168,293. 100 7,990,305. 11 Investments - other sourcitles. See Part IV, line 11 18,576. 12 31,694. 13 Investments - other sourcitles. See Part IV, line 11 18,575. 16 10,038.7,13.3. 14 Intragible assets. Add lines 11 through 15 frout equal line 33. 9,070,920. 10,038.7,13.3. 16 Tother assets.See Pa			Check if Schedule O contains a response or not	e to any	/ line in this Part X			
2 Savings and temporary cash investments 288,450. 2 181,473. 3 Piedges and grants receivable, net 0.3 297,267. 4 Accounts receivables, not 4 3 5 Laars and other receivables from any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Laars and other receivables from other disqualified persons (as defined under section 4958(0)(3)(8) 6 7 7 Notes and loars receivables, net 0.8 8 550,000. 8 throntoris for sale quipoment, cost or other basis. Complete Part VI of Schedule D 10a 7, 500,786. 840,427. 11 670,437. 11 Investments - publicity traded securities 10a 7, 500,786. 18.40,427. 11.670,437. 12 Investments - publicity traded securities 10a 7, 500,786. 19.30. 19.070,920. 10a 745,516. 107,719,437. 14 Intragible assets. See Part IV, line 11 18.578. 12.31,694. 10,038,713. 16 Other assets. See Part IV, line 11 19.070,920. 16 10,038,713.			·			(A)		
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3 Piedges and grants receivable, net 0. 3 297, 267. 4 Accounts 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 a defined under section 4958(f)(1), and persons described in section 4958(6)(3)(8) 6 7 Notes and loans receivables from other disqualified persons (as defined under section 4958(f)(1), and persons described in section 4958(6)(3)(8) 7 10 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1), and persons described in section 4958(6)(3)(8) 7 11 Notes and loans receivable, net 0. a 550, 000. 12 Leans and other receivables from other disqualified persons (as defined under sectine 4958(f)(1), and persons described in section 4958(6)(3)(8) 7 7 13 Investments other sectines. See Part IV, line 11 10a 7, 500, 7866. 7 14 Investments other sectifies. See Part IV, line 11 18, 578. 131, 694. 14 Intragible assets. 9, 070, 220. 16 10, 0.38, 713. 17 Accounts payable and accrued expenses 39, 335. 18 54, 293. 16 Total assets. Add lines 1 through 15 (must equal line 33) 9, 070, 220. 16 <th></th> <th>2</th> <td></td> <td></td> <td></td> <td>288,450.</td> <td>2</td> <td>181,473.</td>		2				288,450.	2	181,473.
4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 33% controlled entity or family member of any of these persons (a defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 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) 7 7 Notes and loans receivable, net 7 7 9 Prepaid expenses and deferred charges 8, 639. 9 9, 4779. 10 Lass: accumulated depreciation 10a 7, 500, 786. 10b 10, 481. 7, 168, 293. 10c 7, 590, 305. 11 Investments - publicity traded securities 10b 10, 481. 7, 168, 293. 10c 7, 590, 305. 11 Investments - publicity traded securities 10b 10, 481. 7, 168, 293. 10c 7, 590, 305. 11 Investments - publicity traded securities 10a 7, 450, 7, 166. 10a, 7, 168. 10a, 10, 481. 7, 168, 293. 10c 7, 590, 305. 10c 10a, 10, 481. 10a, 10, 481. 10a, 10, 481. 10a, 10, 481. 10a, 10, 481		3				0.	3	297,267.
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	es							
	anc	27				8,506,077.	27	9,410,827.
	Bala	28 Net assets with donor restrictions						
	Πpc							,
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	ets							
	Ass				and the set of second sec			
	let /				····· -	8,959,606.		9,938,990.
33 Total liabilities and net assets/fund balances 9,070,920. 33 10,038,713.	Z					9,070,920.	33	10,038,713.

Form 990 (2021)
Part X Balance Sheet

Form	990 (2021) GROUNDSWELL CONSERVANCY, INC.	39-	1452825	Pag	_{ge} 12
Par	t XI Reconciliation of Net Assets				-
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,200		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,667		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,533	<u> </u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,959		
5	Net unrealized gains (losses) on investments	5	-526	5,52	18.
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	-27	7,1	53.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	9,938	3,99	<u>90.</u>
Par	t 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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e 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 Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc			37
	Act and OMB Circular A-133?		<u>3a</u>		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2021)

132012 12-09-21

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization	
--------------------------	--

Nam	ame of the organization Employer identification number								
_				NSERVANCY, IN					9-1452825
Pa	tI	Reason for Public (Charity Status.	All organizations must c	omplete th	iis part.) S	ee instruction	S.	
The o	organi	zation is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only o	one box.)			
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2		A school described in section							
3		A hospital or a cooperative					-		
4		A medical research organize	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	(iii). Enter	the hospital's name,
_		city, and state:		1				- 14 - al - a - a - 11a -	
5		An organization operated for		lege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in
•		section 170(b)(1)(A)(iv). (C		and a local transfer and the set for					
6	X	A federal, state, or local gov	-						u de lie, ele e suite e el im
1	<u></u>	An organization that norma	-	mai part of its support in	om a gove	mmentar		ie general p	Sublic described in
8		section 170(b)(1)(A)(vi). (C A community trust describe			· II)				
9	=	An agricultural research org			-	d in coniu	nction with a	land-orant	college
•		or university or a non-land-g				-		-	-
		university:	,			·····, ··· ,			
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from co	ontributior	is, membersh	ip fees, and	d gross receipts from
		activities related to its exem							
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	fter June 30, 1975.
		See section 509(a)(2). (Cor	nplete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public saf	ety. See	section 50)9(a)(4).		
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform the	ne functior	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section \$	5 09(a)(2) .	See section &	509(a)(3). (Check the box on
		lines 12a through 12d that	•••		-			-	
а		Type I. A supporting orga	-	-	• • • •	-			
		the supported organization			majority o	f the direc	tors or trustee	es of the su	ipporting
		organization. You must o	-						
b		Type II. A supporting org	-				-		-
		control or management o			ame persoi	ns that col	itrol or manag	ge the supp	Dorted
с		organization(s). You mus Type III functionally inte	-		in connect	ion with a	nd functional	lv integrate	ad with
C	L	its supported organization		·				iy integrate	a with,
d] Type III non-functionally		-				ted organiz	zation(s)
-		that is not functionally int		• • •				-	
		requirement (see instructi			•				
е		Check this box if the orga	nization received a v	written determination from	m the IRS	that it is a	Type I, Type	II, Type III	
		functionally integrated, or	Type III non-functior	nally integrated supportir	ng organiza	ation.			
f	Ente	r the number of supported o	organizations						
g		vide the following information			(iv) In the orga	nization listed			
	(1	i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi		(v) Amount of support (see ir	-	(vi) Amount of other support (see instructions)
		organization		above (see instructions))	Yes	No			
Tota									

GROUNDSWELL CONSERVANCY, INC.

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.)

See	Section 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.")	676,687.	3342354.	1607531.	1001029.	2706312.	9333913.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge			4 6 9 5 9 4	1.0.0.1.0.0.0	0.0000			
4	Total. Add lines 1 through 3	676,687.	3342354.	1607531.	1001029.	2706312.	9333913.		
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,						400 000		
	column (f)						403,079.		
	Public support. Subtract line 5 from line 4. ction B. Total Support						8930834.		
		()	(1) 00 (0	() 00/0	()) 00000	()	(0		
	ndar year (or fiscal year beginning in)	(a) 2017 676,687.	(b) 2018 3342354.	(c)2019 1607531.	(d) 2020 1001029.	(e) 2021 2706312.	(f) Total 9333913.		
-	Amounts from line 4	070,007.	5542554.	100/331.	1001029.	2700312.	32223720		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,	21,107.	19,676.	17,388.	19,977.	25,564.	103,712.		
~	and income from similar sources	21,107.	19,070.	I7,500.	19,911.	23,304.	103,712.		
9	Net income from unrelated business								
	activities, whether or not the								
10	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)						9437625.		
11	Total support. Add lines 7 through 10 Gross receipts from related activities,					12	299,619.		
12 13	First 5 years. If the Form 990 is for th			fourth or fifth tox y	voor op o opotion E		255,015.		
13	organization, check this box and stop	0		, ,		()()			
Sec	ction C. Computation of Publi				•••••••••••••••••••••••••••••••••••••••				
	Public support percentage for 2021 (I			column (f))		14	94.63 %		
15	Public support percentage from 2020		•			15	98.93 %		
	33 1/3% support test - 2021. If the o								
	stop here. The organization qualifies								
b	33 1/3% support test - 2020. If the o		÷						
	and stop here. The organization qual					,,			
17a	10% -facts-and-circumstances test		•						
	and if the organization meets the fact								
	meets the facts-and-circumstances te			-	-				
b	0 10% -facts-and-circumstances test	-	-		-				
~	more, and if the organization meets th	-							
	organization meets the facts-and-circl								
18									
	Schedule A (Form 990) 2021								

132022 01-04-22

Schedule A				CONSERVANCY,	
Part III	Support	: Schedule f	or Organizations D	escribed in Section	509(a)(2)

GROUNDSWELL CONSERVANCY, INC.

(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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 202	1 (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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3							
	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	Amounts included on lines 1, 2, and 3 received from disgualified persons						
	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 202	1 (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						
k	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	-			-		
0-	check this box and stop here	- 0					
	ction C. Computation of Publ						
	Public support percentage for 2021 (15	%
	Public support percentage from 2020 ction D. Computation of Invest					16	%
				no 12 oclumn (f)		17	0/
	Investment income percentage for 2					17	<u> </u>
	Investment income percentage from a 33 1/3% support tests - 2021. If the			on line 14 and line			
198	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2020. If the						▶∟
Ľ	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
-	23 01-04-22	and not oncon a	200, 011 110 14, 10	., e. 199, encor u			dule A (Form 990) 2021
			15			00.10	

2021.05080 GROUNDSWELL CONSERVANCY, 06353.11

GROUNDSWELL CONSERVANCY, INC.

1

2

3a

3b

3c

4a

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

132024 01-04-21

4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2021

Sche	edule A (Form 990) 2021	GROUNDSWELL CONSERVANCY, INC.	39-14528	25 р	age 5
Ра	rt IV Supporting Orga	nizations (continued)			
				Yes	No
11	Has the organization accepte	d a gift or contribution from any of the following persons?			
а	A person who directly or indir	ectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing boo	dy of a supported organization?	11a		
b	A family member of a person	described on line 11a above?	11b		
с	A 35% controlled entity of a p	person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	<i>detail in</i> Part VI.		11c		
Sor	tion B Type I Supportin	na Organizations			

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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization</i> (s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization.	2
Section C. Type II Supporting Organizations	

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Sec	
	Did the executive tension are vide to each of its supported executive to be the last day of the fifth month of the
	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?
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how
	the organization maintained a close and continuous working relationship with the supported organization(s)

3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a
	significant voice in the organization's investment policies and in directing the use of the organization's
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

utina Oranani-atiana

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

с		The organization supported a governmental entity.	Describe in Part VI how you supported	a governmental entity (see instruction <u>s).</u>
---	--	---	---------------------------------------	---

17

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

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

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 132025 01-04-22

3b Schedule A (Form 990) 2021

CROUNDSWELL CONSERVANCY

2021.05080 GROUNDSWELL CONSERVANCY, 06353.11

Yes No

Yes No

Yes No

Yes No

1

1

1

2

3

2a

2b

3a

GROUNDSWELL CONSERVANCY, INC. Schedule A (Form 990) 2021 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functiona	Ilv integrated	d Type III supporting orga	nization (see

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990) 2021

132026 01-04-22

1

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Schedule A (Form 990) 2021

1 Amounts paid to supported organizations to accomplish exempt purposes

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

Section D - Distributions

	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	;	3		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		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	ne organization is responsive			
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	IS	(iii) Distributable Amount for 2021
_1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
e	e From 2020				
f	f Total of lines 3a through 3e				
<u> </u>	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
e	Excess from 2021				
				Sc	hedule A (Form 990) 2021

GROUNDSWELL CONSERVANCY, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

39-1452825 Page 7

1

Current Year

Schedule A	(Form 990) 2021	GROUN	DSWELL	CONSER	VANCY,	INC.		39-1452825 Page
Part VI	Supplemental Inf Part IV, Section A, lines line 1; Part IV, Section Section D, lines 5, 6, au	D, lines 2 and 3	3; Part IV, Se	ction E, lines	1c, 2a, 2b, 3	3a, and 3b; Pa	rt V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Section C, , Section B, line 1e; Part V,
	(See instructions.)							
132028 01-04-2	2							Schedule A (Form 990) 20
_					20			: , , –

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

Name of the organizati	on	Employer identificat
	GROUNDSWELL CONSERVANCY, INC.	39-1452825
Organization type (che	eck 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 \dots **b** \$

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).

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

GROUNDSWELL CONSERVANCY, INC.

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 305,500. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll <u>101,9</u>04. Noncash X (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 443,300. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll Noncash 384,515. \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll X 550,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

Employer identification number

<u>39-145</u>2825

123452 11-11-21

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	B (Form 990) (2021)			Page
Name of o	rganization		Employ	ver identification number
GROUN	DSWELL CONSERVANCY, INC.		39	-1452825
Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is neede	d.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
2	1,725 SHARES OF ONEOK, INC (OKE)	—		
		\$101,9	04.	12/28/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
5	DONATED LAND			
		\$550,0	00.	02/25/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		 \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
123453 11-11		\$		

^{123453 11-11-21}

Schedule B (Form 990) (20	21)				Page 4
Name of organization					Employer identification number
GROUNDSWELL CO	ONSERVANCY, INC.				39-1452825
Part III Exclusively reli from any one c completing Part III,	gious, charitable, etc., contributi	ons to organizations describ through (e) and the following charitable, etc., contributions of \$1	a line entry. For or	nanizations	hat total more than \$1,000 for the year $(e_1) \rightarrow $
(a) No. from (b) Part I	Purpose of gift	(c) Use of gi	ft	(d) Desc	cription of how gift is held
		(e) Transfe	r of gift		
Tra	ansferee's name, address, ar	nd ZIP + 4	Re	lationship of tra	nsferor to transferee
(a) No.					
from (b) Part I	Purpose of gift	(c) Use of gi	ft	(d) Desc	cription of how gift is held
		(e) Transfe	r of gift		
Tra	ansferee's name, address, ar	nd ZI P + 4	Re	lationship of tra	nsferor to transferee
(a) No. from (b) Part I	Purpose of gift	(c) Use of gi	ft	(d) Desc	cription of how gift is held
		(e) Transfe	r of gift		
Tra	ansferee's name, address, ar	nd ZIP + 4	Re	lationship of tra	nsferor to transferee
(a) No. from (b) Part I	Purpose of gift	(c) Use of gi	ft	(d) Desc	cription of how gift is held
		(e) Transfe	r of gift		
Tra	ansferee's name, address, ar	nd ZIP + 4	Re	lationship of tra	nsferor to transferee
123454 11-11-21					Schedule B (Form 990) (2021)

25 2021.05080 GROUNDSWELL CONSERVANCY, 06353.11

SCHEDULE C	Po	litical Campaign a	nd Lobbying	g Activities		OMB No. 1545-0047
(Form 990)				-	_	2021
		anizations Exempt From Income				ZUZ I
Department of the Treasury		if the organization is described I			90-EZ.	Open to Public Inspection
Internal Revenue Service		Go to www.irs.gov/Form990 for in				•
•		Form 990, Part IV, line 3, or Form		e 46 (Political Camp	aign Activ	vities), then
		plete Parts I-A and B. Do not com		Do not complete Dar		
 Section 501(c) (other Section 527 organization 		1(c)(3)) organizations: Complete P	arts I-A and C below. L	Jo not complete Part	Ι-В.	
0		Form 990, Part IV, line 4, or For	n 990-E7 Part VI lin	e 47 (Lobbying Activ	vitios) th	en
-		nave filed Form 5768 (election und			-	
		nave NOT filed Form 5768 (election		•		
	•	Form 990, Part IV, line 5 (Proxy	())	•		•
Tax) (See separate inst					,	, , , , , , , , , , , , , , , , , , ,
 Section 501(c)(4), (5) 	, or (6) organizat	ions: Complete Part III.				
Name of organization						r identification number
		WELL CONSERVANCY,				39-1452825
Part I-A Comple	ete if the org	anization is exempt under	section 501(c) o	r is a section 52	7 organ	nization.
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	Part IV.		
2 Political campaign					▶\$	
3 Volunteer hours for	political campai	gn activities				
Part I-B Comple	oto if the ore	anization is exempt under				
-					•	
		incurred by the organization under				
		incurred by organization managers				Yes No
		n 4955 tax, did it file Form 4720 fo				
b If "Yes," describe in						
		anization is exempt under	section 501(c), e	except section 5	01(c)(3)	•
-		by the filing organization for secti		-		
		ization's funds contributed to othe			· · ·	
exempt function ac			-		▶\$	
•		. Add lines 1 and 2. Enter here and			· · ·	
line 17b					▶\$	
		1120-POL for this year?				Yes No
5 Enter the names, a	ddresses and em	ployer identification number (EIN)	of all section 527 polit	ical organizations to	which the	e filing organization
		tion listed, enter the amount paid f				
		omptly and directly delivered to a s		,	parate se	gregated fund or a
political action com	imittee (PAC). If a	additional space is needed, provide	e information in Part IV	/.		
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid f		(e) Amount of political
				filing organizatio		ntributions received and promptly and directly
					0	delivered to a separate
						political organization. If none, enter -0
	ion Ant Nation	and the Instructions for Form 000) or 000 EZ		Cali	dula C (Carm 000) 2021

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

Schedule C (Form 990) 2021

132041 11-03-21

Schedule C (Form 990) 2021	GROUNDSWELL	CONSERVANCY	, INC.	39-1	452825 Page 2
Part II-A Complete if the orga	anization is exem	pt under section	501(c)(3) and file	d Form 5768 (ele	ction under
section 501(h)).					
	ion belongs to an affili e of excess lobbying e	* • •	Part IV each affiliated g	group member's name	e, address, EIN,
	ion checked box A an	, ,	visions apply		
¥ ¥		•		(a) Filing	(b) Affiliated group
	s on Lobbying Expen itures" means amour			organization's totals	totals
1a Total lobbying expenditures to influ	ence public opinion (g	rassroots lobbying)		0.	
b Total lobbying expenditures to influ				0.	
c Total lobbying expenditures (add lin	nes 1a and 1b)			0.	
d Other exempt purpose expenditure	s			1,667,683.	
e Total exempt purpose expenditures				1,667,683.	
f Lobbying nontaxable amount. Ente	r the amount from the	following table in both	columns.	233,384.	
If the amount on line 1e, column (a) or		ying nontaxable amo	ount is:		
Not over \$500,000		he amount on line 1e.			
Over \$500,000 but not over \$1,000	· · · · · · · · · · · · · · · · · · ·	D plus 15% of the exce			
Over \$1,000,000 but not over \$1,50		D plus 10% of the exce			
Over \$1,500,000 but not over \$17,0) plus 5% of the exces	<u>s over \$1,500,000.</u>		
Over \$17,000,000	\$1,000,0	00.			
g Grassroots nontaxable amount (ent	er 25% of line 1f)			58,346.	
h Subtract line 1g from line 1a. If zero	,			0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than zer			•		
reporting section 4911 tax for this y	•				Yes No
	4-Year Ave	raging Period Under	Section 501(h)		
(Some organizations th		1(h) election do not h te instructions for lin	•	f the five columns be	low.
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	284,080.	235,141.	167,145.	233,384.	919,750.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,379,625.
c Total lobbying expenditures	17,750.		25,137.		42,887.
d Grassroots nontaxable amount	71,020.	58,785.	41,786.	58,346.	229,937.
e Grassroots ceiling amount	,		,		
(150% of line 2d, column (e))					344,906.
f Grassroots lobbying expenditures	17,542.		25,137.		42,679.
				Schedu	le C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	n lines 1a through 1i below, provide in Part IV a detailed description (a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
	Total. Add lines 1c through 1i				
b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), or sec	tion Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."	n 501(c)(5), or sec		3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).				
а	Current year		. 2a		
	Carryover from last year				
С	Total				
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po expenditure next year?	ess olitical			
5	Taxable amount of lobbying and political expenditures. See instructions				
Par			-		
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	, lines 1 a	nd 2 (See	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2021

132043 11-03-21

SCHEDU	LE D
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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.



Department of the Treasury Internal Revenue Service

Nam	e of the organization GROUNDSWELL CONSERV	ANCY. INC.	E	Employer identification number 39-1452825
Pa			or Acco	
	organization answered "Yes" on Form 990, Part IV, line			
		(a) Donor advised funds	(b) [- unds and other accounts
1	Total number at end of year		(2)	
2	Aggregate value of contributions to (during year)			
2	Aggregate value of grants from (during year)			
4	Aggregate value of grants norm (during year)			
5	Did the organization inform all donors and donor advisors in wr	iting that the assets held in donor advis	od funde	
Ű	are the organization's property, subject to the organization's ex-	-		Yes No
6	Did the organization inform all grantees, donors, and donor adv			
•	for charitable purposes and not for the benefit of the donor or o			
			•	Yes No
Pa				
1	Purpose(s) of conservation easements held by the organization		,	
	X Preservation of land for public use (for example, recreation		a historica	ally important land area
	X Protection of natural habitat			historic structure
	X Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	of a conse	rvation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2	a 78
b				ь 7,542.00
c	Number of conservation easements on a certified historic struct			c 0
	Number of conservation easements included in (c) acquired aft		·····	
-	listed in the National Register			d 0
3	Number of conservation easements modified, transferred, relea			-
-	vear ► 0		o guinzai	
4	Number of states where property subject to conservation ease	ment is located		
5	Does the organization have a written policy regarding the perio			
-	violations, and enforcement of the conservation easements it h			X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha			
	► 319			0,
7	Amount of expenses incurred in monitoring, inspecting, handlir	ng of violations, and enforcing conservat	tion easem	ents during the year
	▶\$ 22,686.	-		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's financial stateme	ents that d	escribes the
	organization's accounting for conservation easements.			
Pa	t III Organizations Maintaining Collections of A		her Sim	ilar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its revenue statement a	nd balance	e sheet works
	of art, historical treasures, or other similar assets held for public	c exhibition, education, or research in fu	rtherance	of public
	service, provide in Part XIII the text of the footnote to its finance	ial statements that describes these item	S.	
b	If the organization elected, as permitted under FASB ASC 958,	to report in its revenue statement and b	balance sh	eet works of
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furth	erance 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 treas	ures, or other similar assets for financia	l gain, prov	vide
	the following amounts required to be reported under FASB AS	C 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			► \$
b	Assets included in Form 990, Part X			► \$

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Schedule D (Form 990) 2021

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Sche		WELL CONSER				39-14			age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Otl	ner Sim	ilar Assets	s (contir	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that mak	e significa	ant use of its			
	collection items (check all that apply):			Ū	U U				
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е		51 5					
c	Preservation for future generations	_							
4	Provide a description of the organization's co	lections and explain	how they further th	e organization's e	xempt pi	mose in Part	XIII		
5	During the year, did the organization solicit of	-	•	-		-	/		
Ū	to be sold to raise funds rather than to be ma			,			Yes		No
Par	t IV Escrow and Custodial Arrange								
	reported an amount on Form 990, Par		ie in the english and			,			
	Is the organization an agent, trustee, custodia		ary for contributions	s or other assets n	ot includ	ed			
14	on Form 990, Part X?		•				Yes		No
h	If "Yes," explain the arrangement in Part XIII					····· ∟		L	
, D			Swing table.		Г		Amoun	t	
~	Beginning balance				-	lc		-	
	Additions during the year				······ —	ld			
	Distributions during the year					le			
f						16 1f			
22	Ending balance Did the organization include an amount on Fo				····· <u> </u>	<u></u>	Yes		No
	If "Yes," explain the arrangement in Part XIII.				•	····· ·			
Par									
		(a) Current year	(b) Prior year	(c) Two years bac		ree years back	(e) Four	vears	back
19	Beginning of year balance	745,516.	602,362.	614,70		500,470.	(-)	-	146.
b	Contributions	9,860.	11,334.			92,533.		,	,600.
0	Net investment earnings, gains, and losses	-19,653.	156,849.	,					803.
с А		25,000.	100,015.						
u									
е	Other expenditures for facilities	21,027.	18,470.	16,06	9	14,858.		13	473.
	and programs	7,500.	6,559.			14,000.			175.
	Administrative expenses	707,196.	745,516.			614,703.		500	470.
g	End of year balance [Provide the estimated percentage of the curr	· · · ·	,	,	· ·	011,700.		,	
2	Board designated or quasi-endowment	40.1300	%) field as.					
a h	Permanent endowment .0000	%	_70						
b		⁷⁰							
С	The percentages on lines 2a, 2b, and 2c should be the second seco	, -							
20	Are there endowment funds not in the posses		ion that are hold an	d administered fo	r the ered	nization			
Ja		ssion of the organizat		a autimistered to	r the orga	Inzation	l	Yes	No
	by: (i) Unrelated organizations						3a(i)	X	<u> </u>
							3a(ii)		x
h	(ii) Related organizations If "Yes" on line 3a(ii), are the related organiza						3b		<u> </u>
1	Describe in Part XIII the intended uses of the						30		L
Par			ment lunus.						
	Complete if the organization answered		Part IV line 11a S	ee Form 990 Part	X line 1	1 I			
	Description of property	(a) Cost or ot) Accum		(d) Boo	k volu	
	Description of property	basis (investm	. ,	(other)	deprecia		(u) 600	r valu	e
1-	Land	`	,	8,765.	30010014		7,58	8 7	65
	Land		7,50	<u>,,,,,,</u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	., /	55.
	Buildings			1,998.	1	,998.			0.
	Leasehold improvements			0,023.		,483.		1,5	
	Equipment		⊥	0,023.	0	, =0.5 •		1,5	<u> </u>
-	Other						7,59	<u> </u>	05
Iota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part X</u>	<u>, column (B), line 1</u>		<u></u>				
						Schedule	e D (Forn	n 990)	/ 2021

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	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	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
		ADISON COMMUNITY	
(2) FOUNDATION			707,196.
(3)			- ,
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		707,196.
Part X Other Liabilities.	, (0.)		···/··
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)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	25)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 2. Liability for uncertain tax positions. In Part XIII, provide			L hat reports the
- Elasing for anoonain tax positions. In r art All, provide		and angumentation o manolal statements t	

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

132053 10-28-21

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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.

(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	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	I-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line ⁻	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value

Sche	edule D (Form 990) 2021 GROUNDSWELL CONSERVANCY, I				1452825 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Re [.]	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	1 .			
1	Total revenue, gains, and other support per audited financial statements			1	2,675,870.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	-526,518.		
b	Donated services and use of facilities	. 2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		-5,542.		
е	Add lines 2a through 2d			2e	-532,060.
3	Subtract line 2e from line 1			3	3,207,930.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
۲	Other (Describe in Part XIII.)	. 4b	-7,192.		
b	Add lines 4a and 4b			4c	-7,192.
с С	Add lines 4a and 4b				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,200,738.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem		Expenses per F		<u>3,200,738.</u> n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ents With	Expenses per F		n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ents With	Expenses per F		3,200,738. n. 1,669,333.
5 Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per F	letur	n.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	ents With	Expenses per F	letur	n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents With	Expenses per F	letur	n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b	Expenses per F	letur	n.
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c	Expenses per F	letur	n. <u>1,669,333.</u>
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	letur	n. <u>1,669,333.</u>
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	Expenses per F	1	n.
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>1,669,333.</u>
5 Par 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	ents With	Expenses per F	1 2e	n. <u>1,669,333.</u>
5 Par 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 	Expenses per F	1 2e	n. <u>1,669,333.</u>
5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b	Expenses per F 7,192. 5,542.	1 2e	n. <u>1,669,333.</u> <u>7,192.</u> <u>1,662,141.</u> 5,542.
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	Expenses per F 7,192. 5,542.	1 2e 3	n. <u>1,669,333.</u> <u>7,192.</u> 1,662,141.

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.

<u>PART II, LINE 9:</u>

CONSERVATION EASEMENTS ACCEPTED OR PURCHASED BY GROUNDSWELL ARE NOT
RECOGNIZED AS ASSETS OR REVENUE IN THE ACCOMPANYING FINANCIAL STATEMENTS
BECAUSE GROUNDSWELL DOES NOT HOLD FEE TITLE TO THESE PROPERTIES AND THERE
ARE NO EXPECTED FUTURE ECONOMIC BENEFITS ASSOCIATED WITH THE EASEMENTS. IN
ADDITION, CONSERVATION EASEMENTS CARRY SIGNIFICANT OBLIGATIONS TO MONITOR
AND DEFEND THEIR TERMS. IF PURCHASED, THE COSTS OF CONSERVATION EASEMENTS
ARE EXPENSED WHEN THE EASEMENTS ARE ACQUIRED.

PART V, LINE 4:

GROUNDSWELL HAS TWO AGENCY ENDOWMENT FUNDS WITH THE MADISON COMMUNITY

 FOUNDATION TO SUPPORT EASEMENT ENFORCEMENT AND GROUNDSWELL'S OPERATIONS

 132054 10-28-21
 Schedule D (Form 990) 2021

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09370427 788028 06353.1AU01

-5,542.

FROM THE EARNINGS IN EACH OF THE TWO FUNDS.

GROUNDSWELL ALSO RECEIVED CONTRIBUTIONS RESTRICTED FOR CONSERVATION

EASEMENT STEWARDSHIP AND DEFENSE.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES REPORTED ON FORM 990, PART IX,

LINE 11F

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DIRECT EXPENSES REPORTED ON FORM 990, PART VIII, LINE 8B -7,192.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT EXPENSES REPORTED ON FORM 990, PART VIII, LINE 8B 7,192.

Schedule D (Form 990) 2021

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SCHEDULE I (Form 990)	Go	irants and Oth vernments, an ete if the organization	d Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		► Go to www.ir	Attach to For		nation.		Open to Public Inspection
Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Inspectio Name of the organization GROUNDSWELL CONSERVANCY, INC. Employer identification in 39-1452							
Part I General Information on Grants		-					
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's pi 	istance?						
Part II Grants and Other Assistance to recipient that received more than	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
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
OPERATION FRESH START INC. 2670 MILWAUKEE STREET MADISON, WI 53704	23-7108090	501(C)(3)	15,000.	0.			GENERAL PURPOSES
VILLAGE OF WAUNAKEE 500 W MAIN STREET WAUNAKEE, WI 53597	39-6006402	STATE OF WISCONSIN	0.	405,475.	FAIR MARKET VALUE	LAND	LOCAL CONSERVATION MANAGEMENT
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization 	ns listed in the line ⁻	I table					

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

Schedule I (Form 990) 2021

39-1452825

Page 2

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					

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:

GROUNDSWELL CONSERVANCY REVIEWS REPORTS SUBMITTED BY GRANTEES DESCRIBING

EXPENDITURE OF FUNDS GRANTED.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

ZUZ

Open to Public

Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

	GROUNDSWELL	CONSER	VANCY, ING	2.		39-	-1452	825	
Par	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contril amounts report Form 990, Part VII	ed on	(Method of noncash contri		0	S
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	1	101	,904.	QUOTED MAR	KET I	PRIC	CE
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	3	591	.853.	OPINIONS O	F EX	PER	TS
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								
23 24									
24 25	Archeological artifacts								
23 26	Other ► () Other ► ()								
20 27	Other ()								
21 28	Other ()								
<u>20</u> 29	Number of Forms 8283 received by the organiz	I zation during	l 1 tha tax year for a	ontributions					
23	for which the organization completed Form 82				29			1	
	for which the organization completed FORM 82	ου, mart V, D	onee Acknowledg	ement	29		Ī	⊥ Yes	N
20-	During the year did the exception receive h	v ooptrikutie	n onu nuonouti	autod in Dout L. Kings	1 throws	ab 00 that it		res	
зua	During the year, did the organization receive b	-	• • • • •		-				
	must hold for at least three years from the date	-					001		x
	exempt purposes for the entire holding period'	<i>(</i>					<u>30a</u>		
b	If "Yes," describe the arrangement in Part II.								

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

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

contributions?

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

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b If "Yes," describe in Part II.

describe in 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 ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED IN

COLUMN B.

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39-1452825

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OMB No. 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O Complete to provide information for responses to specific questions on (Form 990) Form 990 or 990-EZ or to provide any additional information. Open to Public Attach to Form 990 or Form 990-EZ. Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Inspection Internal Revenue Service Employer identification number Name of the organization 39-1452825 GROUNDSWELL CONSERVANCY, INC. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: ANONYMOUS LANDOWNER ALSO SOLD US 38 ACRES OF LAND ALONG BLACK EARTH CREEK. THE PROPERTY INCLUDES 3/4 OF A MILE OF SHORELINE ON BOTH SIDES IT IS ADJACENT TO LAND OWNED BY THE DNR AS PART OF THE THE CREEK. OF BLACK EARTH CREEK FISHERY AREA. ALSO ALONG BLACK CREEK Α CONSERVATION-MINDED FAMILY SOLD GROUNDSWELL AN AGRICULTURAL CONSERVATION EASEMENT OF OVER 93 ACRES. GROUNDSWELL ALSO PURCHASED 40 ACRES OF LAND AT DELL CREEK WILDLIFE AREA IN SAUK COUNTY. THIS ACQUISITION CAME TOGETHER THANKS TO THE GENEROSITY OF THE LANDOWNER SEAN MCBRIDE, KNOWLES-NELSON STEWARDSHIP PROGRAM, AND GROUNDSWELL SUPPORTERS. GROUNDSWELL ALSO PURCHASED 20 ACRES OF WETLAND AND WOODS AT ANDERSON WATERFOWL PRODUCTION AREA IN SOUTHERN COLUMBIA COUNTY. THIS MIDTHUN ADDITION WAS DONATED TO THE U.S. FISH AND WILDLIFE SERVICE. NANCY HEIDEN, A FOUNDER OF GROUNDSWELL GENEROUSLY DONATED A 13-ACRE PARCEL OF LAND ON THE SOUTH SIDE OF THE WISCONSIN RIVER TO GROUNDSWELL. GROUNDSWELL WILL PLACE A CONSERVATION EASEMENT ON THE PROPERTY AND EVENTUALLY SELL IT TO A CONSERVATION-MINDED LANDOWNER. THE PROCEEDS WILL SUPPORT OUR CONSERVATION WORK FOR YEARS TO COME. THE TOWN OF DUNN AND GROUNDSWELL CONSERVANCY PLACED IN EARLY AUGUST, Α

PERMANENT CONSERVATION EASEMENT ON THE PETERSON FAMILY CENTENNIAL FARM. THE EASEMENT PRESERVES VALUABLE FARMLAND BY RESTRICTING DEVELOPMENT ON

THE 133-ACRE PROPERTY. A 300 FOOT WIDE VEGETATIVE BUFFER BETWEEN THE

PROPERTY AND HOOK LAKE WILL PROTECT WATER QUALITY AND PROVIDE WILDLIFE

HABITAT. THE LAKE ENCOMPASSES HOOK LAKE BOG STATE NATURAL AREA, A RARE

 COMMUNITY IN SOUTHERN WISCONSIN. IN 24 YEARS OF PARTNERSHIP WITH THE

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Name of the organization	Employer identification number
GROUNDSWELL CONSERVANCY, INC.	39-1452825
	•
TOWN OF DUNN, WE HAVE PROTECTED 4000 ACRES OF RICH FARMLAN	D FARMS.
BEHIND EACH OF THESE FARMS IS AN INDIVIDUAL OR FAMILY WHO	KNOWS THE
VALUE OF LAND. EACH OF THEM HAS CHOSEN TO LEAVE A LEGACY C	F LAND

AT PATRICK MARSH, GIRL SCOUT EXTRAORDINAIRE LAURETTA LOESCH LED A TEAM OF GROUNDSWELL OUTDOOR VOLUNTEERS TO ADD A COMPLETELY NEW BOARDWALK WITH A FOCUS ON ACCESSIBILITY. NOW EVERYONE CAN ENJOY IMPROVED ACCESS TO NATURE AT ONE OF THE AREA'S FAVORITE LOCAL GREEN SPACES. GROUNDSWELL ALSO PLANTED 25 ACRES OF PRAIRIE AT PATRICK MARSH.

OUR SUMMER INTERN PRAIRIE PARTNERS CREW IMPROVED WILDLIFE HABITAT AT WESTPORT PRAIRIE AND PATRICK MARSH AND GAINED VALUABLE WORK EXPERIENCE ABOUT MANAGING NATURAL AREAS.

GROUNDSWELL SUPPORTERS AND THE PUBLIC ENJOYED NATURE EXPERIENCES, INCLUDING A WINTER BONFIRE AND HIKE AT PATRICK MARSH, A HISTORIC INDIAN AGENCY HOUSE TOUR AND WALK IN PORTAGE, A BOTANY AND POETRY WALK AT WESTPORT PRAIRIE, TWO FOOD CART NIGHTS WITH PRAIRIE WALKS IN THE TOWN OF DUNN AND AT PATRICK MARSH, AND AN INSECT SAFARI WITH KIDS AT PATRICK MARSH,

IN MAY, GROUNDSWELL AND SUPPORTERS CELEBRATED IMPROVED ACCESS AT WESTPORT PRAIRIE, WITH A NEW PARKING AREA, TWO NEW TRAILS, AND KIOSK SIGNAGE. GROUNDSWELL CONTINUES TO IMPROVE ACCESS AT THE PRAIRIE AND TO RESTORE THE PRAIRIE LANDSCAPE FOR PLANTS AND WILDLIFE. AT WESTPORT FARM, WE INSTALLED A NEW WATER DISTRIBUTION SYSTEM. NOW EACH OF OUR GROWERS HAS ACCESS TO WATER NEAR THEIR CROPS. Schedule O (Form 990) 2021 132212 11-11-21 39

MANY HMONG ELDERS ARE LIVING WITH POST-TRAUMATIC STRESS DISORDER AND DEPRESSION BECAUSE THEY SURVIVED NON-STOP TRAUMA THEIR WHOLE LIVES. GARDENING IS A THERAPEUTIC ANTIDOTE TO THESE DISORDERS. IT IS A LIFELONG ACTIVITY FOR THE ELDERS AND IS RESISTANT TO MEMORY LOSS. GARDENING ALSO ALLOWS THE ELDERS TO FEED THEIR FAMILIES, CONTRIBUTING TO THEIR SENSE OF WORTH AND CONNECTING THEM TO NATURE. SINCE THE START OF THE PANDEMIC IN 2020 AND EXTENDING INTO 2021, HMONG ELDERS HAVE BEEN SOCIALLY ISOLATED AT HOME AND THE ISOLATION HAS INCREASED THEIR FEELINGS OF MEANINGLESSNESS. IN PARTNERSHIP WITH THE SOUTHEAST ASIAN HEALING CENTER, THIS YEAR GROUNDSWELL IS CREATING ACCESS TO LAND FOR THERAPEUTIC HEALING FOR HMONG ELDERS LIVING WITH PTSD, DEPRESSION, AND DEMENTIA. THE ONE-ACRE THERAPY GARDEN IS LOCATED AT OUR WESTPORT FARM EAST OF WAUNAKEE.

GROUNDSWELL CONSERVANCY WAS ESTABLISHED IN 1983 AND HAS PERMANENTLY PROTECTED NEARLY 14,000 ACRES OF IMPORTANT LAND AND WATER. GROUNDSWELL IS ACCREDITED BY THE LAND TRUST ACCREDITATION COMMISSION.

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

THE PREPARED FORM 990 IS SHARED WITH THE ENTIRE BOARD FOR REVIEW AND COMMENT AND IS THEN SUBMITED FOR REVIEW AND APPROVAL BY THE MEMBERS OF THE EXECUTIVE COMMITTEE BEFORE THE RETURN IS FILED WITH THE IRS.

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

THE ORGANIZATION'S EXECUTIVE DIRECTOR ANNUALLY VERIFIES THAT ALL CONFLICT

OF INTEREST STATEMENTS HAVE BEEN COMPLETED AND ARE UP TO DATE. ANY

POTENTIAL CONFLICTS ARE REVIEWED BY THE MEMBERS OF THE GOVERNING BODY'S Schedule O (Form 990) 2021 132212 11-11-21 40 2021.05080 GROUNDSWELL CONSERVANCY, 06353.11

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Name of the organization GROUNDSWELL CONSERVANCY, INC.	Employer identification number 39-1452825
EXECUTIVE COMMITTEE.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE GOVERNING BODY ANNUALLY DETERMINES THE EXECUTIV	E DIRECTOR'S

COMPENSATION BY DETERMINING AFFORDABILITY AND REVIEWING THE COMPENSATION

PAID FOR COMPARABLE POSITIONS BY SIMILAR AGENCIES IN THE AREA.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN BENEFICIAL INTEREST IN ASSETS HELD BY

MADISON COMMUNITY FOUNDATION

TOTAL TO FORM 990, PART XI, LINE 9

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