Form	99	0
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Department of the Treasury

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

Open to Public Inspection

OMB No. 1545-0047 2020

Λ	For the	o 2020 calon	dar year, or tax					and ending				. 20	
				year begin	innig		, 2020,		1			, 20 ification number	
D		applicable:	-			TNO							
		tress change	LAND PRES 13501 FAL			INC.				52-	1465		
		ne change	COCKEYSVI										
	Initi	ial return	COCIULIDVI		21030					443	578	-4404	
	Final	I return/terminated											
		ended return								G Gross r		= / = = = /	
	App	olication pending		ress of principa	I officer: VIC	TORIA COI	LINS		H(a) Is this a			103	X <sub>No</sub>
			SAME AS C	ABOVE					H(b) Are all s If "No,"	subordinates attach a list	include	d? Yes	No
I	Tax-ex	xempt status:	X 501(c)(3)	501(c) (	) <b>▲</b> (ir	nsert no.)	4947(a)(1) or	527					
J	Web	site: ► WW	W.THELAND	PRESERV	ATIONTRU	ST.ORG		I	H(c) Group e	exemption nu	umber 🕨	•	
κ		of organization:	X Corporation	Trust	Association	Other ►	LY	ear of formatio	on: 1986	5 M s	State of I	egal domicile: MD	
Pa	art I	Summar											
			be the organiza										
a			BALTIMORE										
Governance	1	<u>GENERATI</u>	ONS BY FAC	CILITAT	ING VOLU	<u>NTARY_CON</u>	ISERVAT:	ION AND	AGRIC	ULTUR	<u> 1 E</u>	ASEMENTS.	
en	-												
<u>So</u>	2 ( 3 1	Check this bo	ox ► if the oting members			ed its operatio						sets.	1 1
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4		dependent voti								3		$\frac{11}{10}$
es	5		of individuals	-	-						5		3
Activities &	6 7		of volunteers (								6		20
Act	7a 🗆	Total unrelate	ed business rev	enue from	Part VIII, col	umn (C), line	12				7a		0.
	b⊺	Net unrelated	d business taxal	ble income	from Form 9	90-T, Part I, I	ine 11				7b		0.
									P	rior Year		Current Ye	ear
e de la constante de la consta	8 (	Contributions	and grants (Pa	art VIII, line	1h)				1	,934,6	512.	2,121	,833.
ň	<b>9</b> F	Program serv	vice revenue (P	art VIII, line	e 2g)					178,8	334.		
Revenue			ncome (Part VII							22,9			,739.
œ			e (Part VIII, col							57,2			,311.
			e – add lines 8	-						,193,6	544.	2,222	<u>,883.</u>
			imilar amounts		-								
ŝ	15 5	Salaries, oth	her compensation, employee benefits (Part IX, column (A), lines 5-10)								.61.	76	,772.
Expenses	16a F	Professional	fundraising fees	s (Part IX, o	column (A),	line 11e)							
be	b⊺	Total fundrais	sing expenses (	Part IX, co	lumn (D), lin	e 25) 🕨	2	2,005.					
ш	17 (	Other expens	ses (Part IX, col	lumn (A), li	nes 11a-11d	, 11f-24e)			2	,134,5	593.	2,057	.075.
	18	Total expens	es. Add lines 13	3-17 (must	equal Part I>	K, column (A),	line 25)			,234,7		2,133	
			s expenses. Sul							-41,1			,036.
or									Beginnin	g of Curren		End of Ye	-
Net Assets or Fund Balances	20	Total assets	(Part X, line 16	)						,201,5		3,407	,829.
Ass Ba	21 7	Total liabilitie	es (Part X, line :	26)						19,6			,241.
Net	22	Net assets or	fund balances	. Subtract li	ne 21 from I	ine 20			3	,181,8	360.	3,310	.588.
Pa	art II	Signatur	e Block							, - , -		- /	
			eclare that I have exa arer (other than office	amined this retu	urn, including acc	companying schedu	ules and staten	nents, and to th	he best of m	y knowledge	and beli	ief, it is true, correct	, and
com	plete. Dec	claration of prepa	arer (other than office	er) is based on	all information o	f which preparer ha	as any knowled	dge.					
			1 cm	V a	- (	$\overline{\mathbb{N}}$					<u> </u>	$\gamma \gamma \gamma \gamma$	1
Sig	gn	Signatu	ire of officer			-			Dat	te	•	'	
He	re		TORIA COLI						PRESI	DENT			
		÷.	print name and title		1								
		Print/Type p	preparer's name		Preparer's sigr	nature		Date		Check	if	PTIN	
Pa			SCHOLTES,			CHOLTES,		11/15/2	021	self-employe	ed	P01607734	
	epare		012111			ASSOCIATE	ES						
Us	e Onl	<b>y</b> Firm's addr		UNBRIDG	E RD					Firm's EIN		-0483170	
			BALTI		D 21212					Phone no.	410	-323-0010	
	-		nis return with th				ctions					. X Yes	No
BA	A For	Paperwork F	Reduction Act N	lotice, see	the separate	instructions.		TEE	40101L 01/1	9/21		Form <b>99</b>	<b>)</b> (2020)

Forn	n 990 (2020) LAND PRESERVATI	ION TRUST, INC.	52-1	465309 Page 2
Pa		ervice Accomplishments a response or note to any line in this Par	+ 111	X
1				Λ
1		551011.		
	SEE SCHEDULE O			
				·
2	Did the organization undertake any signi	ficant program services during the year whic	h were not listed on the prior	
				Yes X No
	If "Yes," describe these new services on			
3	Did the organization cease conducting	g, or make significant changes in how it c	onducts, any program services?	Yes X No
	If "Yes," describe these changes on Sch	edule O.		
4	Describe the organization's program s	service accomplishments for each of its th	ree largest program services, as i	measured by expenses.
	and revenue, if any, for each program	nizations are required to report the amour n service reported.	it of grants and allocations to othe	rs, the total expenses,
4 8	a (Code: ) (Expenses \$	2,068,525. including grants of \$	) (Revenue	\$ 282.)
	LAND PRESERVATION TRUST	, INC. THE TRUST WAS FORME		
		, PROTECTION, AND BALANCED		- – – – – – – – – – – – – – – – – – – –
		E, AND OPEN SPACE LANDS, I		
	OF FEE SIMPLE TITLE, EA	SEMENTS, AND OTHER REAL PF	OPERTY INTERESTS. THE	TRUST ACQUIRES
	PROPERTY EASEMENTS EITH	ER THROUGH DONATIONS IN CO	NJUNCTION WITH THE MA	RYLAND
	ENVIRONMENTAL TRUST OR	PURCHASES THROUGH THE MARY	LAND RURAL LEGACY PRO	GRAM. THE TRUST
		AN EQUESTRIAN CENTER AND S		
		ESTABLISHED ON 300 ACRES		
		E_LANDSCAPE'S_AGRICULTURAI		<u>GANEW</u>
	TRADITION OF EQUESTRIAN	<u>EVENTS TO BENEFIT LOCAL C</u>	HARITIES.	
		· · · · · · · · · · · · · · · · · · ·		<u> </u>
41	(Code:) (Expenses \$	including grants of \$	) (Revenue	\$)
			·	
			·	
			·	·
				·
				·
				·
4	Code: ) (Expenses \$	including grants of \$	) (Revenue	\$ )
•	,(		, (, ter ende	·/
				·
40	d Other program services (Describe on			
	(Expenses \$	including grants of \$	) (Revenue \$	)
	• Total program service expenses	2,068,525.		F 000 (0000
BAA		TEEA0102L 10/07/20		Form <b>990</b> (2020)

 Form 990 (2020)
 LAND PRESERVATION TRUST, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	NO
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 public office? If 'Yes,' complete Schedule C, Part I.	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D</i> , <i>Part VI</i>	11 a	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	11 b		Х
c	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' 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
14 a	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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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Form 990 (2020) LAND PRESERVATION TRUST, INC.

Pa	rtiv	Checklist of Required Schedules (continued)			
~~	D: 1 1			Yes	No
22	Did t colur	he organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, mn (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	and f	he organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current ormer officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete edule J</i> .	23		Х
24 :	a Did th the la	he organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of ast day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and</i> olete Schedule K. If 'No, 'go to line 25a	24a		Х
I	,	he organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
		he organization maintain an escrow account other than a refunding escrow at any time during the year to defease tax-exempt bonds?	24c		
(	,	he organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Secti trans	ion 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit saction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	that t	e organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete adule L, Part I	25b		Х
26	Did t form or fa	he organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or er officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity mily member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	empl mem	he organization provide a grant or other assistance to any current or former officer, director, trustee, key loyee, creator or founder, substantial contributor or employee thereof, a grant selection committee aber, or to a 35% controlled entity (including an employee thereof) or family member of any of these ons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was instru	the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV actions, for applicable filing thresholds, conditions, and exceptions):			
i		rrent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If ,' complete Schedule L, Part IV.	28a		Х
I	<b>b</b> A far	nily member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c A 35 Yes,	% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If ' complete Schedule L, Part IV.	28c		Х
29	Did t	he organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did t contr	he organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation ributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did t	he organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did th Sche	he organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete</i> edule <i>N, Part II</i>	32		Х
33	Did th 301.7	he organization own 100% of an entity disregarded as separate from the organization under Regulations sections 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part L	33		Х
	and	the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV,</i> <i>Part V, line 1</i>	34		Х
35 a	<b>a</b> Did t	he organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	b If 'Ye entity	es' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled y within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Sect</b> i organ	ion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related nization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did th treate	he organization conduct more than 5% of its activities through an entity that is not a related organization and that is ed as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did th <b>Note</b>	he organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt 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		1	·
1:	<b>a</b> Ente	r the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5		Yes	No
I	<b>b</b> Ente	r the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	c Did ti (garr	he organization comply with backup withholding rules for reportable payments to vendors and reportable gaming nbling) winnings to prize winners?	1 c		
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Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			1
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return <b>2a</b> 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0	3b		
	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		Х
	If 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
	Enter the amount of reserves on hand 13c			
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		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		х
	If 'Yes,' see instructions and file Form 4720, Schedule N.	4.0		v
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		X

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Form	990 (2020) LAND PRESERVATION TRUST, INC. 52-1465309		P	Page
Par	t VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b ber a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI.	ges c	on	
Sec	tion A. Governing Body and Management			
1 a	Enter the number of voting members of the governing body at the end of the tax year <b>1 a</b> 11 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.		Yes	No
ŀ	Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>			
	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? SEE SCHEDULE O	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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5		X
6	Did the organization become during the year of a significant diversion of the organization s disets	6		X
7 a	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?	7 a		X
ł	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8 a	Х	
	Each committee with authority to act on behalf of the governing body?	8 b	Х	
	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? <i>If 'Yes,' provide the names and addresses on Schedule Q</i>	9		Х
Sec	tion <b>B. Policies</b> (This Section B requests information about policies not required by the Internal Re			1
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
11 -	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10 b 11 a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O	11a		
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 u	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was doneSEE. SCHEDULE . Q	12 c	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	
	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?			
	The organization's CEO, Executive Director, or top management official. SEE . SCHEDULEO	15a	Х	
ł	Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		X
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
ł	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	10.6		
Sec	organization's exempt status with respect to such arrangements?	16 b		<u> </u>
	List the states with which a copy of this Form 990 is required to be filed <b>MD</b>			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 50 available for public inspection. Indicate how you made these available. Check all that apply	1(c)(3	3)s or	ıly)
	Own website       Another's website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year. SEE SCHEDULE O State the name address and telephone number of the person who possesses the organization's books and records ►	le to		

20		ie, a	uuress, and	r reiebijou		or the per	son who possesses in	e org	anizations	DOORS	anu rec	Joius
	CHARLES	Ε.	VIETH	13501	FALLS	ROAD	COCKEYSVILLE	MD	21030	410	404-	6413

Form 990 (2020) LAND PRESERVATION TRUST, INC.	52-1465309	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highes Independent Contractors	t Compensated Employe	es, and
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 Compensa	ated Employees	
1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending organization's tax year.	g with or within the	
• List all of the organization's <b>current</b> officers, directors, trustees (whether individuals or organiza compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	tions), regardless of amount of	

• List all of the organization's current key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

					(C)	)					
	(A) Name and title	(B) Average hours per	thar	n one s both	box, an c	unles officer /truste		on	(D) Reportable compensation from the organization	<b>(E)</b> Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
		week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1)	GEORGE HUNDT JR.	<u>40</u>	v		v					0	0
	EXECUTIVE DIR.	0	Х		Х				31,731.	0.	0.
(2)	VICTORIA COLLINS PRESIDENT	$-\frac{1}{0}$	х		Х				0.	0.	0.
(3)	CHARLES C. FENWICK JR	1									
	VICE PRESIDENT	0	Х		Х				0.	0.	0.
(4)	EDWARD A. HALLE JR ESQ	1									
	SECRETARY	0	Х		Х				0.	0.	0.
(5)	CHARLES E. VIETH TREASURER	$-\frac{1}{0}$	Х		Х				0.	0.	0.
(6)	MICHAEL SONNENFELD	1	1		Λ				0.	0.	0.
_(0)_	DIRECTOR	0	Х						0.	0.	0.
(7)	JACK_FISHER	1									
	DIRECTOR	0	Х						0.	0.	0.
(8)	JACK S GRISWOLD	1							0	0	0
	DIRECTOR	0	Х				$\vdash$		0.	0.	0.
(9)	GAIL RIEPE DIRECTOR	1	х						0.	0.	0.
(10)	NANCY M ROBERTS	1									
<u> </u>	DIRECTOR	0	Х						0.	0.	0.
(11)	MICHAEL WHARTON	1									_
	DIRECTOR	0	Х						0.	0.	0.
(12)											
(13)											
(1.4)											
(14)			1								
BAA		TEEA0	107L	10/07	7/20	L					Form <b>990</b> (2020)

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Page	1

Part VII Section A. Officers, Directors, T	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	(B)			(C	•							
(A) Name and title	Average hours per	box,	unles	ss pe	erson	than is both pr/trust	n an	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from		(F) ated amo	ount
	week (list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compe the c an	of other rganizat d related anizatior	ion 1
(15)						d						
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Subtotal							•	31,731.	0.			0.
c Total from continuation sheets to Part VII, Sec d Total (add lines 1b and 1c)							•	0. 31,731.	0.			0.
2 Total number of individuals (including but not limite from the organization ► 0							ved			pensatio	n	0.
3 Did the organization list any former officer, dire	ector, truste	e, ke	y en	nplo	byee	e, or l	high	nest compensated	employee		Yes	No
<ul><li>on line 1a? If 'Yes,' complete Schedule J for su</li><li>For any individual listed on line 1a, is the sum</li></ul>	of reportab	le cor	nper	nsa	tion	and	oth	er compensation		. 3		X
the organization and related organizations grea such individual						••••				. 4		Х
5 Did any person listed on line 1a receive or accr for services rendered to the organization? If 'Ye	es,' comple	ete Sc	hedu	ule	J fo	r suc	tale th p	erson		. 5		Х
Section B. Independent Contractors 1 Complete this table for your five highest compe	nsated ind	ananc	lant	cor	ntra	otors	tha	t received more t	han \$100.000 of			
compensation from the organization. Report compe	ensation for	the ca	alend	lar y	/ear	endir	ng w	with or within the or	ganization's tax yea	r.		
(A) Name and business address								(B) Description		( Compe	<b>C)</b> ensatio	n
									<u> </u>			
2 Total number of independent contractors (including \$100,000 of compensation from the organizatio		ited to	thos	se li	istec	l abov	ve) v	who received more	than			

# Form 990 (2020) LAND PRESERVATION TRUST, INC.

# Part VIII Statement of Revenue

Page 9

		(A)	(B)	(C)	(D)
		<b>(A)</b> Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from under sectior 512-514
1 a Federated campaigns	1a				
<b>b</b> Membership dues	1 b				
<b>c</b> Fundraising events	1 c				
<b>d</b> Related organizations	1 d				
e Government grants (contributions)	1e 1,935,511.				
f All other contributions, gifts, grants, and similar amounts not included above	1f 186, 322.				
g Noncash contributions included in		4			
lines 1a-1f	1 g				
h Total. Add lines 1a-1f		2,121,833.			
20	Business Code				
2a					
b					
c					
~ Р		+ +			
f All other program service revenue		+ +			
g Total. Add lines 2a-2f		•			
3 Investment income (including divide		+ +			
other similar amounts)	וונס, ווונסודסו, מווע 	16,239.			16,23
4 Income from investment of tax-ex	empt bond proceeds	•			
5 Royalties	•••••••••••••••••••••••••••••••••••••••				
(i) Re	al (ii) Personal				
<b>6a</b> Gross rents <b>6a</b> 34,	336.				
b Less: rental expenses 6b					
	336.				
d Net rental income or (loss)		<b>3</b> 4,336.			34,33
7 a Gross amount from (i) Secur	ities (ii) Other				
sales of assets other than inventory <b>7a</b>	3,500.				
<b>b</b> Less: cost or other basis					
and sales expenses <b>7b</b>		-			
c Gain or (loss) 7c d Net gain or (loss)	3,500.				2.54
	······································	3,500.			3,50
8 a Gross income from fundraising events (not including \$					
of contributions reported on line 1c).	-				
See Part IV, line 18	<b>8a</b> 26,120.				
<b>b</b> Less: direct expenses	<b>8b</b> 532.				
<b>c</b> Net income or (loss) from fundrai		25,588.			25,58
<b>9 a</b> Gross income from gaming activities.		20/0001			
See Part IV, line 19.	9a				
<b>b</b> Less: direct expenses	9b				
c Net income or (loss) from gaming	activities	<u> </u>			
<b>10 a</b> Gross sales of inventory, less					
returns and allowances	10a				
<b>b</b> Less: cost of goods sold	10b				
c Net income or (loss) from sales o					
	Business Code				
11a INSURANCE PROCEEDS	900099	21,105.			21,10
<b>b</b> MISCELLANEOUS INCOME	900099	282.	282.		
					1
c		+			
c d All other revenue		21,387.			

	rt IX Statement of Functional Expension			and the set of the	
Sec	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a re				
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	31,731.	30,874.	564.	293.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	35,208.	34,258.	625.	325.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	4,642.	4,499.	94.	49.
10	Payroll taxes	5,191.	5,051.	92.	48.
11	Fees for services (nonemployees):				
i	a Management				
	<b>b</b> Legal				
	c Accounting	15,649.		15,649.	
	d Lobbying				
	e Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	<ul> <li>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)</li> <li>Advertising and promotion</li> </ul>	82,994.	82,641.	353.	
13	Office expenses	9,406.	766.	8,640.	
14	Information technology	- /		-,	
15	Royalties				
16	Occupancy	2,121.	2,121.		
17	Travel	,	,		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings				
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization	90,409.	87 619	1,835.	955.
22		<u> </u>	<u>87,619.</u> 2,684.	5,722.	935.
24		0,400.	2,004.	5,122.	
i	PURCHASE OF LAND EASEMENTS	1,749,622.	1,749,622.		
	COURSE AND LAND MAINTENANCE	35,912.	35,912.		
	SOCIAL MEDIA	20,319.			20,319.
	LEGACY CHASE	8,530.	8,530.		
	e All other expenses	33,707.	23,948.	9,743.	16.
25	Total functional expenses. Add lines 1 through 24e	2,133,847.	2,068,525.	43,317.	22,005.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following				
BV	SOP 98-2 (ASC 958-720)				Earm 000 (2020)

### Form 990 (2020) LAND PRESERVATION TRUST, INC.

Balance Sheet

Part X

#### Check if Schedule O contains a response or note to any line in this Part X ..... (A) Beginning of year (B) End of year Cash – non-interest-bearing. 1 1 Savings and temporary cash investments..... 2 160,924. 2 86,402 Pledges and grants receivable, net..... 3 3 5,000. Accounts receivable, net ..... 4 4 Loans and other receivables from any current or former officer, director, 5 controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B) ..... 6 7 Notes and loans receivable, net. 7 Inventories for sale or use..... 8 Assets Prepaid expenses and deferred charges..... 9 6,762. 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10 a 4,406,7<u>31</u> **b** Less: accumulated depreciation..... 10b 2,023,904. 10 c 2,415,246. 2,382,827. Investments – publicly traded securities. 226.701 11 701,026. 11 12 Investments – other securities. See Part IV, line 11..... 12 13 Investments – program-related. See Part IV, line 11..... 13 14 14 Intangible assets..... 15 Other assets. See Part IV, line 11..... 473,207 151,290. 15 3,201,556. 16 3,407,829. 16 Total assets. Add lines 1 through 15 (must equal line 33).... 17 Accounts payable and accrued expenses ..... 19,696 17 7,205 18 18 Grants payable ..... 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons ..... 22 Secured mortgages and notes payable to unrelated third parties ..... 23 23 Unsecured notes and loans payable to unrelated third parties..... 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 90,036. Total liabilities. Add lines 17 through 25. 26 19,696 26 97,241. Organizations that follow FASB ASC 958, check here ► Х Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 27 2,743,527 27 2,842,073. Net assets with donor restrictions 28 28 438,333 468,515. Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. 5 Capital stock or trust principal, or current funds..... 29 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 30 Retained earnings, endowment, accumulated income, or other funds..... 31 31 32 Total net assets or fund balances..... 32 3,310,588. 3,181,860. Total liabilities and net assets/fund balances. 3<u>,407,829</u>. 33 3,201,556. 33

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TEEA0111L 10/07/20

Form 990 (2020)

Forn	990 (2020) LAND PRESERVATION TRUST, INC. 52-1	465309		Pa	ige <b>12</b>
Pa	t 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	2,22	22,8	383.
2	Total expenses (must equal Part IX, column (A), line 25).	2	2,13		
3	Revenue less expenses. Subtract line 2 from line 1	3			)36.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	3,18		
5	Net unrealized gains (losses) on investments.	5			592.
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,				
		10	3,31	LO,5	588.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
_	in Schedule O.				
28	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
_				37	
	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:	9			
	X Separate basis Consolidated basis Both consolidated and separate basis				
	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3 8	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				
	Audit Act and OMB Circular A-133?		3a		Х
I	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3 b		
BAA	TEEA0112L 10/19/20		Form	990 (	(2020)

SCHEDULE A
(Form 990 or 990-EZ

# 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.

2020	

OMB No. 1545-0047

Open to	Public
Inspe	ction

Departn Internal	nent of the Treasury Revenue Service	► (	Go to www.irs.gov/Fo	rm990 for instructions	and the	latest i	nformation.	Inspection		
Name o	f the organization						Employer identifica	ation number		
LAN	D PRESERVAT						52-146530			
Part				organizations must				ctions.		
The o	Ĕ	•		For lines 1 through 12,		2	,			
1				hurches described in sec	•		(i).			
2				Schedule E (Form 990 or						
3				ization described in sec						
4		0	tion operated in conju	unction with a hospital of	describe	d in sec	ction 170(b)(1)(A)(iii). E	nter the hospital's		
_	name, city, a									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)								
6	A federal, sta	te, or local gov	ernment or governme	ental unit described in <b>s</b>	ection 1	<b>70(b)(</b> 1)	)(A)(v).			
7	X An organizatio	n that normally r 0(b)(1)(A)(vi).(	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pul	blic described		
8	A community	trust described	in section 170(b)(1)(	A)(vi). (Complete Part I	l.)					
9	An agricultural	research organi	zation described in sec	ction 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant colle	ege		
	or university or university:	-	nt college of agriculture	e (see instructions). Enter	the nam	ne, city,	and state of the college of	Dr		
10	from activities	s related to its e come and unre	exempt functions, sub	han 33-1/3% of its supp oject to certain exceptio e income (less section Part III.)	ns; and	(2) no r	more than 33-1/3% of it	ts support from gross		
11	An organizati	on organized a	nd operated exclusive	ely to test for public safe	ety. See	section	n 509(a)(4).			
12 a	or more publi lines 12a thro	cly supported o ough 12d that de	rganizations describe escribes the type of s	ely for the benefit of, to ed in <b>section 509(a)(1)</b> of upporting organization d, or controlled by its sup	or <b>sectio</b> and corr	n <b>509(a</b> plete li	<b>)(2).</b> See <b>section 509(a</b> nes 12e, 12f, and 12g.	)(3). Check the box in		
u	organization(s)	) the power to re t IV, Sections A	gularly appoint or elect	t a majority of the directo	rs or trus	tees of	the supporting organization	on. You must		
b	management of	pporting organiz of the supporting <b>te Part IV, Sect</b>	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organizat	having control or ion(s). <b>You</b>		
С	Type III function	onally integrated s) (see instructi	. A supporting organizat ons). <b>You must com</b>	tion operated in connectio plete Part IV, Sections	n with, ar <b>A, D, an</b>	nd functi d E.	onally integrated with, its	supported		
d	functionally in	ntegrated. The c	proanization generally	anization operated in cor must satisfy a distribu mathematics and b, and Part V.	nnection tion requ	with its s uiremen	supported organization(s) It and an attentiveness	) that is not requirement (see		
е	Check this bo	x if the organiz	ation received a writt	en determination from		that it is	s a Type I, Type II, Type	e III functionally		
				supporting organization			51 . 51 . 51			
		-	n about the supported		1					
(	i) Name of supported o	rganization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

Schedule A (Form 990 or 990-EZ) 2020	LAND	PRESERVATION	TRUST,	INC
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

### Section A. Public Support

	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	2,438,046.	804,969.	1,576,738.	1,934,612.	2,121,833.	8,876,198.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	2,438,046.	804,969.	1,576,738.	1,934,612.	2,121,833.	8,876,198.	
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)		·				0.	
6	Public support. Subtract line 5 from line 4						8,876,198.	
Sec	tion B. Total Support	-					, ,	
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	<b>(f)</b> Total	
7	Amounts from line 4	2,438,046.	804,969.	1,576,738.	1,934,612.	2,121,833.	8,876,198.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	22,512.	37,625.	34,958.	64,570.	50,575.	210,240.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on		·				0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE TART VI	18,818.	154,762.	9,945.	20,804.	47,507.	251,836.	
11	Total support. Add lines 7 through 10						9,338,274.	
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	337,418.	
13	First 5 years. If the Form 990 is organization, check this box and						►	
Sec	tion C. Computation of Pu	blic Support P	ercentage					
	Public support percentage for 20						95.05%	
15	Public support percentage from	2019 Schedule A,	Part II, line 14			15	93.59%	
16a	33-1/3% support test-2020. If t and stop here. The organization	he organization di qualifies as a pub	d not check the b licly supported o	ox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	this box   ∴ ► X	
b	<b>b</b> 33-1/3% support test-2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
17a	7a 10%-facts-and-circumstances test-2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ►							
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	meets the facts-and-circumstances' t	nd-circumstances est. The organiza	test, check this lation qualifies as	box and <b>stop here</b> a publicly support	e. Explain in Part ed organization.	VI how the	
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions ►	
BAA					Sc	hadula A (Earm 9	0 or 990-EZ) 2020	

Schedule A (Form 990 or 990-EZ) 2020

52-1465309

D. I.I.

52-1465309

### 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.)

Sec	tion A. Public Support						
	lar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include						
2	any 'unusual grants.') Gross receipts from admissions,						
2	merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade						
	or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities furnished by a						
	governmental unit to the						
	organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1,	<sup> </sup>					
78	2, and 3 received from						
	disqualified persons						
b	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13 for the year.						
с	Add lines 7a and 7b						
8	Public support. (Subtract line						
	7c from line 6.)						
	tion B. Total Support	<b>1</b>					
	dar year (or fiscal year beginning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	<b>(f)</b> Total
	Amounts from line 6						
TUa	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from						
h	similar sources Unrelated business taxable						
	income (less section 511						
	taxes) from businesses acquired after June 30, 1975.						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include						
	gain or loss from the sale of capital assets (Explain in						
	Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is	for the organization	n n's first, second.	third, fourth. or f	ifth tax year as a	section 501(c)(3)	
	organization, check this box and	stop here		·····	·····		►
	tion C. Computation of Pu		5				
	Public support percentage for 20						% 
	Public support percentage from					16	010
	tion D. Computation of Inv		3			· · · · · · · · · · · · · · · · · · ·	^
17	Investment income percentage f	-		-			00 0
18	Investment income percentage f						0/0
19a	<b>33-1/3% support tests</b> — <b>2020.</b> If t is not more than 33-1/3%, check						
h	<b>33-1/3% support tests</b> –2019. If t		• •			-	
~	line 18 is not more than 33-1/3%	, check this box a	and stop here. Th	ie organization qu	alifies as a public	ly supported organ	nization ►
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b, c	check this box and	see instructions	<u></u> ►
-							

### Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was	0		
3a	described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	2 3a		
Ł	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 <b>Part VI</b> when and how the organization	Ja		
c	made the determination. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	3b		
4a	purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use. 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.	3c 4a		
Ł	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> 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 <b>Part VI</b> what controls the organization used to ensure that	4b		
5a	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. Did the organization add, substitute, or remove any supported organizations during the tax year? If Yes,' answer lines	4c		
	5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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).			
Ł	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ</i> ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 <b>Part VI</b> .	9a		
ł	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI.</b>	9b		
C	: Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If 'Yes,' provide detail in <b>Part VI.</b></i>	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If 'Yes,'</i> answer line 10b below.	10a		
t	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.).	10b		

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Pa	rt iv Supporting Organizations (continued)	-	
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
	a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below,		
	the governing body of a supported organization? 11a		
	<b>b</b> A family member of a person described in line 11a above? 11b		
	c A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI. 11c		

### Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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.
- 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.*

### Section 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

### Section D. All Type III Supporting Organizations

		Yes	110
1 Did the organization provide to each of its supported organizations, by the la organization's tax year, (i) a written notice describing the type and amount or year, (ii) a copy of the Form 990 that was most recently filed as of the date of t	of support provided during the prior tax		
organization's governing documents in effect on the date of notification, to the			
2 Were any of the organization's officers, directors, or trustees either (i) appoint organization(s) or (ii) serving on the governing body of a supported organization	nted or elected by the supported tion? If 'No.' explain in <b>Part VI</b> how		
the organization maintained a close and continuous working relationship with	h the supported organization(s).		
By reason of the relationship described in line 2, above, did the organization's sup voice in the organization's investment policies and in directing the use of the all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's investment policies and in directing the use of the all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's investment policies and in directing the use of the all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's investment policies and in directing the use of the all times during the tax year?	organization's income or assets at		
in this regard.	3		

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

### 2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in **Part VI**.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

Yes

2a

2b

3a

3h

No

Yes

1

2

No

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Schedule A	(Form 990 or 990-EZ) 2020	LAND	PRESERVATION	TRUST,	INC.
Part V	Type III Non-Functiona	ally Inte	egrated 509(a)(3)	Supporti	ng Organizations

Page	6

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gro income or for management, conservation, or maintenance of property held for production of income (see instructions)	oss <b>6</b>		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for sl tax year or assets held for part of year):	hort		
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> 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-functionally	integrated	Type III supporting or	anization

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

BAA

Schedule A (Form 990 or 990-EZ) 2020

		apporting Organiza		u)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of	of supported organization	S,		
	in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati	on is responsive (provide	details		
	in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			-	
10	Line 8 amount divided by line 9 amount	1	1	10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			_	
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – <i>explain in Part VI</i> ). See instructions.				
3	Excess distributions carryover, if any, to 2020				
	Prom 2015				
k	P From 2016				
C	From 2017				
	From 2018				
e	e From 2019				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ŀ	Applied to 2020 distributable amount				
	i Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
	Excess from 2017				
C	Excess from 2018				
C	Excess from 2019				
e	Excess from 2020				

BAA

Schedule A (Form 990 or 990-EZ) 2020

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

## PART II, LINE 10 - OTHER INCOME

Part VI

NATURE AND SOURCE	2020	2019	2018	2017	2016
OTHER \$ FUNDRAISING GROSS RECEIPTS	282. \$	7,474.\$	345.	\$ 5,648. \$	\$ 11,897.
	26,120.	13,330.	9,600.	149,114.	6,921.
INSURANCE PROCEEDS	21,105.				
TOTAL <u>\$</u>	47,507. \$	20,804.\$	9,945.	\$ 154,762.	\$ 18,818.

Schedule E
------------

	99 <b>0-EZ</b> ,

0.		•••	,		
De	partm	ent	of	the	Т

reasury Internal Revenue Service

## PUBLIC DISCLOSURE COPY Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. 2020

Name of the organization		Employer identification number			
LAND PRESERVATION T	LAND PRESERVATION TRUST, INC.				
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	on			
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				

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

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

### General Rule

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

### Special Rules

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address). II. and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)	1 1	Page <b>2</b>
Name of organization	Employer identification number	
LAND PRESERVATION TRUST, INC.	52-1465309	
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$1,847,753.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$63,998.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person       Payroll       Noncash       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person       Payroll       Noncash       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	  	\$	Person       Payroll       Noncash       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)	1	1	Page <b>3</b>
Name of organization	Employer ident	ification nur	nber
LAND PRESERVATION TRUST, INC.	52-1465	309	

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

	ncash Property (see instructions). Use duplicate copies of Part II if add	-	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
N/A	<u> </u>		
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 s	
		<sup>v</sup>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 s	
		 Schedule B (Form 990, 990-E	

	3 (Form 990, 990-EZ, or 990-PF) (2020)		1 1 Page <b>4</b>
Name of organ			Employer identification number $52 - 1465309$
	or (10) that total more than \$1,000 for t the following line entry. For organizations c	he year from any one contributor ompleting Part III, enter the total of (Enter this information once. See in	tions described in section 501(c)(7), (8), r. Complete columns (a) through (e) and
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Farti	<u>N/A</u>		
		(e) Transfer of gift	I
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	 		 
		(e) Transfer of gift	<u>+</u>
	Transferee's name, addres		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			+
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
BAA			Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

SCHE	EDL	JLE	- (	2
(Form	99 <b>0</b>	or	99	0-EZ)

# **Political Campaign and Lobbying Activities**

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

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

OMB No. 1545-0047

_					
		on Form 990, Part IV, line 3, or Form 990-EZ,		l Campaign Activities), tl	nen
		is: Complete Parts I-A and B. Do not complete		Do not complete Port I	D
	Section 501(c) (other than sec Section 527 organizations: Co	tion 501(c)(3)) organizations: Complete Pa molete Part I-A only.	ans I-A and C below.	Do not complete Part I-	·D.
	-	on Form 990, Part IV, line 4, or Form 990-EZ,	Part VI. line 47 (Lobbvi	na Activities). then	
		that have filed Form 5768 (election under sect			e Part II-B.
• :	Section 501(c)(3) organization	is that have NOT filed Form 5768 (election			
lf th	Part II-A. e organization answered 'Yes xy Tax) (See separate instruc	;,' on Form 990, Part IV, line 5 (Proxy Tax) tions). then	(See separate instruc	ctions) or Form 990-EZ,	Part V, line 35c
•		organizations: Complete Part III.			
Name	e of organization			Employer identification	ation number
LA	ND PRESERVATION TRU	IST, INC.		52-146530	9
Pa	-	rganization is exempt under secti	• •		zation.
1		organization's direct and indirect political on of 'political campaign activities')	campaign activities in	Part IV.	
2	Political campaign activity e	xpenditures (See instructions)		▶\$	
3	Volunteer hours for political	campaign activities (See instructions)			
Pa	rt I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	▶\$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
1		·····			
	<b>b</b> If 'Yes,' describe in Part IV.				
		rganization is exempt under section	on 501(c) excen	t section 501(c)(3)	
1	-	pended by the filing organization for section	• • • •		
2	Enter the amount of the filin	g organization's funds contributed to other	organizations for sec	tion	
	·	2S		▶\$	
3		ditures. Add lines 1 and 2. Enter here and		►\$	
4	Did the filing organization fil	e Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the a ns received that were promptly and directly de al action committee (PAC). If additional spa	mount paid from the livered to a separate po	filing organization's fun- plitical organization, such	ds. Also enter the as a separate
	<b>(a)</b> Name	(b) Address	<b>(c)</b> EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
BAA	For Paperwork Reduction Act	Notice, see the Instructions for Form 990 or	990-EZ.	Schedule C (Fo	rm 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020 LAND PRESE	RVATION TRUST, INC.	52-1465	309 Page <b>2</b>
Part II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► if the filing organization belo	ngs to an affiliated group (and list in Part IV each affilia	ted group member's name	2,
address, EIN, expenses, a	nd share of excess lobbying expenditures).		
B Check ► if the filing organization ch	necked box A and 'limited control' provisions apply.		
Limits on Lob (The term 'expenditures' m	bying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence	public opinion (grassroots lobbying)		
<b>b</b> Total lobbying expenditures to influence a	a legislative body (direct lobbying)		
<b>c</b> Total lobbying expenditures (add lines 1a	and 1b)		
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add	lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the a both columns.	mount from the following table in		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25	% of line 1f)		
h Subtract line 1g from line 1a. If zero or le	ess, enter -0		
i Subtract line 1f from line 1c. If zero or le	ss, enter -0		
i If there is an amount other than zero on eith	er line 1h or line 1i, did the organization file Form 4720 r		Yes No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> Total
<b>2 a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

BAA

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020 LAND	PRESERVATION TRUST,	INC.
-------------------------------------------	---------------------	------

### 52-1465309 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)	
		No	Am	ount	
<ul> <li>SEE PART IV</li> <li>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:</li> </ul>					
a Volunteers?	Х				
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х				
c Media advertisements?		Х			
d Mailings to members, legislators, or the public?		Х			
e Publications, or published or broadcast statements?		Х			
f Grants to other organizations for lobbying purposes?		Х			
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Х				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i Other activities?		Х			
j Total. Add lines 1c through 1i					0.
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х			
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	orior y	ear?	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection 5	01(c)	

# (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
	a Current year	2a	
	<b>b</b> Carryover from last year	2 b	
	c Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (See instructions)	5	
Pa	rt IV Supplemental Information		

### Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

# PART II-B - DESCRIPTION OF LOBBYING ACTIVITY

LOBBYING ACTIVITIES FOR THE YEAR WERE MINIMAL IN NATURE AND PERFORMED MAINLY BY

VOLUNTEERS. LOBBYING ACTIVITIES ARE AN EFFORT TO GET THE STATE OF MARYLAND AND

BALTIMORE COUNTY TO APPROVE FUNDING FOR LAND PRESERVATION.

Page 3

#### OMB No 1545-0047 Supplemental Financial Statements SCHEDULE D ► 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. (Form 990) 20 Attach to Form 990. **Open to Public** Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number LAND PRESERVATION TRUST, INC. 52-1465309 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). . . . . . 2 3 Aggregate value of grants from (during year)..... Aggregate value at end of year ..... 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring 6 No impermissible private benefit?..... Yes Part II **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). X Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Х Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a gualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2a 349 **b** Total acreage restricted by conservation easements..... 2 b 13,196 c Number of conservation easements on a certified historic structure included in (a)..... 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► 4 Number of states where property subject to conservation easement is located > 1 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?....SEE PART XIII 5 X Yes No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 60 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ►\$ 4,675. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and 9 include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. SEE PART XIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. **b** If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art

2 \ \	A For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEEA3301L 08/18/20	Schedule D (Form 990) 2020
I	<b>b</b> Assets included in Form 990, Part X	►\$
i	a Revenue included on Form 990, Part VIII, line 1	►\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro amounts required to be reported under FASB ASC 958 relating to these items:	vide the following
	(ii) Assets included in Form 990, Part X	
	(i) Revenue included on Form 990, Part VIII, line 1	►\$
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public following amounts relating to these items:	lic service, provide the

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

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 LAND Part III Organizations Mainta			l Treasures, or O	52-1465 ther Similar Asse		Page 2 Ied)
3 Using the organization's acquisition	, accession, and other	records, check any of	the following that make	e significant use of its o	ollection	
items (check all that apply): <b>a</b> Public exhibition		<b>d</b> Loan or exe	change program			
<b>b</b> Scholarly research		e Other	shange program			
c Preservation for future gener	ations	- <u> </u>				
4 Provide a description of the organiz Part XIII.	ation's collections and	explain how they furth	er the organization's e	xempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather the solution of the solut	tion solicit or receive	donations of art, his	torical treasures, or o	ther similar assets	Yes	
Part IV Escrow and Custodia						<u>No</u>
line 9, or reported an	amount on Form	990, Part X, line	21.		ini 550, i ai	ιιν,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodian or oth	er intermediary for co	ontributions or other a	assets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement						
				ļ A	Amount	
<b>c</b> Beginning balance				1 c		
<b>d</b> Additions during the year						
e Distributions during the year						
f Ending balance				1f		
2 a Did the organization include an a						No
<b>b</b> If 'Yes,' explain the arrangement	In Part XIII. Check h	ere if the explanation	i has been provided o	on Part XIII	· · · · · · · · · · · · ·	
Part V Endowment Funds. C	omplete if the or	nanization answe	red 'Yes' on Form	990 Part IV lin	o 10	
Lindownient i unds.	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
<b>1 a</b> Beginning of year balance	50,000.		50,000.	50,000.		000.
<b>b</b> Contributions					00,	
c Net investment earnings, gains, and losses						
<b>d</b> Grants or scholarships						
e Other expenditures for facilities and programs				0.		
f Administrative expenses						
<b>g</b> End of year balance	,				50,	.000
2 Provide the estimated percentag	e of the current year	end balance (line 1g,	column (a)) held as:			
<b>a</b> Board designated or quasi-endowm		010				
<b>b</b> Permanent endowment	100.00 <sup>%</sup>					
c Term endowment	010					
The percentages on lines 2a, 2b, a	nd 2c should equal 100	)%.				
3 a Are there endowment funds not in t	he possession of the c	rganization that are he	ld and administered for	r the	<b></b>	<u> </u>
organization by:					Yes	No
(i) Unrelated organizations					3a(i)	X
(ii) Related organizations					3a(ii)	Х
<ul><li>b If 'Yes' on line 3a(ii), are the relation</li><li>4 Describe in Part XIII the intended</li></ul>	-				3b	
Part VI Land, Buildings, and			HUS. SEE PARI	XIII		
Complete if the organi		'Ves' on Form 90	0 Part IV line 1	12 See Form 990	) Part X li	no 10
				1		
Description of property	(in	t or other basis (b vestment)	) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	
<b>1 a</b> Land.			2,140,564.	E 0 7	2,140	
<b>b</b> Buildings			71,690.	597.		<u>,093.</u>
<b>c</b> Leasehold improvements <b>d</b> Equipment			2,130,956.	1,965,167.	165	<u>,789.</u>
<b>e</b> Other			C2 E21	E0 140		201
Total. Add lines 1a through 1e. (Colum		m 990 Part Y colum	63,521.	<u>58,140.</u>		<u>,381.</u>
BAA	in (u) must equal FOI	нт 330, F art A, COIUIT	ווו <i>(ט), וווו דוונג), ווו</i> ינג, וווי		2 , 382 le D (Form 990	

Schedule D	(Form 990) 2020	LAND	PRESERVATION	TRUST, INC.		52-1465309	Page 3
	Investments -	- Other	Securities.		N/A		
					0, Part IV, line 11b. S		
	ption of security or cate			(b) Book value	(c) Method of valuatio	on: Cost or end-of-year market v	/alue
• •							
(2) Closely (3) Other	neid equity interes	SIS					
(A)							
( <del>A)</del> (B)							
(C)							
<u>(</u> D)							
(E)							
(F)							
(G)							
(H)							
( )							
			column (B) line 12.) 🕨		b7 / 7		
Part VIII	Investments –	- <b>Progr</b> a e organ	am Related. ization answered	'Yes' on Form 99	N/A 0, Part IV, line 11c. S	ee Form 990, Part )	K. line 13.
	(a) Description of			(b) Book value		Cost or end-of-year mai	
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9) (10)							
<b>、</b> /	n (b) must equal Form 9	990. Part X.	column (B) line 13.) ►				
Part IX	Other Assets.			N/A			
	Complete if the	e organ		Yes' on Form 990	0, Part IV, line 11d. S	ee Form 990, Part > (b) Boo	
(1)				scription		(b) 600	k value
(2)							
(3)							
(4)							
(5)							
(6) (7)							
(8)							
(9)							
(10)							
Total. (Coll			90, Part X, column (l	3) line 15.)		►	
Part X	Other Liabilitie	es.		and 000 David IV line 1	1	ant V Line OF	
1.	Complete if the or	ganization		orm 990, Part IV, line I iption of liability	1e or 11f. See Form 990, Pa	art X, line 25. (b) Book	
	al income taxes						( value
	JNDABLE ADVA	NCE -	OTHER				72,201.
(3) REFU	JNDABLE ADVA						17,835.
(4)							
(5)							
(6)							
(7) (8)							<u> </u>
(9)						<u> </u>	<u> </u>
(10)							
(11)							
							90,036.
2. Liability for	uncertain tax positions.	. In Part XII	, provide the text of the fo	otnote to the organization's fi	nancial statements that reports th	e organization's liability for uno	certain

tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2020 LAND PRESERVATION TRUST, INC. 52	2-1465309	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1 2,	263,107.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
c Recoveries of prior year grants       2c         d Other (Describe in Part XIII)       SEE PART XIII         2d       532.	.1	
e Add lines 2a through 2d.	2 e	40,224.
3 Subtract line 2e from line 1.	<b>3</b> 2,	222,883.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	,	,
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)	-	
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 2,	222,883.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		,
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1 2,	134,379.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	,	, ,
a Donated services and use of facilities 2a		
b Prior year adjustments	-	
c Other losses	-	
d Other (Describe in Part XIII.) SEE PART XIII 2d 532.	-	
e Add lines <b>2a</b> through <b>2d</b> .	2e	532.
3 Subtract line 2e from line 1.		133,847.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	27	100,01/.
a Investment expenses not included on Form 990, Part VIII, line 7b. 4a		
b Other (Describe in Part XIII.)	1	
c Add lines 4a and 4b.	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 2,	133,847.
Part XIII Supplemental Information.		

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

### **PART II, LINE 5 - SUMMARIZED POLICY**

SCHEDULE D, PART II, LINE 9

### **PART II, LINE 9 - ORGANIZATION REPORTING OF CONSERVATION EASEMENTS**

THE TRUST IS A SPONSOR OF THE MARYLAND RURAL LEGACY PROGRAM THE PROGRAM, WHICH WAS

ESTABLISHED TO PROTECT AREAS RICH IN AGRICULTURAL, FORESTRY, NATURAL AND CULTURAL

RESOURCES. AS A SPONSOR OF THIS PROGRAM, THE TRUST PURCHASES EASEMENTS FROM THIRD

PARTIES WITH GRANTS FROM THE PROGRAM. THE ESCROW FUND CONSISTS PRIMARILY OF CASH AND

### THE INTEREST ON THE PRINCIPAL BALANCE. THE PRINCIPAL BALANCE RELATES TO THE PORTION BAA Schedule D (Form 990) 2020

### PART II, LINE 9 - ORGANIZATION REPORTING OF CONSERVATION EASEMENTS (CONTINUED)

OF SUCH GRANTS THAT IS RESTRICTED TO BE USED BY THE TRUST FOR THE EXPENSES RELATED TO THE TRUSTS FUTURE MONITORING ACTIVITIES RELATED TO THE EASEMENTS HELD BY THE TRUST. THE INTEREST IS UNRESTRICTED AND WILL BE USED BY THE TRUST TO PAY THE MONITORING COSTS INCURRED BY THE TRUST. THE TRUST ALSO RECEIVES FUNDS TO BE USED FOR GENERAL ADMINISTRATIVE PURPOSES. THE TRUST RECORDS THESE FUNDS IN THE YEAR OF RECEIPT AS CONTRIBUTIONS WITHOUT DONOR RESTRICTIONS. THE TRUST RECEIVED \$24,446 AND \$23,594 IN FISCAL YEARS 2020 AND 2019, RESPECTIVELY, FOR SUCH ADMINISTRATIVE PURPOSES. THE TRUST ALLOCATED \$182 (\$1 PER ACRE) AND \$437 IN FISCAL YEARS ENDED DECEMBER 31, 2020 AND 2019, RESPECTIVELY, TO THE VALUE OF THE EASEMENTS OBTAINED.

### PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

IN 2009, THE LAND PRESERVATION TRUST RECEIVED A \$100,000 GIFT. OF THE AMOUNT RECEIVED \$50,000 WAS TO BE USED FOR FUTURE LAND IMPROVEMENTS AT SHAWAN DOWNS, AND \$50,000 WAS USED TO ESTABLISH A PERMANENT ENDOWMENT.

### PART X - FASB ASC 740 FOOTNOTE

THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT GUIDANCE, THE TRUST MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON THE TECHNICAL MERITS OF THE POSITIONS. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019. THE TRUST FILES FEDERAL AND STATE INFORMATION RETURNS. THE TRUSTS FEDERAL FORM 990S REMAIN OPEN FOR THREE YEARS FOR FEDERAL AND STATE EXAMINATION.

# SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

SPECIAL EVENT DIRECT EXPENSES	\$ \$	<u>532.</u> 532.
SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S		
SPECIAL EVENT DIRECT EXPENSES	\$ \$	<u>532.</u> 532.

	Suppleme	ental Informa	ition Reg	jarding F	undraising or Gami	ng Activ	vities	OMB No. 1545	-0047
SCHEDULE G (Form 990 or 990-EZ)	Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.						if the	202	0
Department of the Treasury	<ul> <li>Attach to Form 990 or Form 990-EZ.</li> <li>Go to www.irs.gov/Form990 for instructions and the latest information.</li> </ul>						tion	Open to Pu Inspection	blic
Internal Revenue Service Name of the organization							Employer identific	•	
LAND PRESERVAT	LAND PRESERVATION TRUST, INC. 52-1465							9	
<b>Part I</b> Fundraising	Activities. Comple <sup>:</sup> Z filers are not re	te if the organiza	ation answe lete this p	ered 'Yes' o art.	on Form 990, Part IV, line	e 17.			
					owing activities. Check	all that a	apply.		
a 🗌 Mail solicitatio				е		-	•		
	email solicitations	5		f	Solicitation of gove		grants		
c Phone solicita				g	Special fundraising	g events			
<b>d</b> In-person soli		r oral agroomon	t with any i	ndividual (i	ncluding officers, director	re tructor	or kov		
employees listed	in Form 990, Par	t VII) or entity	in connect	tion with p	rofessional fundraising	services	?	Yes	X No
<b>b</b> If 'Yes,' list the 10 compensated at I	0 highest paid inc east \$5,000 by th	dividuals or entine organization.	ties (fund	raisers) pu	irsuant to agreements i	under wh	ich the fundrai	iser is to be	
(i) Name and addres or entity (fund	s of individual raiser)	(ii) Activity	(iii) Did have custo of contr	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or re fundra	ount paid to etained by) iser listed in Jumn <b>(i)</b>	(vi) Amount p (or retained organizati	by)
			Yes	No				_	
1									
2									
3									
4									
4									
5									
6									
7									
8									
9									
10									
Total				►					0.
3 List all states in wh					ontributions or has been	notified it	is exempt from	n registration	
or licensing.									

Schedule G (Form 990 or 990-EZ) 2020	LAND	PRESERVATION	TRUST,	INC.
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52-1465309 Page **2** 

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

		List events with gross receipts gre	• •			(d) Total avanta
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add column (a)
			SCHOOLING SESS (event type)	(event type)	(total number)	through column <b>(c)</b> )
Jue			(event type)	(event type)	(total humber)	
Revenue	1	Gross receipts	26,120.			26,120.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	26,120.			26,120.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Expe	7	Food and beverages	532.			532.
lirect	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 thr	ouah 9 in column (d)		•	532.
	11	Net income summary. Subtract line 10 fro				
Par		Gaming. Complete if the organiza				/
i ui		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes <sup>%</sup> No	Yes <sup>%</sup> No	Yes%	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)			
	_	Net coming income survey out to the				
	8	Net gaming income summary. Subtract li	ne / from line I, colum	III (0)	••••••	
	<b>i</b> Is th	er the state(s) in which the organization contended on the organization licensed to conduct gaming lo,' explain:	activities in each of th			
		e any of the organization's gaming license 'es,' explain:				

Schedule G (Form 990 or 990-EZ) 2020

Schedule G (Form 990 or 990-EZ) 2020 LAND PRESERVATION TRUST, INC.	52-1465309	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		No
13 Indicate the percentage of gaming activity conducted in:	1 1	
a The organization's facility	. 13a	010
<b>b</b> An outside facility		90
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds:	
Name ►		
Address ►		
<ul> <li>15 a Does the organization have a contract with a third party from whom the organization receives gaming rever</li> <li>b If 'Yes,' enter the amount of gaming revenue received by the organization </li> <li>\$ and of gaming revenue retained by the third party </li> <li>\$ \$</li> <li>c If 'Yes,' enter name and address of the third party:</li> </ul>	nue? <b>Yes</b> the amount	No
Name ►		
Address ►		; 
16 Gaming manager information:		
Name ►		
Gaming manager compensation ► \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes	No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	n the	
organization's own exempt activities during the tax year > \$		
<b>Part IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, co and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an information. See instructions.	ny additional	v);

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

OMB No. 1545-0047
2020
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

### LAND PRESERVATION TRUST, INC

Employer identification number 52-1465309

# FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE LAND PRESERVATION TRUST, INC. ASSISTS BALTIMORE COUNTY LANDOWNERS IN PROTECTING THEIR LAND FOR FUTURE GENERATIONS BY FACILITATING VOLUNTARY CONSERVATION AND AGRICULTURAL EASEMENTS. THE TRUST DEMONSTRATES ITS COMMITMENT TO THE STEWARDSHIP OF THE LAND AT SHAWAN DOWNS A FIRST-CLASS EQUESTRIAN CENTER AND STEEPLECHASE COURSE OWNED AND OPERATED BY THE TRUST.

### FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

ONE OF THE TRUSTEES, EDWARD A. HALLE, IS AN ATTORNEY AND HAS FROM TIME TO TIME REPRESENTED SOME OF THE OTHER TRUSTEES IN VARIOUS TRANSACTIONS.

### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

COMPANY PERSONNEL AND THE EXTERNAL AUDITORS WORK CLOSELY WITH THE OUTSIDE ACCOUNTING FIRM LPT HAS ENGAGED TO PREPARE THE FORM 990. PRIOR TO THE FILING OF FORM 990, IT IS PROVIDED TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW. ONCE THE BOARD OF DIRECTORS REVIEWS THE COMPLETED FORM 990, LPT FILES THE FORM 990 WITH THE INTERNAL REVENUE SERVICE.

### FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE MEMBERS OF THE BOARD OF DIRECTORS OF THE LAND PRESERVATION TRUST TAKE SERIOUSLY THEIR DUTY TO DISCLOSE POTENTIAL CONFLICT OF INTERESTS AND THEIR ROLES IN DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS. ACTIONS OF THE ORGANIZATION ARE REGULARLY REVIEWED TO DETERMINE IF THERE IS A POTENTIAL CONFLICT OF INTEREST. WHEN REQUIRED, PROFESSIONAL ADVISORS HAVE BEEN HIRED TO AVOID POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT THE BOARD, COMPRISED SOLELY OF INDEPENDENT NON-PAID DIRECTORS, NONE OF WHICH HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT, IS ACCOUNTABLE

Schedule O (Form 990 or 990-EZ) (2020)				
Name of the organization	Employer identification number			
LAND PRESERVATION TRUST, INC.	52-1465309			

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT (CON DEVELOPS, CONSISTENT WITH THE ORGANIZATION'S PHILOSOPHY AND PRINCIPLES, THE ANNUAL PERFORMANCE GOALS AND CRITERIA TO BE USED IN DETERMINING MERIT INCREASES AND VARIABLE COMPENSATION CRITERIA FOR THE EMPLOYEES OF LPT. APPROPRIATE COMPARABILITY DATA IS OBTAINED FROM THE INDEPENDENT EXPERTS, I.E., TOTAL ECONOMIC BENEFITS PAID BY SIMILARLY SITUATED ORGANIZATIONS BOTH TAXABLE AND TAX-EXEMPT FOR SIMILAR JOB RESPONSIBILITIES. THE BOARD OF DIRECTOR'S WRITTEN RECORDS INCLUDE THE 1 TERMS OF THE ARRANGEMENT WITH THE EMPLOYEE INCLUDING THE DATE THE ARRANGEMENT WAS APPROVED 2 A LIST OF MEMBERS PRESENT DURING THE DEBATE ON THE TRANSACTION AND HOW THE MEMBERS VOTED WHEN IT WAS APPROVED AND 3 A DESCRIPTION OF THE COMPARABLE DATA RELIED ON BY THE BOARD OF DIRECTORS. KEY DELIBERATIONS OF THE BOARD OF DIRECTORS ARE ALSO DOCUMENTED IN MINUTES WHICH ARE APPROVED AT THE NEXT BOARD OF DIRECTORS MEETING. THE ORGANIZATION DOESN'T HAVE A PAID EXECUTIVE DIRECTOR OR OTHER OFFICER.

### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

WHILE FEDERAL TAX LAWS DO NOT MANDATE THAT THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS BE MADE AVAILABLE FOR PUBLIC INSPECTION, THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. A PUBLIC INSPECTION COPY OF FORM 990 IS ALSO AVAILABLE UPON REQUEST AT THE ORGANIZATION'S OFFICE.