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# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Inspection

OMB No. 1545-0047

Department of the Treasury

A For the 2024 calendar year, or tax year beginning

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

and ending

Check if applicable: C Name of organization D Employer identification number Address change NORTH CAROLINA CONSERVATION NETWORK Name change 58-2504713 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ 919-857-4699 234 FAYETTEVILLE STREET, 5TH FLOOR termin-ated 6,270,231. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended RALEIGH, NC 27601 H(a) Is this a group return Applica-F Name and address of principal officer: Brian Buzby Yes X No for subordinates? pending same as C above H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or If "No," attach a list. See instructions www.ncconservationnetwork.org J Website: H(c) Group exemption number **K** Form of organization: **X** Corporation Trust Association L Year of formation: 1999 M State of legal domicile: NC Part I Summary Briefly describe the organization's mission or most significant activities: TO PROTECT NORTH CAROLINA'S AIR Activities & Governance WATER, AND QUALITY OF LIFE. 12 Number of voting members of the governing body (Part VI, line 1a) <u>12</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 25 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) 690 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b Current Year 3,206,189. 5,847,482. Contributions and grants (Part VIII, line 1h) Revenue 10,500. Program service revenue (Part VIII, line 2g) 195,618. 405,571. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 8.373. 5,833. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,410,180. 6,269,386. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ........ 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. 0. Benefits paid to or for members (Part IX, column (A), line 4) 1,747,302. 2,108,306. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 529,394. 1,157,964. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,276,696. 3,266,270. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,003,116. 1,133,484. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 7,728,059. 10,723,627. 20 Total assets (Part X, line 16) 77,120. 84,668. 21 Total liabilities (Part X, line 26) 7,643,391. 10,646,507. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Brian Buzby, Executive Director Here Type or print name and title PTIN Preparer's name Preparer's signature Helms 06/11/25 Paid Diane Helms Diane Helms P01439593 Stancil PC Firm's EIN 56-1131459 Preparer Firm's name Firm's address 4909 Windy Hill Drive Use Only Phone no. 919 - 872 - 1260 Raleigh, NC 27609 X Yes May the IRS discuss this return with the preparer shown above? See instructions

Pa	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE NORTH CAROLINA CONSERVATION NETWORK SUPPORTS, TRAINS, AND
	COORDINATES DIVERSE GROUPS AND DIRECTLY ADVOCATES TO ACHIEVE EQUITABLE
	AND SUSTAINABLE SOLUTIONS FOR OUR ENVIRONMENT.
	Did the averagination and adults are simplificant and average and into the average being the same at links of an the
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No
_	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
3	3, 3, 3, 1, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
	If "Yes," describe these changes on Schedule O.
4	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 reported.
4a	(Code:) (Expenses \$ 2,690,637. including grants of \$) (Revenue \$)  See Schedule O.
	see schedule 0.
4b	(Code:         ) (Expenses \$         including grants of \$         ) (Revenue \$         )
	·
	·
4c	(Onder ) (Europe 6
40	(Code:) (Expenses \$
	·
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 2,690,637.
	Form <b>990</b> (2024)

# Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			$ _{\mathbf{x}}$
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		Х	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Λ	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	э		122
O	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
Ū	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			٠,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			- V
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- "	-25	
120	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			\ \ •
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_ v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
20a	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<del></del>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_00		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
	• , , , , , , , , , , , , , , , , , , ,			

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

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			110
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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			
04-	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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	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			177
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	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			
		25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash 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			l
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	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	<u></u>	Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		X
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pai	Note: All Form 990 filers are required to complete Schedule O  To V  Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 57			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		
C	(gambling) winnings to prize winners?	1c	Х	
	/O O/			

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

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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	If "Yes," enter the name of the foreign country									
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		Х						
5a	, , , , , , , , , , , , , , , , , , , ,									
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		Х						
_	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60		X						
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		25						
D	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).	OD								
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor'	7a		х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		х						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e								
f										
g										
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year? N/A	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a									
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 N/A 11a	_								
D	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)									
19a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year $\frac{N}{A}$ 12b	124								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?  N/A	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 the									
	organization is licensed to issue qualified health plans									
С	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			x						
excess parachute payment(s) during the year?										
	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						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  N/A	17								
	If "Yes," complete Form 6069.									

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion 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 la									
	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 12									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5										
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
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						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	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? If "Yes," describe									
	on Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and 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							
	Other officers or key employees of the organization	15b		Х						
	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 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								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed None									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only	availa	able						
	for public inspection. Indicate how you made these available. Check all that apply.	,								
	X 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 policy, an	d finar	ncial							
	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									
	Brian Buzby - 919-857-4699									
	534 Fayetteville Street, 5th Floor, Raleigh, NC 27601									

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

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

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

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

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

- 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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated
	hours per week	box offic	box, unless person is officer and a director.				h an tee)	compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	ndividual trustee or director	au			ted		organization	(W-2/1099-MISC/	from the
	related	ustee	nstitutional trustee		98	suadı		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization
	organizations below	dual tr	tional		nploye	st con yee	_	1099-NEC)		and related organizations
	line)	Individ	Institu	Officer	Key employee	Highest compensated employee	Former			orgamizatione
(1) Brian Buzby	40.00									
Executive Director				Х				175,399.	0.	22,056.
(2) Grady McCallie	40.00									
Policy Director						Х		125,472.	0.	27,158.
(3) Peter Walz	40.00								_	
Director of Strategy and Organizing						Х		113,671.	0.	20,268.
(4) Melinda Hiteshue	40.00									
Director of Operations and Finance						Х		107,000.	0.	14,048.
(5) Jacquie Ayala	3.00	l								
Chair		Х						0.	0.	0.
(6) Gray Jernigan	2.00									•
Vice Chair	0.00	Х						0.	0.	0.
(7) Dodd Haynes	2.00	,,								0
Treasurer	1 00	Х						0.	0.	0.
(8) Michelle Allen	1.00	٠,,							0	0
Secretary	1 00	Х						0.	0.	0.
(9) Vikki Crouse	1.00	<b>.</b> ,							0	0
Board Member At-Large	1.00	Х						0.	0.	0.
(10) Jeff Currie	1.00	X						0.	0.	0.
Board Member (11) Blakely Hildebrand	1.00	^						0.	0.	0.
Board Member	1.00	X						0.	0.	0.
(12) Dana Sargent	1.00	^						0.	0.	0.
Board Member	1.00	x						0.	0.	0.
(13) Emily Sutton	1.00							· ·	•	•
Board Member	1.00	x						0.	0.	0.
(14) Whitney Tucker	1.00								•	
Board Member		x						0.	0.	0.
(15) Daisha Wall	1.00	<u> </u>								
Board Member		х						0.	0.	0.
(16) Melissa Williams	1.00									-
Board Member		Х						0.	0.	0.
		1				l				

Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C		es (continued)				
(A)	(B)			•	C)			(D)	(E)			(F)	
Name and title	Average		not c		more	than		Reportable	Reportable		l	timate	
	hours per week					is bot or/trus		compensation	compensation			nount (	of
	(list any	$\vdash$					Ú	from the	from relate organizatior		l	other	tion
	hours for	Individual trustee or director				_		organization	(W-2/1099-MI			pensator om the	
	related	e or 0	stee			satec		(W-2/1099-MISC/	1099-NEC			anizati	
	organizations	truste	Institutional trustee		yee	mper		1099-NEC)		<i>'</i>	·	d relate	
	below	idual	ution	ie i	Key employee	est co oyee	le.	,			orga	anizatio	ons
	line)	Indiv	Insti	Officer	Key e	Highest compensated employee	Бm						
		_											
1b Subtotal						<u> </u>	<u> </u>	521,542.		0.	8	3,5	30.
c Total from continuation sheets to Part V	II Section A							0.		0.	Ť	<del> </del>	0.
d Total (add lines 1b and 1c)								521,542.		0.	8	3,5	
2 Total number of individuals (including but r								-	0.000 of reportab	ole			
compensation from the organization						-,		···································	,				4
-												Yes	No
3 Did the organization list any former officer,	•		•		•		_		•				
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the standard related organizations greater than \$15	-		-					•	the organization		4	х	
5 Did any person listed on line 1a receive or									dual for services	 3			
rendered to the organization? If "Yes," con	plete Schedul	e J f	or su	uch	pers	son .					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co										npens	ation	from	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	rithir T		year.				
<b>(A)</b> Name and business	address	N	ONE	3				<b>(B)</b> Description of s	ervices	С	ompe	ر) nsatio	า
							$\neg$						
							$\dashv$						
2 Total number of independent contractors (	including but n	ot li	mite	d to	tho	se lis	sted	d above) who received m	nore than				
\$100,000 of compensation from the organi						0		,					

NORTH CAROLINA CONSERVATION NETWORK

Pa	rt v	Ш	_			and the transport VIIII			
			Check if Schedule O co	ntains a response	or note to any lir	ne in this Part VIII (A)	(B)	(C)	(D)
						Total revenue	Related or exempt		Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts		b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contrib All other contributions, gifts, grants)	1b 1c 1d 1d 1e	56,451.				
ribut Othe		-	similar amounts not included at		791,031.				
ont od (		_	Noncash contributions included in lin	nes 1a-1f <b>1g</b> \$		F 0.45 400			
<u>a</u> C		h	Total. Add lines 1a-1f		1	5,847,482.			
			Conforme		Business Code	10 500	10 500		
/ice	2		Conference		900099	10,500.	10,500.		
Ser		b							
m S ven		C							
gra Re		d							
Program Service Revenue		e f	All other program service re	wonuo					
			Total. Add lines 2a-2f			10,500.			
	3	9	Investment income (includin			,			
			•		•	406,416.			406,416.
	4		Income from investment of						
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents6	ба					
		b	' '' ⊢	6b					
			` ′ ∟	Эc					
			Net rental income or (loss)						
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			· -	7a					
<u>o</u>		D	Less: cost or other basis	76	845.				
enn		_		7b 7c	-845.	-			
Revenue			Net gain or (loss)			-845.			-845.
ē			Gross income from fundraising		1	0 2 0 0			<b>3 2 3</b> 3
g			including \$	,					
			contributions reported on lir						
			Part IV, line 18	8a					
		b	Less: direct expenses	8b					
			Net income or (loss) from fu						
	9	а	Gross income from gaming						
			Part IV, line 19			-			
			Less: direct expenses  Net income or (loss) from ga						
			Gross sales of inventory, les						
	10	а	and allowances						
		h	Less: cost of goods sold						
			Net income or (loss) from sa		1				
s					Business Code				
Miscellaneous Revenue	11	а	Miscellaneous	Revenue	900099	5,833.	5,833.		
lan		b							
Rev		С							
Z Zis			All other revenue			F 022			
		е	Total. Add lines 11a-11d			5,833. 6,269,386.	16,333.	0.	405,571.
	12		Total revenue. See instructions	·		0,200,300.	1 10,000.	1 0.	<del></del> UJ,J/1-•

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 clude amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
7b, 8b, 9b	b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
	ts and other assistance to domestic organizations domestic governments. See Part IV, line 21				
	nts and other assistance to domestic riduals. See Part IV, line 22				
	nts and other assistance to foreign				
	nizations, foreign governments, and foreign riduals. See Part IV, lines 15 and 16				
	efits paid to or for members				
	ppensation of current officers, directors,				
	tees, and key employees	197,455.	165,270.	23,398.	8,787
	pensation not included above to disqualified				. ,
	ons (as defined under section 4958(f)(1)) and				
	ons described in section 4958(c)(3)(B)				
	er salaries and wages	1,523,583.	1,275,239.	180,544.	67,800
	ion plan accruals and contributions (include	, ,			·
	on 401(k) and 403(b) employer contributions)	34,599.	28,959.	4,100.	1,540
	er employee benefits	226,535.	189,610.	26,844.	1,540 10,081
	roll taxes	126,134.	105,574.	14,947.	5,613
	s for services (nonemployees):	-	-		<del></del>
	agement				
	al				
	ounting	45,102.		45,102.	
	oying				
	essional fundraising services. See Part IV, line 17				
	stment management fees				
	er. (If line 11g amount exceeds 10% of line 25,				
_	nn (A), amount, list line 11g expenses on Sch O.)	4,375.		4,375.	
	ertising and promotion				
	e expenses	10,015.	8,384.	1,187.	444
	mation technology				
	alties				
	upancy	141,212.	118,194.	16,734.	6,284
7 Trav		39,333.	32,922.	4,661.	1,750
8 Payr	ments of travel or entertainment expenses				
	ny federal, state, or local public officials				
	ferences, conventions, and meetings	38,143.	35,501.	1,921.	721
0 Inter	rest				
1 Payr	ments to affiliates				
2 Depr	reciation, depletion, and amortization	10,105.	8,458.	1,197.	450
3 Insu	rance	8,605.		8,605.	
above line 2	r expenses. Itemize expenses not covered e. (List miscellaneous expenses on line 24e. If 24e amount exceeds 10% of line 25, column (A), unt, list line 24e expenses on Schedule O.)				
	ojects	649,012.	550,871.	67,898.	30,243
	ganizing	127,036.	119,369.	5,574.	2,093
	ard and Staff Develop	24,124.	12,062.	12,062.	
d Pr	inting	21,329.	17,853.	2,527.	949
e All of	ther expenses	39,573.	22,371.	16,012.	1,190
5 Total	I functional expenses. Add lines 1 through 24e	3,266,270.	2,690,637.	437,688.	137,945
6 Joint	t costs. Complete this line only if the organization				
	rted in column (B) joint costs from a combined				
	ational campaign and fundraising solicitation.				
Chec	k here if following SOP 98-2 (ASC 958-720)			<u> </u>	Form <b>990</b> (20)

Part X	Balance Sheet					
	Check if Schedule O contains a response or	note to any li	ne in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	2,703,766.	1	403,976		
2	Savings and temporary cash investments			4,775,422.	2	9,631,510
3	Pledges and grants receivable, net		168,545.	3	594,444	
4	Accounts receivable, net			4		
5	Loans and other receivables from any curren	ficer, director,				
	trustee, key employee, creator or founder, su					
	controlled entity or family member of any of t	sL		5		
6	Loans and other receivables from other disquared	ns (as defined				
	under section 4958(f)(1)), and persons descr	ibed in sectio	n 4958(c)(3)(B)		6	
ပ္ 7	Notes and loans receivable, net				7	
Assets 4	Inventories for sale or use				8	
<sup>⊄</sup>   9	Prepaid expenses and deferred charges			39,604.	9	62,483
10a	a Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D		82,639.			
t	Less: accumulated depreciation		66,425.	25,722.	10c	16,214
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, lin			12		
13	Investments - program-related. See Part IV, li		13			
14	Intangible assets	45.000	14	45.00		
15	Other assets. See Part IV, line 11	15,000.	15	15,000		
16	Total assets. Add lines 1 through 15 (must e			7,728,059.	16	10,723,627
17	Accounts payable and accrued expenses			84,242.	17	73,220
18	Grants payable		406	18	2 000	
19	Deferred revenue		426.	19	3,900	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Comple				21	
g   22	Loans and other payables to any current or f					
	trustee, key employee, creator or founder, su					
	controlled entity or family member of any of t				22	
23	Secured mortgages and notes payable to un				23	
24	Unsecured notes and loans payable to unrel				24	
25	Other liabilities (including federal income tax,					
	parties, and other liabilities not included on li	nes 17-24). C	omplete Part X		05	
	of Schedule D			84,668.	25 26	77,120
26	Total liabilities. Add lines 17 through 25		X	04,000.	26	77,120
es	Organizations that follow FASB ASC 958,	check here	1			
27	and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions			6,418,997.	27	9,807,154
28	Net assets with donor restrictions			1,224,394.	28	839,353
	Organizations that do not follow FASB AS			1,221,331,	20	000,000
∄	and complete lines 29 through 33.	C 330, CHECK				
b 29	Capital stock or trust principal, or current fur	nde			29	
30	Paid-in or capital surplus, or land, building, o				30	
SS 30 31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances 27 28 29 30 31 32 32	Total net assets or fund balances			7,643,391.	32	10,646,507
Z   32   33	Total liabilities and net assets/fund balances			7,728,059.		10,723,627
33	Total liabilities and het assets/fullu balances			.,.20,000.	JJ	Form <b>990</b> (202

Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6	, 26	9,3	86.			
2									
3	Revenue less expenses. Subtract line 2 from line 1								
4									
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	10	,64	6,5	07.			
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII					X			
					Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?			2b	<u> </u>				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,						
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	, , , , ,								
	review, or compilation of its financial statements and selection of an independent accountant?			2c	<u> </u>				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci	nedule (	Э.						
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?								
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	dit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b					

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

Inspection

Employer identification number

OMB No. 1545-0047

Name of the organization

NORTH CAROLINA CONSERVATION NETWORK

58-2504713 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

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

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

Sec	ction A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total					
1	Gifts, grants, contributions, and						_					
	membership fees received. (Do not											
	include any "unusual grants.")	2,824,208.	3,682,071.	2,845,689.	3,206,189.	5,847,482.	18,405,639.					
2	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
	or expended on its behalf											
3	The value of services or facilities											
	furnished by a governmental unit to											
	the organization without charge											
4	Total. Add lines 1 through 3	2,824,208.	3,682,071.	2,845,689.	3,206,189.	5,847,482.	18,405,639.					
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)						260,216.					
6	Public support. Subtract line 5 from line 4.						18,145,423.					
	Section B. Total Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total					
7	Amounts from line 4	2,824,208.	3,682,071.	2,845,689.	3,206,189.	5,847,482.	18,405,639.					
	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources	31,947.	13,859.	33,909.	195,618.	406,416.	681,749.					
9	Net income from unrelated business	-	-	-	-	-	<u> </u>					
	activities, whether or not the											
	business is regularly carried on											
10	Other income. Do not include gain											
	or loss from the sale of capital											
	assets (Explain in Part VI.)	7,644.				5,833.	13,477.					
11		,					19,100,865.					
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	10,500.					
13	First 5 years. If the Form 990 is for the	· ·		ourth, or fifth tax	vear as a section 5	501(c)(3)	<u> </u>					
	organization, check this box and <b>stor</b>	haua										
Sec	ction C. Computation of Publ											
14	Public support percentage for 2024 (I	ine 6, column (f), d	ivided by line 11, o	olumn (f))		14	95.00 %					
15	Public support percentage from 2023	Schedule A, Part	II, line 14			15	94.67 %					
16a	33 1/3% support test - 2024. If the o					nore, check this bo	x and					
	stop here. The organization qualifies	as a publicly supp	orted organization				X					
b	33 1/3% support test - 2023. If the o											
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion								
17a	10% -facts-and-circumstances tes											
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop her	r <b>e.</b> Explain in Part	VI how the organiz	ation					
	meets the facts-and-circumstances to	est. The organization	on qualifies as a pu	blicly supported of	organization							
b	10% -facts-and-circumstances tes	-	•	*	-							
	more, and if the organization meets the	_										
	organization meets the facts-and-circle				-							
<u>1</u> 8	Private foundation. If the organization											
	<del>-</del>		•	. ,			Form 990) 2024					

Schedule A (Form 990) 2024

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

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

Se	ction A. Public Support	clow, please com	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Gifts, grants, contributions, and						,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that					1	
J	are not an unrelated trade or bus- iness under section 513						
1	Tax revenues levied for the organ-						
7	ization's benefit and either paid to or expended on its behalf						
_	The value of services or facilities						
5	furnished by a governmental unit to the organization without charge						
6	***						
	Total. Add lines 1 through 5		+		+	+	
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					1	
14	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
_	check this box and stop here						<u></u>
	ction C. Computation of Publ						
	Public support percentage for 2024 (I			column (f))		15	%
	Public support percentage from 2023					16	%
	ction D. Computation of Inves		<u>-</u>			11	
17	. 3					17	%
18	1 3					18	%
19	a 33 1/3% support tests - 2024. If the	-					17 is not
ŀ	more than 33 1/3%, check this box a 33 1/3% support tests - 2023. If the						and
	line 18 is not more than 33 1/3%, che	· ·			•	•	
20	Private foundation. If the organization			•		•	

432023 01-14-25

# Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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		
7		
8		
9a		
01-		
9b		
9c		
10a		
10b		

	3440 14 14 14 14 14 14 14 14 14 14 14 14 14		- 10	igo <b>o</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
0	provide detail in Part VI.	11c		
Sec	ction 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 one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	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.		Yes	No
а				
	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.	2a		
b				
	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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а		_		
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI</b> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

1	Check here if the organization satisfied the Integral Part Test as a qualifying			Dart VI) See instructions			
•	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
	All other Type III nor-functionally integrated supporting organizations must	st complete	Sections A through L.	(B) Current Year			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(optional)			
_1_	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
_3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
e	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
-	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional		ed Type III supportina ora	anization (see			
	instructions).	, 5	,, ,,	· · · · · · · · · · · · · · · · · · ·			

Schedule A (Form 990) 2024

9

10

Distributable amount for 2024 from Section C, line 6

10 Line 8 amount divided by line 9 amount

<u></u>	Line o amount divided by line 3 amount	T	10	
Sect	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2024			
а	From 2019			
b	From 2020			
С	From 2021			
d	From 2022			
e	From 2023			
f	Total of lines 3a through 3e			
g	Applied to under distributions of prior years			
h	Applied to 2024 distributable amount			
i_	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2025. Add lines 3j			
	and 4c.			
_8_	Breakdown of line 7:			
	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
<u>e</u>	Excess from 2024			

Schedule A (Form 990) 2024

#### SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

		01(c)(4), (5), or (6) organiza	tions: Complete Part III.		Te	- L
Nam	ne of orga					ployer identification number (EIN)
			AROLINA CONSERVA			58-2504713
Ра	rt I-A	Complete if the org	janization is exempt un	der section 501(c)	or is a section 527	organization.
2	Political	campaign activity expendit	cation's direct and indirect polit ures gn activities			
Pa	rt I-B	Complete if the ord	janization is exempt un	der section 501(c)	(3).	
$\overline{}$	Enter the	e amount of any excise tax	incurred by the organization ur	nder section 4955	-	\$
2	Enter the	amount of any excise tax	incurred by organization mana	gers under section 4955	j	\$
3	If the ord	anization incurred a sectio	n 4955 tax, did it file Form 472	O for this vear?	***************************************	Yes No
			······································			
		describe in Part IV.				
Pa	rt I-C	Complete if the org	janization is exempt un	der section 501(c),	, except section 50	1(c)(3).
1	Enter the	amount directly expended	d by the filing organization for s	ection 527 exempt func	tion activities	\$
2	Enter the	e amount of the filing organ	ization's funds contributed to d	other organizations for se	ection 527	
	exempt 1	unction activities				\$
3			s. Add lines 1 and 2. Enter here			
	line 17b					\$
4	Did the f	iling organization file <b>Form</b>	1120-POL for this year?			Yes No
5	Enter the	e names, addresses, and E	INs of all section 527 political o	rganizations to which th	e filing organization made	e payments. For each
	•	•	nt paid from the filing organization			
			separate political organization	, such as a separate seg	gregated fund or a politica	al action committee (PAC).
	If addition	nal space is needed, provi	de information in Part IV.	<del>- 1</del>	1	1
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and promptly and directly
						delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990) 2024

	rt II-A   Complete if the org			npt under sectio			ection under
	section 501(h)).			•	( ), )	•	
Α	Check if the filing organiza	tion belon	gs to an affi	liated group (and list ir	Part IV each affiliated	I group member's nam	e, address, EIN,
	expenses, and sha	re of exces	ss lobbying	expenditures).			
В	Check if the filing organiza	tion check	red box A ar	nd "limited control" pro	ovisions apply.		-
			bying Expe neans amou	nditures ınts paid or incurred.]	)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to infl	uence pub	olic opinion (	grassroots lobbying)		0.	
b	Total lobbying expenditures to influ	uence a le	gislative boo	dy (direct lobbying)		2,078.	
c	: Total lobbying expenditures (add I	ines 1a an	d 1b)			2,078.	
	Other exempt purpose expenditure					2,688,559.	
e	Total exempt purpose expenditure	es (add line	es 1c and 1c	i)		2,690,637.	
f	Lobbying nontaxable amount. Enter	er the amo	ount from the	e following table in bot	h columns.	284,532.	
	IF the amount on line 1e, column (a)	or (b), is:	THEN t	he lobbying nontaxab	le amount is:		
	not over \$500,000		20% of	the amount on line 1e.			
	over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
	over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
	over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
	over \$17,000,000		\$1,000,0	000.			
	Grassroots nontaxable amount (er	nter 25% c	of line 1f)			71,133.	
h	Subtract line 1g from line 1a. If zer	o or less, e	enter -0-			0.	
i	Subtract line 1f from line 1c. If zero	o or less, e	enter -0			0.	
j	If there is an amount other than ze	ero on eithe	er line 1h or	line 1i, did the organiza	ation file Form 4720		
	reporting section 4911 tax for this	year?					Yes No
	(Componentiano II	h = 4 = -l =		eraging Period Under		af Alaa firra aa luurus la	-l
	(Some organizations t			o i(ii) election do not ate instructions for li	•	of the five columns b	elow.
		Lobl	bying Exper	nditures During 4-Yea	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a)	2021	<b>(b)</b> 2022	(c) 2023	( <b>d)</b> 2024	(e) Total
2a	Lobbying nontaxable amount	22	7,390.	259,210.	242,626.	284,532.	1,013,758.
	Lobbying ceiling amount (150% of line 2a, column(e))						1,520,637.
	: Total lobbying expenditures	3	8,216.	15,453.	14,510.	2,078.	70,257.
	Grassroots nontaxable amount	5	6,848.	64,803.	60,657.	71,133.	253,441.
	e Grassroots ceiling amount (150% of line 2d, column (e))						380,162.
		i		i	i	ı	1

6,346.

120.

f Grassroots lobbying expenditures

848.

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

of the	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(b	)
Or tri	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	(5) or se	ction	
ı uı	501(c)(6).	)	0), 01 30	Otion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year	? 3		
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			t III-A, lir	ne 3, is
1	Dues, assessments, and similar amounts from members		1		
2	expenses for which the section 527(f) tax was paid):	al			
_	,		2a		
	Current year Carryover from last year				
	Total				
_	Addredate amount reported in section buildies in the postices of nondeductible section. In diel dues				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
_	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
_	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and particles.	ess olitical	3		
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditures next year?	ess political	4		
_	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditures next year?	ess political	3		
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and particles.	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	
3 4 5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  To supplemental Information  Indeed the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ess	4 5	and 2 (see	

Schedule C (Form 990) 2024

#### **SCHEDULE D** (Form 990)

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

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NORTH CAROLINA CONSERVATION NETWORK

**Employer identification number** 58-2504713

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2a	2c
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not	
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2d above		
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	nents that describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of		other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		<u> </u>

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

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

# Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land					
<b>b</b> Buildings					
c Leasehold improvements					
<b>d</b> Equipment		82,639.	66,425.	16,214.	
e Other					
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))					

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

Part VII Investments - Other Securities			6-2504/13 Page
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a) D	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	. (B))		
Part X Other Liabilities	(-//		
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	e 11e or 11f. See Form 990. Part X. line 25	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			()
(2)			
(3)			
(4)			
(5)			1
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col.			
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... X Schedule D (Form 990) (Rev. 12-2024)

	t XI	Reconciliation of Revenue per Audited Financial Stateme				130 ± 7 ± 3 Fage <del>1</del>
ı aı	ιχι	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		iui nevenue pei n	Ctuiii	
1	Total				1	6,269,386.
2		ints included on line 1 but not on Form 990, Part VIII, line 12:			•	0,203,300.
a		nrealized gains (losses) on investments	2a			
b		ted services and use of facilities				
c		veries of prior year grants				
d		(Describe in Part XIII.)				
e		ines 2a through 2d			2e	0.
3		act line 2e from line 1			3	6,269,386.
4		ints included on Form 990, Part VIII, line 12, but not on line 1:				· · ·
а		tment expenses not included on Form 990, Part VIII, line 7b	4a			
b		(Describe in Part XIII.)	-			
С		ines 4a and 4b			4c	0.
5	Total	revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5	6,269,386.
Pai	rt XII	Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expenses per	Retu	rn
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total	expenses and losses per audited financial statements			1	3,266,270.
2	Amou	ints included on line 1 but not on Form 990, Part IX, line 25:				
а	Donat	ted services and use of facilities	2a			
b	Prior y	year adjustments	2b			
С	Other	losses	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add li	nes 2a through 2d			2e	0.
3	Subtr	act line 2e from line 1			3	3,266,270.
4	Amou	ints included on Form 990, Part IX, line 25, but not on line 1:				
а		tment expenses not included on Form 990, Part VIII, line 7b	-			
b	Other	(Describe in Part XIII.)	4b			
С		ines 4a and 4b			4c	0.
5		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,266,270.
		Supplemental Information				
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			1; Part	X, line 2; Part XI,
		d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional in	formation.		
		I, Line 2: twork is exempt from federal and state	ina		4020	Coation
		of the Internal Revenue Code and is c				
		(3) as a public charity. The Network h				
		that is not a private foundation with				
		and qualifies for deductible contribu				
		(1)(A)(vi). The Network files informat				
		I jurisdiction and in North Carolina.				
		tax for the years ending December 31,			1400	ed Dubinebb
		tan for the years charing becomber 51,	202	4 dia 2025.		
The	- Ne	twork evaluates any uncertain tax posi	tion	s. According	1v.	the
		k's policy is to record a liability for				
is	ben	eficial to the Network, including any	rela	ted interest	and	1
		ies, when it is more likely than not t				
		t to a transaction or class of transac				
		authority upon examination. Managemen				
		ons as of December 31, 2024 and 2023.		·		•
		•				



## SCHEDULE J (Form 990)

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

Name of the organization

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

NORTH CAROLINA CONSERVATION NETWORK

Employer identification number 58-2504713

Pa	art I Questions Regarding Compensation							
	·		Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,							
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)							
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b						
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,							
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2						
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
	establish compensation of the CEO/Executive Director, but explain in Part III.							
	Compensation committee							
	Independent compensation consultant  X Compensation survey or study							
	Form 990 of other organizations  X Approval by the board or compensation committee							
	Desire the control of							
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
_	organization or a related organization:  Receive a severance payment or change-of-control payment?	40		х				
a h	Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?	4a 4b		X				
0	Participate in or receive payment from an equity-based compensation arrangement?							
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Tes to any or lines 4a o, list the persons and provide the applicable amounts for each item in a tim.							
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5								
а	The organization?	5a		Х				
	Any related organization?	5b		Х				
	If "Yes" on line 5a or 5b, describe in Part III.							
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the net earnings of:							
а	The organization?	6a		X				
b	Any related organization?	6b		Х				
	If "Yes" on line 6a or 6b, describe in Part III.							
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments							
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X				
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the							
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X				
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in							
	Regulations section 53.4958-6(c)?	9	1	ı				

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

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Brian Buzby	(i)	175,399.	0.	0.	5,433.	16,623.		0.
Executive Director	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Grady McCallie	(i)	125,472.	0.	0.	4,128.	23,030.		0.
Policy Director	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### SCHEDULE O (Form 990)

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

# Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 58-2504713 NORTH CAROLINA CONSERVATION NETWORK

Part III, Line 4a: IN 2024, OUR GRASSROOTS BASE OF OVER 48,000 EMAIL ACTIVISTS AND OVER 20,000 TEXT ALERT SUBSCRIBERS SENT EMAILS AND MADE PHONE CALLS TO THEIR DECISION-MAKERS TO REDUCE CARBON EMISSIONS, INCREASE CLEAN ENERGY, CLEAN UP FOREVER CHEMICALS, FIGHT FOR ENVIRONMENTAL JUSTICE, BUILD RESILIENT COMMUNITIES, AND MORE. THIS RESULTED IN OVER 24,000 ONLINE ACTIONS TO SUPPORT OUR ENVIRONMENT. OUR VOLUNTEERS ALSO GENERATED OVER 1,500 OFFLINE ACTIONS INCLUDING: ATTENDING PUBLIC HEARINGS AND EVENTS, COLLECTING POSTCARDS, CONNECTING WITH LEGISLATORS, PARTICIPATING IN ACTIVIST MEETINGS, AND RECRUITING VOLUNTEERS FOR AFFILIATE EVENTS. VOLUNTEERS WROTE AND MAILED OVER 32,000 VOTER-TO-VOTER LETTERS WITH NON-PARTISAN GET-OUT-THE-VOTE INFORMATION.

NC CONSERVATION NETWORK WORKS TO INCREASE AWARENESS OF-AND WAYS TO TAKE ACTION ON-KEY ISSUES IMPACTING THE HEALTH OF OUR STATE THROUGH SOCIAL MEDIA. IN 2024, WE MAINTAINED LISTS OF APPROXIMATELY 173,000 FACEBOOK FOLLOWERS, 70,000 X FOLLOWERS, 41,000 TIKTOK FOLLOWERS, AND 16,000 INSTAGRAM FOLLOWERS.

NC CONSERVATION NETWORK WORKS TO CONTINUALLY SUPPORT OUR AFFILIATES-OVER 60 ENVIRONMENTAL, COMMUNITY, AND ENVIROMENTAL JUSTICE ORGANIZATIONS. WE PROVIDE THIS SUPPORT IN MANY WAYS, INCLUDING: COORDINATING ON THE CREATION OF COMPLIMENTARY, COMPREHENSIVE STRATEGIES FOR THE COMMUNITY'S MOST PRESSING ISSUES; DEVELOPING LOCAL CAMPAIGNS TO WIN ENVIRONMENTAL PROTECTIONS; AND BUILDING THE GROUPS' CAPACITIES TO BE MORE SUCCESSFUL AND SUSTAINABLE.

Form 990, Part VI, Section B, line 11b: DESIGNATED STAFF PERSON SENDS THE FORM 990 TO THE ENTIRE BOARD OF DIRECTORS PRIOR TO FILING THE RETURN WITH THE IRS.

Form 990, Part VI, Section B, Line 12c: THE ORGANIZATION REQUIRES ALL EMPLOYEES TO SIGN A CONFLICT OF INTEREST POLICY UPON JOINING THE ORGANIZATION. ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE TO THE EXECUTIVE DIRECTOR ANY SITUATIONS WHERE A CONFLICT OF INTEREST ARISES. BOARD MEMBERS ARE ALSO REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY AT THE BEGINNING OF EACH YEAR.

Form 990, Part VI, Section B, Line 15a: THE ORGANIZATION PERIODICALLY CONDUCTS AN ORGANIZATION-WIDE SALARY ADJUSTMENT REVIEW TO SET SALARY LEVELS FOR ALL STAFF. THIS SALARY REVIEW INCLUDES A SURVEY TO COMPARE SALARY LEVELS WITH SIMILAR ORGANIZATIONS IN NORTH CAROLINA AND ACROSS THE UNITED STATES. IN ADDITION, THE BOARD CONDUCTS AN ANNUAL PERFORMANCE REVIEW AND SALARY ADJUSTMENT FOR THE EXECUTIVE DIRECTOR. THIS PROCESS BEGINS WITH THE EXECUTIVE DIRECTOR MEETING WITH THE EXECUTIVE COMMITTEE OF THE BOARD AND ENDS WITH THE ENTIRE BOARD DISCUSSING AND APPROVING AN ANNUAL REVIEW AND SALARY ADJUSTMENT.

Form 990, Part VI, Section C, Line 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. FINANCIAL STATEMENTS ARE

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

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

432211 01-15-25