_	990
Form	

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021 Open to Public Inspection

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

		the Treasury ue Service	► Go to www.irs.gov/For	•	-	-	.	Inspection	
A			lendar year, or tax year beginning		, and e				
в		applicable:	C Name of organization Mahoosuc Lar	nd Trust Inc			nployer ident	ification number	
	Address	change	Doing business as						
	Name ch	0000	Number and street (or P.O. box if mail is not	delivered to street address)	Room/suite	01-04	47619		
	Name ch	ange	PO Box 981			E Te	lephone numb	ber	
Ш	Initial retu	urn	City or town	State	ZIP code	207-8	24-3806		
\square	Final return	n/terminated	Bethel	ME	04217				
\square	A	1	Foreign country name Foreign	province/state/county	Foreign postal		ana ranainta f	8,976,817	
\square	Amendeo	a return				G	oss receipts \$	0,970,017	
Ш	Applicatio	on pending	F Name and address of principal officer:			H(a) Is this a grou	p return for subo	rdinates? Yes X No	
			Kirk Siegel PO Box 981, Bethel, ME	04217		H(b) Are all sub	ordinates inclu	uded? Yes No	
Т	Tax-exe	mpt status:	X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527	If "No," atta	ach a list. See	instructions	
1			://www.mahoosuc.org/	, <u> </u>		H(c) Group exe	motion numbe	ar 🕨	
<u> </u>									
_		organization		tion Other ►	L Yea	ar of formation:	1989 M	State of legal domicile: ME	
	Part I		mmary						
m	1	-	escribe the organization's mission or	•		rotect and cor	nserve land	land	
Governance			al land uses including farming, recrea						
rna		water re	sources for the benefit of the public. T	he organization facilitate	es communit	y-based			
Ne	2	Check the	his box 🕨 🔄 if the organization disc	continued its operations	or disposed	of more than	25% of its	net assets.	
ŏ	3	Number	of voting members of the governing b	ody (Part VI, line 1a) .			3	18	
Activities &	4	Number	of independent voting members of the	e governing body (Part V	/I, line 1b) .		. 4	18	
tie	5		mber of individuals employed in calen					5	
Ę	6		mber of volunteers (estimate if neces					150	
Ac	7a		related business revenue from Part V					0	
	b		elated business taxable income from F					0	
				, , ,		Prior		Current Year	
Ø	8	Contribu	itions and grants (Part VIII, line 1h) .				836,403	8,830,872	
Revenue	9		n service revenue (Part VIII, line 2g).		0				
šče	10		ent income (Part VIII, column (A), line				103,725		
Ř	11		evenue (Part VIII, column (A), lines 5, 6		-15,788				
	12		renue—add lines 8 through 11 (must equ		924,340				
	13		and similar amounts paid (Part IX, colu				02 1,0 10		
	14		paid to or for members (Part IX, colu				0	-	
'n			other compensation, employee benefits		144,146	•			
Ise	16a		ional fundraising fees (Part IX, column		180				
Expenses	b		ndraising expenses (Part IX, column (I		103,486		100	- · · ·	
ŭ	17		kpenses (Part IX, column (A), lines 11		100,100		112,335	6,731,646	
	18		penses. Add lines 13–17 (must equal		25)		256,661		
	19		e less expenses. Subtract line 18 from				667,679		
2 4		Revenue				Beginning of (End of Year	
Net Assets or	20	Total as	sets (Part X, line 16)				3,881,268		
Ass	21		bilities (Part X, line 26)				65,924		
Net	22		ets or fund balances. Subtract line 21				3,815,344		
	art II		Inature Block				0,010,011	0,000,001	
			y, I declare that I have examined this return, inclu	ding accompanying schedules	and statements.	and to the best o	of my knowled	ae	
			ect, and complete. Declaration of preparer (other				-	5-	
0:									
Si			Signature of officer				Date		
He	re		Kirk Siegel		Exec	utive Director	-		
			Type or print name and title						
		Prin	t/Type preparer's name	Preparer's signature		Date		PTIN	
Ра	id					40/00/00	Check	if Dod 40 4000	
	eparer	r Ror		Ronald Smith		10/20/202			
	e Only		i's name ► RHR Smith & Company			Firm's	ein 🕨 04-3	383155	
_			ı's address ► 3 Old Orchard Road, Buxt	Phone	Phone no. 207-929-4606				

X Yes .

For Paperwork Reduction Act Notice, see the separate instructions.

No

PartIII Statement of Program Service Accomplishments Check if Scheduld Contains are seponse or note to any line in this Part III. 1 Birlefy describe the organization's mission: 7 protect and conserve line and traditional land uses including faming, recreation, significant habitats, scenery, and water resources for the banefit of the public. The sequencization understand and resolution land uses including faming, recreation, significant habitats, scenery, and water resources for the banefit of the public. The sequencization understand any significant changes in how it conducts, any program services and the organization case conducting, or make significant changes in how it conducts, any program services accompliatments for each of its three langest program services. If way, for each program service scored, the service is accompliatments for each of its three langest program services. If way, for each program service reported. 4 (Code:) (Expenses \$ 6,750,497,497,107,497,107,407,107,407,107,407,107,407,107,407,107,407,107,407,107,407,407,407,407,407,407,407,407,407,4	Form 9	90 (2021)	Mahoosuc Land Tru				01-	0447619	Page 2
To protect and conserve land and traditional land uses including familing, recreation, significant habitats, scorew, and water rescurses for the banefit of the puble. The organization facilitates community-based conservation. 2 Did the organization undertake any significant program services during the year which were not listed on the puble. The organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses. Section 50:(e)(3) and 50:(e)(4) organization accomplishments for each of its three largest program services, as measured by expenses. Section 50:(e)(3) and 50:(e)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revouw. If any, for each program service reported. 4a (Code:	Pa	rt III				ine in this Part III			
the prior Form 990 r990-EZ?	1	To prote significa	ct and conserve land and nt habitats, scenery, and v	traditional land uses water resources for th	e benefit of the publi	c. The			
services? Yes X No If "Ves," describe these changes on Schedule 0. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service encortent. 4a (Code:	2	the prior	Form 990 or 990-EZ? .					Yes	X No
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 6,750,487 including grants of \$) (Revenue \$) The organization acquired significant new, conserved properties and conservation casements, stewarded its existing properties and expanded education/outreach programs. automatical expenses \$ 0, including grants of \$) (Revenue \$) 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe on Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	3	services	?		-			Yes	X No
The organization acquired significant new, conserved properties and conservation easements, stewarded its existing properties and expanded education/outreach programs. stewarded its existing properties and expanded education/outreach programs. 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe on Schedule 0.) (Expenses \$ 0 including grants of \$) (Revenue \$)	4	expense	es. Section 501(c)(3) and s	501(c)(4) organizatior	ns are required to rep			-	
4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)	4a	The orga steward	anization acquired signific ed its existing properties a	ant new, conserved p ind expanded educati	roperties and conser ion/outreach program	vation easements, ls.			
4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)									
4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)	4b	(Code:) (Expens						
4d Other program services (Describe on Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)									
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(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	4c	(Code:) (Expens	es\$	including grants of	\$) (Revenue \$)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)									
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)									
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)									
		(Expens	es \$			0)(Revenue \$		0)	

Form 990 (2021) Mahoosuc Land Trust Inc

Part	IV Checklist of Required Schedules			
		-	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			1
-	complete Schedule A	1	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	Х	──
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .	4		x
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,	-		
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
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? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	0		
·	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V.	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		~	
а	VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete</i>			
	Schedule D, Part VI	11a	Х	<u> </u>
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			1
4.0	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13 14a		X X
	Did the organization maintain an once, employees, or agents outside of the ormed States?	144		<u> </u>
D	fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
4.5	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</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? <i>If "Yes," complete Schedule G, Part II</i> .	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		X
	If "Yes," complete Schedule G, Part III.	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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? <i>If "Yes," complete Schedule I, Parts I and II</i> .	21		x

Page **3** 01-0447619

Form 990 (2021)

Mahoosuc Land Trust Inc

Par	IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$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		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year	240		
C		04-		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
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			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M.	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2.	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
•.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
50	19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Dar	t V Statements Regarding Other IRS Filings and Tax Compliance	50	Λ	
ı aı	Check if Schedule O contains a response or note to any line in this Part V		Ī	
		• •	Vc-	
4.5	Enter the number reported in her 2 of Form 1006. Enter 0 if not employed a		Yes	No
1a ⊾	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	t		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		V	
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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 5 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X 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 X 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b If "Yes," enter the name of the foreign country be see instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Was 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? 5a X 6a X b If "Yes," oli the organization include with every solicitation an express statement that such contributions or gifts were not tax	Form 9	990 (2021) Mahoosuc Land Trust Inc 01-	0447619) Р	Page 5
Statements, filed for the calendar year ending with or within the year covered by this return. 2a 5 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note:: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. 3a X 3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0 3a X 4 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 P See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X c If "Yes," enter the name of the foreign cantry P See instructions for filing requirements for FinCEN Form 148, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5 Did any taxable party notify the organization file Form 8886-T? 5a X 5c 5a X 6 Does the organization natit was or is a party to a prohibited tax shelter transactions? 5b X 5c	Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions. 3a X B) 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 0. 3b X 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b If "Yes," enter the name of the foreign country (such as a bark account, securities account, or other financial account)? 5a X c If "Yes," to bine 5a or 5b, did the organization file form 886-T? 5c 5c c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization nolicit may contributions that were not tax deductible as charitable contributions? 6a X f Organization net/fit de donor of the value of the goods or services provided? 7a X f Organization net/fit de donor of the value of the organization file form 8282? 7b 7c X	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions. 3a X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?. 3a X 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country with the organization at a stark account, securities account, or other financial account)? 4a X b If "Yes," enter the name of the foreign country with a party to a prohibited tax shelter transaction at any time during the tax year? 5a X 5a Was the organization fuel to erganization file Form 8886-17? 5b X 5a Did any taxable party notify the organization file Form 8886-17? 5c 5c 6a X b 1f "Yes," eith the organization next even ot tax deductible as charitable contributions or gifts were not tax deductible contributions and party for goods and services provided to the payor? 7a X b If "Yes," idid the organization notify the donor of the value of the goods or services provided? 7b 7b c Did any taxable party notify the donor of the value of the goods or services provided? 7b 7c X b If "Yes," did the organization notify the donor of the value of the goods or services provide		Statements, filed for the calendar year ending with or within the year covered by this return 2a	5		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b ff "Yes," has it filed a Form 990-T for this year? if "No" to line 3b, provide an explanation on Schedule 0 3b 3b 4A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b ff "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 4a X b fer "yes," enter the name of the foreign country b Se instructions for filming requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Was the organization induction a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b ff "yes," indice angination infilme from 8886-7? 5c 5c 5c 6a X Y ff "Yes," did the organization induction an express statement that such contributions or gifts were not tax deductible? 6a X 7 Organization shart may receive deductible contributions under section 170(c). 7b 7b 7c X 7 Drgainization include with ever	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0. 3b 44 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 ▶ 5a X See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a X c If "Yes," did the organization file Form 8886-T? 5c 5c 5c c Does the organization nave an interest in 700,000, and did the organization nave receive tax deductible? 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 70 c Did the organization notify the donor of the value of the goods or services provided? 7b 7a X d If "Yes," did the organization neaver sets of \$75 made partly as a contribution and partly for goods an dservices provided to the payor? 7b 7b		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
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b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities					
11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders	b		_		
a Gross income from members or shareholders	11				
			_		
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	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	b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note: See the instructions for additional information the organization must report on Schedule O.					
b Enter the amount of reserves the organization is required to maintain by the states in which	b				
the organization is licensed to issue qualified health plans			_		
c Enter the amount of reserves on hand	С	Enter the amount of reserves on hand			
	14a				Х
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b			. 14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15				
excess parachute payment(s) during the year		excess parachute payment(s) during the year	. 15		Х
If "Yes," see the instructions and file Form 4720, Schedule N.		If "Yes," see the instructions and file Form 4720, Schedule N.			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
If "Yes," complete Form 4720, Schedule O.					
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	17				
activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
If "Yes," complete Form 6069.	_				

Form 9	90 (2021) Mahoosuc Land Trust Inc 01-044			age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. S		struct	
0	Check if Schedule O contains a response or note to any line in this Part VI	• •	· ·	Х
Seci	ion A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a		103	NO
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 18	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	· ·		v
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		Х
Ŭ	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		V	
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue (Code.		N-
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		~
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i> describe on Schedule O how this was done.	12c	х	
13	Did the organization have a written whistleblower policy?	120	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official.	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NH	04/		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 3) (3) sonly) available for public inspection. Indicate how you made these available. Check all that apply.	ou1(c)		
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	icy,		
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records	►		
	Kirk Siegel 207-824-3806			
	P.O. Box 981, Bethel, ME 04217			

Form 990 (2021)	Mahoosuc Land Trust Inc	01-0447619	Page 7						
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	pensated							
	Employees, and Independent Contractors								
	Check if Schedule O contains a response or note to any line in this Part VII								
Section A.	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
1a Complete the organization's	nis table for all persons required to be listed. Report compensation for the calendar year ending tax year.	with or within the							
	f the organization's current officers, directors, trustees (whether individuals or organizations), re on. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	egardless of amount							

- 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.

(A) Name and title	(B) Average hours	box, office	unles	Pos neck ss pe d a d	rson lirecto	e than o is both or/truste	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Kirk Siegel	40.00									
Executive Director	0.00			Х				83,083		
(2) Laurie Winsor	4.50									
President	0.00	Х		Х						
(3) Larry Ely	3.50									
Vice President	0.00	Х		Х						
(4) John Wholey	15.50									
Treasurer	0.00	Х		Х						
(5) Bonnie Pooley	3.00									
Secretary	0.00	Х		Х						
(6) Joseph Aloisio	1.00									
Director	0.00	Х								
(7) Sue Dunn	3.00									
Director	0.00	Х								
(8) Amy Halsted	2.00									
Director	0.00	Х								
(9) Robert Iles	2.00									
Director	0.00	Х								
(10) Art Marshall	0.50									
Director	0.00	Х								
(11) Cassie Mason	0.50									
Director	0.00	Х								
(12) Lizz Peacock	2.75									
Director	0.00	Х								
(13) Mia Purcell	2.00									
Director	0.00	Х								
(14) James Reddoch	3.50									
Director	0.00	Х								

Form	990 (2021)		and Trust Inc										44761		Page 8
Pa	art VII	Section A. Offic	ers, Directors, T	rustees, Key Em	ploye	es,	and	d Hi	ghest	Сс	ompensated En	ployees (cor	ntinuec	1)	
	hours officer and a director/trustee) compensation compens											Reportable compensation	able Estima sation of		amount ner
				per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (V 1099-MISC/ 1099-NEC)	/-2/	compens from t organizatio ated organ	the on and
(15)	Glenn Sal	ler		2.75											
Direc	ctor			0.00	Х										
(16)	Sara Shifr	<u>in</u>		2.00											
Direc		-		0.00	Х										
	Stephen S	Smith													
Direc		- ut		0.00	-										
Direc	Katie Stua			3.50	ł										
-	Bill White			0.50	-										
Direc				0.00	÷										
-															
(21)															
(22)															
(23)															
(24)															
(25)															
1b	Subtotal										83,083		0		0
c		n continuation sh									0		0		0
d		d lines 1b and 1c)									83,083		0		0
2		ber of individuals (sted a	abov	ve) v	who	receiv	/ed	more than \$100),000 of			
	reportable	e compensation fro	m the organizatio	n 🕨											0
3		ganization list any						or h	ighest	t co	ompensated			Ye	s No
		on line 1a? If "Yes	-										3		X
4		dividual listed on li ization and related										h			
	individual						-			•			4	,	Х
5		erson listed on line es rendered to the											5		X
Sec		ependent Contrac	•												
1		this table for your ation from the orga											ı's tax	vear.	
			(A) Name and business ad	·							(B) Description of ser			(C) pensatio	on
		-													0
															0
·															0
															0
	- · ·								<u> </u>		· · ·				0
2		ber of independen \$100,000 of comp		-) tho	se l	liste	d abov	/e) 0	who received				

	90 (202 VIII	, maneeede zana maetine					01-04476	619 Page
art		Statement of Revenue Check if Schedule O contains	a response or	note to any line in	this Part VIII			🔲
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclude from tax under sections 512–51
ی در	1a	Federated campaigns	1a	0				
unts	b	Membership dues		0				
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	1c	0				
	d	Related organizations	1d	0				
, c	е	Government grants (contributions) 1e	3,243,844				
Sin	f	All other contributions, gifts, grant						
her		similar amounts not included abov		5,587,028				
ō	g	Noncash contributions included in						
and		lines 1a–1f						
	h	Total. Add lines 1a-1f			8,830,872			
,	2-	Timber Hervert Income		Business Code	60.494	60.494		
	2a	Land Managament Income			<u>60,484</u> 12,670			
Revenue	b				12,070	12,070		
ver	с d				0			
Re	۵ ۵				0			
Revenue	f	All other program service revenue			0			
•	q	Total. Add lines 2a–2f			73,154			
	3	Investment income (including divid						
		other similar amounts).			69,058			69,0
	4	Income from investment of tax-ex		-	0			, , , , , , , , , , , , , , , , , , ,
	5	Royalties		•	0			
			(i) Real	(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses . 6b						
	С	Rental income or (loss) 6c	C	0				
	d		<u></u>		0			
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets						
Ð		other than inventory	C	0 0				
7	b	Less: cost or other basis						
š	-	and sales expenses 7b	C	-				
ř	С С	Gain or (loss)			0			
Uther Keven	d 8a	Gross income from fundraising	· · · <u>· ·</u>	•	0			
5	u	events (not including \$						
		of contributions reported on line 1	c).					
		See Part IV, line 18		1,855				
	b	Less: direct expenses						
	С	Net income or (loss) from fundrais	ing even <u>ts</u> .	•	-838			
	9a	Gross income from gaming activit	ies.					
		See Part IV, line 19	9 a	0				
	b	Less: direct expenses	9b	0				
		Net income or (loss) from gaming	activities	<u></u> ►	0			
	10a	Gross sales of inventory, less						
		returns and allowances						
		Less: cost of goods sold	· · · · · · · · · · · · · · · · · · ·					
	С	Net income or (loss) from sales of	inventory.		1,520			
	11-			Business Code	^			
Jue	11a			<u> </u>	0			
Revenue	b			+	0			
Revenue	с d	All other revenue			358			
	u e	Total. Add lines 11a–11d			358			
	-				530			

following SOP 98-2 (ASC 958-720)

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) (D) (B) (A) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations 1 domestic governments. See Part IV, line 21 0 2 Grants and other assistance to domestic individuals. See Part IV. line 22. 0 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 n 0 4 5 Compensation of current officers, directors, 0 0 Compensation not included above to disgualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 Other salaries and wages 183.854 106.500 34.565 42.789 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . 0 9 0 10 14,017 8,057 2,663 3,297 11 Fees for services (nonemployees): Management. 0 а 2,188 2,188 b 3,038 3,038 С Accounting 0 d 0 Professional fundraising services. See Part IV, line 17. е 20.224 20.224 f Other. (If line 11g amount exceeds 10% of line 25, column g (A), amount, list line 11g expenses on Schedule O.) 133,833 79,250 1,571 53,012 12 1.367 1,367 28,480 18,220 6,550 3,710 13 14 2,233 545 1,373 315 15 0 7,444 726 6,718 16 17 1,060 927 99 34 18 Payments of travel or entertainment expenses 0 for any federal, state, or local public officials 19 Conferences, conventions, and meetings 331 25 306 20 316 0 316 0 21 0 22 Depreciation, depletion, and amortization 7,059 0 7.059 0 23 10,093 2,146 7,799 148 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) Easement purchase 6,500,124 а 6,500,124 Repairs and maintenance b 6,954 5,741 1,213 С Dues, subs, fees, and licenses 2,828 534 2.194 100 d 0 4,074 3,913 80 81 e All other expenses Total functional expenses. Add lines 1 through 24e 6,929,517 6,750,487 75,544 103.486 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 🕨 if

	n 990 (20				01-0447619 Page 11
Pa	art X	Balance Sheet Check if Schedule O contains a response or note to any line in this Par	×		
		Check in Schedule O contains a response of hote to any line in this Par		•••	г — — — — — — — — — — — — — — — — — — —
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	709,416
	2	Savings and temporary cash investments			443,196
	2	Pledges and grants receivable, net			353,800
	4	Accounts receivable, net	15,331	4	29,173
	5	Loans and other receivables from any current or former officer, director,	10,001		29,175
	5	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	
	6	Loans and other receivables from other disqualified persons (as defined	0	•	
	Ŭ	under section $4958(f)(1)$, and persons described in section $4958(c)(3)(B)$	0	6	
ţ	7	Notes and loans receivable, net	0		C
Assets	8				1,460
¥	9	Prepaid expenses and deferred charges			4,682
	10a	Land, buildings, and equipment: cost or	0,000		1,002
		other basis. Complete Part VI of Schedule D 10a 3,317,9	45		
	b	Less: accumulated depreciation 10b 34,3		10c	3,283,610
	11	Investments—publicly traded securities	824,109		1,231,798
	12	Investments—other securities. See Part IV, line 11			0
	13	Investments—program-related. See Part IV, line 11			0
	14	Intangible assets			0
	15	Other assets. See Part IV, line 11			0
	16	Total assets. Add lines 1 through 15 (must equal line 33)			6,057,135
	17	Accounts payable and accrued expenses			3,866
	18	Grants payable			,
	19	Deferred revenue			
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Loans and other payables to any current or former officer, director,			
Ē		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0	22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties	. 0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	. 27,700	24	29,274
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete			
		Part X of Schedule D		25	30,008
	26	Total liabilities. Add lines 17 through 25	65,924	26	63,148
es		Organizations that follow FASB ASC 958, check here ► X			
ũ		and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	2,774,774	27	3,814,790
B	28	Net assets with donor restrictions	1,040,570	28	2,179,197
ň		Organizations that do not follow FASB ASC 958, check here			
Ľ		and complete lines 29 through 33.			
s o	29	Capital stock or trust principal, or current funds	0	29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund			
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances		32	5,993,987
Z	33	Total liabilities and net assets/fund balances	3,881,268	33	6,057,135 Form 990 (2021)

n 990 (2021) Mahoosuc Land Trust Inc	01	-0447619	Page 1	12
rt XI Reconciliation of Net Assets				
Check if Schedule O contains a response or note to any line in this Part XI				
Total revenue (must equal Part VIII, column (A), line 12)	1		8,974,12	24
Total expenses (must equal Part IX, column (A), line 25)	2		6,929,5	17
Revenue less expenses. Subtract line 2 from line 1.	3		2,044,60	07
Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		3,815,34	44
Net unrealized gains (losses) on investments	5		132,93	36
Donated services and use of facilities	6			
Investment expenses	7			
Prior period adjustments	8		1,1(00
Other changes in net assets or fund balances (explain on Schedule O)	9			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
column (B))	10		5,993,98	87
Check if Schedule O contains a response or note to any line in this Part XII			. X	<u>.</u>
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 O.		-		
Were the organization's financial statements compiled or reviewed by an independent accountant? 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:		<u>2a</u>		<u>x</u>
		. 2b	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the smaller line of the second se		0.	X	
the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		20	X	
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
the Single Audit Act and OMB Circular A-133?		. 3a	x	
If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		. 3b	x	
			n 990 (202	

=orm	990	(2021)
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SCHEDULE	A
(Form 990)	

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

2021 Open to Public

OMB No. 1545-0047

		t of the Treasury venue Service	► Go		1990 for instructions ar		st informa		Inspection	-
		e organization		ie minnelgem em				Employer identification	-	
Maho	osu	ic Land Trust In	с					01-04	47619	
Par		Reason fo	r Public Char	ity Status. (All or	ganizations must co	omplete t	his part.)	See instructions.		
	orga		•	•	or lines 1 through 12, o			,		
1					f churches described i		170(b)(1)((A)(i).		
2					ach Schedule E (Form					
3					zation described in sec	•				
4			arch organization e, city, and state		nction with a hospital c	lescribed	in section	170(b)(1)(A)(iii). Er	iter the	
5			n operated for th (1)(A)(iv). (Com		e or university owned	or operate	ed by a gov	vernmental unit deso	cribed in	
6		A federal, state	e, or local govern	ment or governmer	ntal unit described in se	ection 170	(b)(1)(A)(v).		
7	Х			eceives a substantia (A)(vi). (Complete F	al part of its support fro Part II.)	m a gove	rnmental u	init or from the gene	ral public	
8		A community tr	ust described in	section 170(b)(1)(/	A)(vi). (Complete Part	II.)				
9		An agricultural or university or university:	research organi a non-land-grar	zation described in a total to a total tot	section 170(b)(1)(A)(ix ure (see instructions).	() operated Enter the	d in conjur name, city	nction with a land-gra r, and state of the co	ant college llege or	
10		receipts from a support from gi	ctivities related tross investment	to its exempt function income and unrelated	an 33 1/3% of its suppo ons, subject to certain e ed business taxable in See section 509(a)(2) .	exceptions come (les	; and (2) r s section {	no more than 33 1/3 511 tax) from busine	% of its	
11		An organization	n organized and	operated exclusive	ly to test for public safe	ety. See se	ection 509	(a)(4).		
12		of one or more	publicly support	ed organizations de	ly for the benefit of, to period to be a seribed in section 509 ibes the type of suppo	9(a)(1) or s	section 50	9(a)(2). See section	n 509(a)(3).	
а	[the supporte organizatior	ed organization(s	s) the power to regunder to regunder the power to regunder the power to regulate the pow		majority o	of the direc	ctors or trustees of th	ne supporting	
b		control or m	anagement of th		r controlled in connecti ization vested in the sa ections A and C.					
С	[Type III fun	ctionally integr	ated. A supporting of	organization operated i You must complete F				rated with,	
d		that is not fu	inctionally integr	ated. The organizat	ting organization opera ion generally must sati blete Part IV, Sections	isfy a distr	ibution red	quirement and an att		
е					itten determination fror Illy integrated supportir			Type I, Type II, Typ	e III	
f										0
g		Provide the follo		n about the support	v (/				()) A () ()	
	(1)	vame of supported of	organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization Ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	;
						Yes	No			
(A)										
(B)										
(C)										
(D)										
(E)										
Total								0		

-		Land Trust Inc				01-04476	19 Page 2
Pa	rt II Support Schedule for Orga	nizations Des	cribed in Sect	ions 170(b)(1)	(A)(iv) and 17	0(b)(1)(A)(vi)	
	(Complete only if you checke	ed the box on li	ne 5, 7, or 8 of	Part I or if the o	organization fai	iled to qualify ur	nder
	Part III. If the organization fail	ils to qualify un	der the tests lis	sted below, plea	ase complete F	Part III.)	
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	499,786	505,435	312,264	710,819	8,830,872	10,859,176
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	499,786	505,435	312,264	710,819	8,830,872	10,859,176
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						4,017,304
6	Public support. Subtract line 5 from line 4						6,841,872
-	tion B. Total Support					rr	
Cale	ndar year (or fiscal year beginning in) 📃 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	499,786	505,435	312,264	710,819	8,830,872	10,859,176
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
-	similar sources	62,723		91,038	101,076	69,058	323,895
9	Net income from unrelated business						
	activities, whether or not the business is						0
40	regularly carried on						0
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)	1,152	3,132	26,732	2,282	1,040	34,338
11	Total support. Add lines 7 through 10	1,152	3,132	20,732	2,202	1,040	11,217,409
12	Gross receipts from related activities, etc. (se					12	73,154
13	First 5 years. If the Form 990 is for the orga						70,104
10	organization, check this box and stop here .			•			
Soc	tion C. Computation of Public Sur						
14	Public support percentage for 2021 (line 6, c			(f))		14	60.99%
15	Public support percentage from 2020 Schedu		-			15	75.70%
	33 1/3% support test—2021. If the organization						
	and stop here. The organization qualifies as						. 🖌 🗙
b	33 1/3% support test—2020. If the organiza		-				
	box and stop here. The organization qualifie						
17a	10%-facts-and-circumstances test-2021	. If the organization	n did not check a b	ox on line 13. 16a.	or 16b, and line 14	4	•
	10% or more, and if the organization meets t	U					
	Part VI how the organization meets the facts	-and-circumstance	s test. The organiz	ation qualifies as a	publicly supported	ł	
	organization						Þ 📘
b	10%-facts-and-circumstances test—2020	U					
	15 is 10% or more, and if the organization me in Part VI how the organization meets the fac						
	organization		-	•			
18	Private foundation. If the organization did n					· · · ·	
10	-						
	instructions						· · · · F

Schedule A (Form 990) 2021

Sche	dule A (Form 990) 2021 Mahoosuc	Land Trust Inc				01-044761	9 Page 3
Pa	rt III Support Schedule for Orga	inizations Desc	cribed in Sect	ion 509(a)(2)			
	(Complete only if you checke	ed the box on lin	ne 10 of Part I	or if the organiz	zation failed to	qualify under Pa	art II.
	If the organization fails to qu	alify under the te	ests listed belo	ow, please com	plete Part II.)		
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	<u> </u>					0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
_	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						0
~	organization without charge	0	0	0	0	0	0
6 70	Total. Add lines 1 through 5	0	0	0	0	0	0
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
h	Amounts included on lines 2 and 3						0
D D	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						0
с	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from			-		-	
-	line 6.).						0
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	<u> </u>					0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on .	·					0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						0
40	(Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11,	0	0	0	0	0	0
14	and 12.)		÷	-	$\frac{0}{2}$	0	0
14	organization, check this box and stop here						▶□
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2021 (line 8, c			(f))		15	0.00%
16	Public support percentage for 2021 (line 8, 0 Public support percentage from 2020 Sched	.,	•	.,,	ľ	16	0.00%
-	ction D. Computation of Investmer						0.0070
17	Investment income percentage for 2021 (line			olumn (f))		17	0.00%
18	Investment income percentage for 2021 (inter-		-			18	0.00%
	33 1/3% support tests—2021. If the organi						0.0070
	not more than 33 1/3%, check this box and s						► 🗌
b	33 1/3% support tests—2020. If the organi				-		
	line 18 is not more than 33 1/3%, check this	box and stop here .	. The organization	qualifies as a publ	icly supported orga	anization	🕨 📘
20	Private foundation. If the organization did	not check a box on l	ine 14, 19a, or 19	b, check this box a	nd see instructions		

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.)

	Yes	No
1		
-		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
0		
7		
· ·		
8		
9a		
9b		
9c		
10a		
_		
10b		

Sched	ule A (Form 990) 2021 Mahoosuc Land Trust Inc	01-0447619	F	age 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b a	and		
	11c below, the governing body of a supported organization?		1a	
b	A family member of a person described on line 11a above?		1b	
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, p		-	
	detail in Part VI.		1c	
Sect	ion B. Type I Supporting Organizations			·
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of o	ne or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of	ficers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one s	upported		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amo	ong the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		1	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Pa	art		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.		2	
Sect	ion C. Type II Supporting Organizations	I		
	······································		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directo	ors		
•	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 manage			
	the supported organization(s).		1	
Sect	ion D. All Type III Supporting Organizations	I	•	L
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	э		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	organization's governing documents in effect on the date of notification, to the extent not previously provid		1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the support			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part V			
	the organization maintained a close and continuous working relationship with the supported organization(s		2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations ha	· ·	-	
-	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.		3	
Sect	ion E. Type III Functionally Integrated Supporting Organizations	`	-	L
1		or loop instructi	000)	
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ai (See Instructio	uns).	
а	The organization satisfied the Activities Test. <i>Complete line 2 below</i> .			

- **a** The organization satisfied the Activities Test. *Complete line 2 below.*
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 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.*

Schedule A (Form 990) 2021 Mahoosuc Land Trust Inc		01-0	447619 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C	Drganiz	ations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust o	on Nov. 20, 1970 (explain i	n Part VI). See
instructions. All other Type III non-functionally integrated supporting orga	inizations	s must complete Sections	A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0.035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0.85 of line 1.	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		0
7 Check here if the current year is the organization's first as a non-functiona	lly integra	ated Type III supporting of	organization (see

instructions).

Schedule A (Form 990) 2021

	e A (Form 990) 2021 Mahoosuc Land Trust Inc				-0447619 Page 7
Part) Supporting Organi	zations (continu	ed)	
Section	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption	pt purposes of supported	l		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	0
8	Distributions to attentive supported organizations to which t	he organization is respor	nsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	0
10	Line 8 amount divided by line 9 amount			10	0.000
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributic Pre-2021	ons	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				0
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required— <i>explain in Part VI)</i> . See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e	0			
g	Applied to underdistributions of prior years			0	
h	Applied to 2021 distributable amount				0
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0			
4	Distributions for 2021 from				
	Section D, line 7: \$ 0				
а	Applied to underdistributions of prior years			0	
b	Applied to 2021 distributable amount				0
С	Remainder. Subtract lines 4a and 4b from line 4.	0			
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI . See instructions.			0	
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain				
	in Part VI. See instructions.				0
7	Excess distributions carryover to 2022. Add lines 3j				
0	and 4c. Broakdown of line 7:	0			
8	Breakdown of line 7:				
a h	Excess from 2017 0				
b	Excess from 2018 0				
C	Excess from 2019 0				
d	Excess from 2020 0				
е	Excess from 2021 0				

Schedule A (Form 990) 2021

Schedule A (Fo		01-0447619	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	Section 1c, 2a, 2b,	

SCHEDULE D (Form 990)

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. OMB No. 1545-0047

2021
Open to Public

	I Revenue Service Go to www.irs.go	v/Form990 for instructions		he latest infor	mation.	Inspe	ection
	of the organization					tification number	
Maho	osuc Land Trust Inc					01-0447619	
Par		Advised Funds or Oth	er Si	imilar Fund	s or Acco		
	Complete if the organization answere						
		(a) Donor advised	funds		(b) F	Funds and other accou	unts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and dono	0					
6	funds are the organization's property, subject to Did the organization inform all grantees, donors						es No
U	only for charitable purposes and not for the ber						
	conferring impermissible private benefit?			-			es No
Par							
i ai	Complete if the organization answere	ed "Yes" on Form 990.	Part	IV. line 7.			
1	Purpose(s) of conservation easements held by						
	X Preservation of land for public use (for examp				of a historic	ally important lan	d area
	X Protection of natural habitat		\square	Preservation	of a certified	d historic structure	е
	X Preservation of open space						
2	Complete lines 2a through 2d if the organizatio	n held a qualified conservation	ation	contribution ir	the form o	f a conservation	
_	easement on the last day of the tax year.					Held at the End of	f the Tax Year
а	Total number of conservation easements				. 2a		12
b	Total acreage restricted by conservation easen	nents			. 2b		18,233.00
С	Number of conservation easements on a certifi				. 2c		
d	Number of conservation easements included in				04		7
3	historic structure listed in the National Register Number of conservation easements modified, t					organization duri	7
5	the tax year ►	iansieneu, releaseu, exiin	iyuisi		aleu by life	Jiganization duni	ig
4	Number of states where property subject to cor	nservation easement is loc	ated	►		2	
5	Does the organization have a written policy reg			inspection, ha	ndling of		
	violations, and enforcement of the conservation					X Y	es No
6	Staff and volunteer hours devoted to monitoring, ins	specting, handling of violatior	ns, and	d enforcing con	servation ea	sements during the	year
	▶ 542.00						
7	Amount of expenses incurred in monitoring, inspect	ing, handling of violations, ar	nd enf	orcing conserva	ation easeme	ents during the yea	r
0	► \$ 15,478	line 2(d) chove estisty the	rogi	viromonto of a	action 170/		
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?						es No
9	In Part XIII, describe how the organization repo						
•	balance sheet, and include, if applicable, the te				•		the
	organization's accounting for conservation ease		0				
Par	III Organizations Maintaining Collecti				ther Simi	lar Assets.	
	Complete if the organization answere						
1a	If the organization elected, as permitted under						
	works of art, historical treasures, or other simila	•					of
h	public service, provide in Part XIII the text of the						
u	If the organization elected, as permitted under works of art, historical treasures, or other simila						of
	public service, provide the following amounts re			on, coucation,	JIESCALU		"
	(i) Revenue included on Form 990, Part VIII, lii					▶ \$	
	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art						·
	following amounts required to be reported under	er FASB ASC 958 relating	to the	ese items:			
а	Revenue included on Form 990, Part VIII, line						
b	Assets included in Form 990, Part X					▶ \$	

Sched	lule D (Form 990) 2021 Mahoosuc Land Trust Inc	;					01-04476	619		Page 2
Part	III Organizations Maintaining Collect	ctions of Art,	Histor	ical Trea	asures, or C	Other	Similar Assets	(conti	nued)	
3	Using the organization's acquisition, accession	on, and other rec	cords, c	heck any	of the followir	ng that	make significant ι	ise of it	s	
	collection items (check all that apply):		_							
а	Public exhibition	(d	Loan or	exchange pro	gram				
b	Scholarly research	(e	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and ex	plain ho	w they fu	rther the orga	nizatio	n's exempt purpos	e in Pa	art	
	XIII.									
5	During the year, did the organization solicit o									
	assets to be sold to raise funds rather than to	be maintained	as part	of the org	janization's co	ollection	n?	Ye	es	No
Part	IV Escrow and Custodial Arrangem	ents.								
	Complete if the organization answe	ered "Yes" on F	orm 9	90, Part	IV, line 9, or	r repo	rted an amount	on Fo	m	
	990, Part X, line 21.					-				
1a	Is the organization an agent, trustee, custodi	an or other inter	mediary	for contr	ibutions or oth	ner ass	ets not			_
	included on Form 990, Part X?							Y	es	No
b	If "Yes," explain the arrangement in Part XIII	and complete th	e follow	ing table:	:					
							A	nount		
С	Beginning balance					1c	:			
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				0
2a	Did the organization include an amount on Fe	orm 990, Part X,	line 21	, for escro	ow or custodia	al acco	unt liability?	Ye	es	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if th	ne expla	anation ha	as been provid	ded on	Part XIII			
Part	V Endowment Funds.									
	Complete if the organization answe	ered "Yes" on F	orm 9	90, Part	IV, line 10.					
	· · · · · · · · · · · · · · · · · · ·	Current year	(b) Prio		(c) Two years b	back	(d) Three years back	(e) Fo	our years	back
1a	Beginning of year balance	824,109		697,612	586	6,906	598,135		50)3,537
b	Contributions	255,842		49,000	53	3,847	30,880		6	64,863
С	Net investment earnings, gains,									
	and losses	199,144		108,554	88	3,528	-12,537		7	75,261
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	23,697		25,553	23	3,303	21,683		3	38,646
f	Administrative expenses	23,600		5,504		3,366	7,889			6,880
g	End of year balance	1,231,798		824,109		7,612	586,906		59	98,135
2	Provide the estimated percentage of the curr	ent year end bal	lance (li	ne 1g, co	lumn (a)) held	as:				
a	Board designated or quasi-endowment	22%	-							
b	Permanent endowment	78%								
С	Term endowment ► %									
2-	The percentages on lines 2a, 2b, and 2c sho	-		a that are	hold and adm	iniator	ad far tha			
3a	Are there endowment funds not in the posses organization by:	ssion of the orga	anizatior	i inai are		linister		1	Yes	No
	(i) Unrelated organizations							3a(i)	X	NO
	(ii) Related organizations							3a(ii)	~	х
b	If "Yes" on line 3a(ii), are the related organization							3b		
4	Describe in Part XIII the intended uses of the					•••				L
Part										
· ar c	Complete if the organization answe		Form 9	90. Part	IV. line 11a	See	Form 990, Part	X. line	10.	
	Description of property	(a) Cost or other			or other basis		Accumulated		ook valu	e
	hanner brekend	(investment)		.,	other)	• • •	epreciation	(=) 0	. uid	
1a	Land		0		3,084,147				3,08	34,147
b	Buildings		0		225,688		29,412			96,276
С	Leasehold improvements		0		0		0			0
d	Equipment		0		8,110		4,923			3,187
е	Other		0		0		0			0
Tota	L Add lines 1a through 1e. (Column (d) must e	qual Form 990	Part X	column (F	3) line $10c$)				3 28	33 610

Part VII	Investments—Other Securities.			
	Complete if the organization answered	<u>"Yes" on Form 990,</u>	Part IV, line 11b. See Form 99	90, Part X, line 12.
	 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valu Cost or end-of-year ma	
. ,	al derivatives	0		
(2) Closely	held equity interests	0		
(3) Other				
(A)		_		
(B)				
(C)				
(D)		_		
(E)				
(F) (G)		-		
(G) (H)				
	nn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	. 0		
Part VIII		.		
	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11c. See Form 99	90, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Tatal (Oalum				
Part IX	nn (b) must equal Form 990, Part X, col. (B) line 13.) . ► Other Assets.	0		
Parlix	Complete if the organization answered	"Ves" on Form 000	Part IV line 11d See Form 0	00 Part X line 15
	(a) Desci			(b) Book value
(1)	(u) Desci	iption		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) I	line 15.)		0
Part X	Other Liabilities. Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11e or 11f. See F	form 990, Part X,
1.	line 25. (a) Descrip	tion of liability		(b) Book value
	I income taxes			0
(2) Accrue	ed Vacation			
(3) Gift Ar	nnuity			30,008
(4) Round	ling			
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) I		<u> </u>	30,008

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

Х

Schedu	ule D (Form 990) 2021 Mahoosuc Land Trust Inc	01-0447619	Page 4
Part	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	i i	
1	Total revenue, gains, and other support per audited financial statements	1	9,080,380
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments 2a	-	
b	Donated services and use of facilities 2b 79,963 Recoveries of prior year grants 2c	-	
c d	Recoveries of prior year grants 2c Other (Describe in Part XIII.) 21 23,600	-	
	Add lines 2a through 2d.	2e	103,563
3	Subtract line 2e from line 1	3	8,976,817
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		0,010,010
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	-2,693
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)	5	8,974,124
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	7,035,773
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	-	
b	Prior year adjustments 2b Other losses 2c	-	
c d	Other losses 2c Other (Describe in Part XIII.) 26,293	-	
	Add lines 2a through 2d.	2e	106,256
3	Subtract line 2e from line 1	3	6,929,517
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)	5	6,929,517
	XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa		t X, line
2; Pai	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	ation.	
Part I	I Line 9 Direct expenses are listed as "Easement purchase" expense on the Statement		
of Fur	nctional Expenses. Easement Subsection of Note 1: Contributed conservation easements		
hold h	by the Trust are not recorded because economic do not represent economic econts or		
neia c	by the Trust are not recorded because easements do not represent economic assets or		
resou	rces. Purchased conservation easements are expensed on the date purchased.		
Tesou			
Part \	/ Line 4 The Board Designated funds are used to provide for the payment of gift		
annui	ties for the life time of the annuities. The Permanent Endowment and Temporarily		
Restri	icted Endowments are maintained to provide income to support the stewardship of the		
trust's	properties and easements and to defend easements if challenges arise.		
Part >	KI Line 2d The financial statements include "Investment income allocated for use"		
reven	ue of \$23,600 that is excluded from presentation on the Form 990.		
Part V	KII Line 2d The financial statements include "Investment income allocated for use"		
rail /			
exper	nse of \$23,600 that is excluded from presentation on the Form 990. The 990 aggregates		
the \$2	2,693 of Fundraising Event expense with revenues whereas the financial statements		

Page 5

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public

Department of the Treasury				
Internal Revenue Service				
Name of the summer implication				

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.

Inspection i de máifi e cái e m

Employer

	bosuc Land Trust Inc			01-0	04476	519
Pa	t I Types of Property	i		i		
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributio amounts reported of Form 990, Part VIII, lind	n	(d) Method of determining noncash contribution amounts
1	Art—Works of art					
2	Art—Historical treasures					
3	Art—Fractional interests					
4	Books and publications					
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities—Publicly traded					
10	Securities—Closely held stock					
11	Securities—Partnership, LLC, or trust interests					
12	Securities—Miscellaneous					
13	Qualified conservation					
	contribution—Historic					
	structures					
4	Qualified conservation	х	1	4 210	000	APPRAISAL
15	Real estate—Residential	~		1,210	,000	
16	Real estate—Commercial					
17	Real estate—Other					
18						
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other \blacktriangleright (Irrigation plumbing)	Х		1	1,472	FMV
26	Other ► (Event supplies)	X				FMV
27	Other ► ()					
28	Other \blacktriangleright ()					

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through			
	28, that it must hold for at least three years from the date of the initial contribution, and which isn't required			
	to be used for exempt purposes for the entire holding period?	. 30a		Х
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard			
	contributions?	. 31	Х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell			
	noncash contributions?	32a		Х
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is			
	checked, describe in Part II.			

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

29

Schedule M (F		01-0447619 F	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and	33, and wheth	ner
	the organization is reporting in Part I, column (b), the number of contributions, the number	of items receiv	ed.
	or a combination of both. Also complete this part for any additional information.		,

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ. OMB No. 1545-0047

Department of the Treasury	 Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 	Open to Public Inspection
Internal Revenue Service Name of the organization		Employer identification number
Mahoosuc Land Trust	Inc	01-0447619
Form 990, Part VI, Se	ction A, Line 7a: Officers, Board Membership and Bylaws are subject to	
approval by the memb	pership which occurs at an annual meeting of all members.	
Form 990, Part VI, Se	ction A, Line 7b: Officers, Board Membership, and Bylaws are subject to	
approval by the memb	pership at the annual meeting of all members.	
Form 990, Part VI, Se	ction B, Line 11b: The Treasurer and Financial Planning Committee review	
the draft Form 990 in	detail and present a copy to the Board of Directors for further review	
and approval. The Tre	asurer signs the return upon approval.	
Form 990, Part VI, Se	ction B, Line 15 a & b: The Executive Committee annually reviews national	
	s, the annual survey of wages and benefits of the Land Trust Alliance	
	on of land trusts), and other non-profit organizations in Maine prior to	
	ensation for the Executive Director. The Executive Committee also	
annually reviews com	pensation for all other staff in closed session.	
Form 990, Part VI, Se	ction C, Line 19: Documents are available upon request.	
Form 990, Part VI, Se	ction B, Line 12a: The Board of Directors reviews the conflict of	
interest policy annuall	y. The Executive Director reports potential conflicts to the Board of	
Directors.		
Form 990, Part XII, Lii	ne 2c: The organization's Finance Committee is responsible for oversight	
of its independent auc	litors. In 2021, the organization obtained audited financial statements	
for the first time. The I	Finance Committee initiated a search, issued RFPs, and selected an	
audit firm.		

Schedule O (Form 990) 2021	Page 2
Name of the organization	Employer identification number
Mahoosuc Land Trust Inc	01-0447619