990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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

2023

Department of the Treasury Internal Revenue Service Open to Public Inspection

_		OOO		01/01/2023	and er			2000		pecui	
<u>A</u>	For the 2	023 calend	dar year, or tax year beginning	2023							
В	Check if ap	oplicable:	C Name of organization SOUTHB	OROUGH OPEN LAN	D FOUNDATIO	ON INC		D Emple	oyer identific		umber
	Address cl	nange	Doing business as						22-3002	718	
	Name char	nge	Number and street (or P.O. box if	mail is not delivered to st	reet address)	Rooi	m/suite	E Teleph	none number		
	Initial retur	n	PO Box 345						774-230-	0382	
	Final return	/terminated	City or town, state or province, co	ountry, and ZIP or foreign	postal code						
	Amended	return	Southborough, MA 01772					G Gross	receipts \$		40,121
	Application	n pending	F Name and address of principal off	icer: Larry Samberg			H(a) Is this a gro	oup return fo	or subordinates?	Yes	No 🔽 No
			7 Granuaile Road, Southboro	ugh, MA 01772			H(b) Are all su	ubordinat	es included?	Yes	; 🗌 No
I	Tax-exemp	ot status:	✓ 501(c)(3)) (insert no.)] 4947(a)(1) or [527	If "No," attach	ach a list. See instructions.			
J	Website:	www.solf	f.org				H(c) Group ex	xemption	number		
K	Form of org	ganization: 🔽	Corporation Trust Associa	tion Other	L Year	r of formatio	n: 1988	M State	of legal dom	icile:	MA
P	art l	Summai	ry		•						
	1 E	Briefly des	cribe the organization's miss	ion or most significa	nt activities:	Preservat	ion and Mair	ntenanc	e of Open S	Space	in
ě			ugh Massachusetts for ecolog								
Activities & Governance											
ern	2	heck this	box if the organization d	iscontinued its opera	ations or disp	osed of n	nore than 25	% of it	s net asse	ts.	
ò			voting members of the gove	•	-			3			8
જ			independent voting member					4			8
es			per of individuals employed in					5			0
ξ			per of volunteers (estimate if	-		,		6			12
₹			ated business revenue from I					7a			0
•			ted business taxable income					7b			0
	D I	iei uillelai	ed business taxable income	110111 F01111 990-1, F	arri, iirie i i	· · ·	Prior Year		Curr	ent Yea	
		`ontributio	and grants (Part VIII line			Cuit	ent rea				
Revenue			ons and grants (Part VIII, line ervice revenue (Part VIII, line		25,328			30,038			
/en		-		0							
Вè			t income (Part VIII, column (A	·		–		4,755			10,083
			nue (Part VIII, column (A), line		-	·		0			0
			ue—add lines 8 through 11 (n	· · · · · · · · · · · · · · · · · · ·				30,083			40,121
			d similar amounts paid (Part I		•			1,600			1,100
		-	aid to or for members (Part IX					0			0
es			, other compensation, employee benefits (Part IX, column (A), lines 5-10)					1,212			1,230
Expenses			onal fundraising fees (Part IX, column (A), line 11e)					0			0
ă	b T	otal fundr	raising expenses (Part IX, col	umn (D), line 25)	3	3,173					
Ш	17 C	Other expe	enses (Part IX, column (A), line	es 11a–11d, 11f–24e	e)			30,382			23,003
			nses. Add lines 13-17 (must					33,194			25,333
	19 F	Revenue le	ess expenses. Subtract line 1	8 from line 12				-3,111			14,788
or						Ве	ginning of Curr	ent Year	End	of Year	
sets	20 T	otal asset	ts (Part X, line 16)				2,0	23,462		2,0	047,672
t As	21 T	otal liabili	ties (Part X, line 26)					1,030			110
Net Assets or Fund Balances	22 N	let assets	or fund balances. Subtract li	ine 21 from line 20			2,0	22,432		2,0	047,562
	art II	Signatu	re Block								
			, I declare that I have examined this i						my knowledg	e and b	elief, it is
tru	e, correct, a	and complete	e. Declaration of preparer (other than	officer) is based on all inf	ormation of which	h preparer h	as any knowled	lge.			
Si	gn	Signature	of officer				Dat	е			
He	Here Larry Samberg, Treasurer										
			rint name and title								
_	• -1	Print/Type	preparer's name	Preparer's signature		Date		Check	if PTIN		
Pa								self-emp	─ "		
	eparer	Firm's nan	ne				Firm's	FIN			
Us	e Only	Firm's add					Phone				
Ma	v the IRS		this return with the preparer s	shown above? See i	nstructions		FIIOTE	. 110.		Yes	No
. v 10	,	, a.oouoo l	and retain with the proparer a	5.15 WIT ADOVE: 066 II					• 🗀		

Cat. No. 11282Y

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	The corporation is formed and shall be operated tor the exclusively charitable, scientific and educational purposes of promoting
	the wise use of land in the Town of Southborough, Massachusetts, specifically by the acquisition by gift or purchase of real
	property and interests in real property in Southborough and the preservation of the same and any other real property in
	(Continued on Schedule O, Statement 1)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	σ το
4a	(Code:) (Expenses \$ 7,450 including grants of \$) (Revenue \$ 0)
	Art on the Trails Project. Artistic installations located on Beals Preserve property from June to September which included a juried
	show of regional artists
4b	(Code:) (Expenses \$1,096 including grants of \$0) (Revenue \$0
	Improvements and maintenance of Bigelow Wildlife Refuge including plantings for entrance and crushed stone for path.
4c	(Code:) (Expenses \$
	Pasture mowing of Barber Pasture property.
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 2
	(Expenses \$ 3,172 including grants of \$ 1,100) (Revenue \$ 0)
4e	Total program service expenses 12,218

Part	90 (2023) Checklist of Required Schedules
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If complete Schedule A

			V	NI.
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	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		,
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? If "Yes," complete Schedule D, Part I	6		V
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		_
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
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	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a		~
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		~
J	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		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20 b		
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		~

Part	V Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		٧
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		/
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			_
06	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		/
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		>
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b		~
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV			\ \ \
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	28c 29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
-	conservation contributions? If "Yes," complete Schedule M	30		/
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- JE		_
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		/
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		/
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	\ \	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		<i>-</i>
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		•
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7e 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u>		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
b 11	Section 501(c)(12) organizations. Enter:	-		
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources	-		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
46	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
• •	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 8 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 8 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b ~ Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ☐ Upon request Other (explain on Schedule O) Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Larry Samberg, (774)230-0382

Part VI

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

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					C)					
(A)	(B)	Position						(D)	(E)	(F)
Name and title	Average				eck more than one sperson is both			Reportable	Reportable	Estimated amount
	hours					or/trus		compensation	compensation	of other
	per week (list any	악	Ins	♀	6	en 프	Fo	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	livid	l ti	Officer	y er	ploy	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	Individual trustee or director	ion		Key employee	t co	~	1099-NEC)	1099-NEC)	related organizations
	below	trus	l tr		yee	mpe				
	dotted line)	lee	Institutional trustee			Highest compensated employee				
			Ф			ted				
Destin Heilman	3.00									
President / Trustee	0.00	~		~				0	0	0
Eileen Samberg	10.00									
Clerk	0.00	~		~				0	0	0
Larry Samberg	10.00	1								
Treasurer	0.00	~		~				0	0	0
Lawrence Spezzano	10.00	1								
Vice President	0.00	~		~				0	0	0
Sally Watters	5.00	1								
Trustee	0.00	~						0	0	0
Ralph Ellis	2.00	1								
Trustee	0.00	~						0	0	0
Deborah Costine	5.00	1								
Trustee	0.00	~						0	0	0
Brett Peters	5.00	1								
Trustee	0.00	~						0	0	0
		1								
]								
]								
]								
]								

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated Em	ployees (co	ontinued)
					(6	C)						
	(A) Name and title	Average hours (do not check more than on box, unless person is both a officer and a director/truster		th an Reportable Reportable compensation comp		(E) Reportable compensation from related	Estimate of o	ed amount other				
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (1099-MISC 1099-NEC	W-2/ fror / organiz	ensation n the ation and ganizations
			-									
			-									
			-									
			-									
			-									
			-									
1b	Subtotal								0		0	0
d	Total (add lines 1b and 1c) Total number of individuals (including reportable compensation from the organic	but not		ed 1	to 1	thos	e lis	ted	above) who re	eceived mo	o re than \$10	0 00,000 of
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete or the line of the </i>										ated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th									such	
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co										V
Secti	on B. Independent Contractors											
1	Complete this table for your five high compensation from the organization. Rep											
	(A) Name and business add	Iress							(B) Description of serv	vices	(C) Compensa	tion
None												
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abov	re) who		

Page 8

David V/III	Statement of Revenue
2614 AVAIL	Statement of Revenue

		Check if Schedule O contains a response	or note to an	y line in this Pa	rt VIII....		\square
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b	28,435				
عَ ق	С	Fundraising events 1c	346				
fts,	d	Related organizations 1d	0				
<u>i</u> g i <u>E</u>	е	Government grants (contributions) 1e	0				
ns,	f	All other contributions, gifts, grants,					
iti e		and similar amounts not included above 1f	1,257				
호 된	g	Noncash contributions included in					
ig g		lines 1a-1f 1g \$	0				
<u>a</u> Ω	h	Total. Add lines 1a-1f		30,038			
_		В	Business Code				
Program Service Revenue	2a						
Pe ⊆	b						
gram Ser Revenue	С						
ev	d						
go E	е						
<u>-</u>	f	All other program service revenue					
	g	Total. Add lines 2a–2f		0			
	3	Investment income (including dividends, in					
	_	other similar amounts)		10,083	10,083	0	0
	4	Income from investment of tax-exempt bond	proceeds	0	0	0	0
	5	Royalties	(ii) Derecand	0	0	0	0
	٥-		(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b Rental income or (loss) 6c 0	0				
	c d	Not went alice a conserve (local)	U				
	7a	Gross amount from (i) Securities	(ii) Other				
	1 a	sales of assets	(.) 0				
		other than inventory 7a					
ø	b	Less: cost or other basis					
n l		and sales expenses . 7b					
Revenue	С	Gain or (loss) 7c 0	0				
	d	Net gain or (loss)					
Other	8a	Gross income from fundraising					
გ ∣		events (not including \$ 346					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	С	Net income or (loss) from fundraising events					
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
		Less: cost of goods sold 10b					
_	С	Net income or (loss) from sales of inventory .	susiness Code				
Miscellaneous Revenue	11a	B	ousiness Code				
scellaneo Revenue	i ia b						
ella Ver	C						
SC	d	All other revenue					
Ξ	e	Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions		40.121	10.083	0	0

Page **10** Form 990 (2023)

	IX Statement of Functional Expenses				
Section	n 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a response				
	t include amounts reported on lines 6b, 7b, , 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 .	1,100	1,100		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	3,722	1,120		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign 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				
6	Compensation not included above to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,230		1,230	
9 10	Other employee benefits				
11 a	Fees for services (nonemployees): Management				
b	Legal				
d e	Lobbying				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	2,136		2,136	
12	Advertising and promotion	373		373	
13	Office expenses	976		976	
14	Information technology	300		300	
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	3,878		3,878	
24	Other expenses. Itemize expenses not covered	3,070		3,070	
24	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Property Stewardship	3,143	3,143	0	0
b	Drograma	7,975	7,975	0	0
c	Fundraising	3,173	0	0	3,173
d	Dues to other organizations	925	0	925	0,170
e	All other expenses	124	0	124	•
25	Total functional expenses. Add lines 1 through 24e	25,333	12,218	9,942	3,173
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	20,333	12,218	7,742	3,173

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	ırt X		
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	15,330	1	22,665
	2	Savings and temporary cash investments	78,054	2	54,467
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
şţs	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges		9	314
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,682,079			
	b	Less: accumulated depreciation 10b 450	7 - 7 -		1,681,629
	11	Investments—publicly traded securities	248,449	11	288,597
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,023,462	16	2,047,672
	17	Accounts payable and accrued expenses	1,030	17	110
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
ies	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
Ħ		controlled entity or family member of any of these persons			
Liabilities	00			22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,030	26	110
′0	20	Organizations that follow FASB ASC 958, check here	1,030	20	110
ö		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions		27	
Ва	28	Net assets with donor restrictions		28	
рu		Organizations that do not follow FASB ASC 958, check here			
Ŀ		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds	0	29	0
ets	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
SS	31	Retained earnings, endowment, accumulated income, or other funds.	2,022,432		2,047,562
t A	32	Total net assets or fund balances	2,022,432		2,047,562
ž	33	Total liabilities and net assets/fund balances	2,023,462		2,047,672
_				_	

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>		
1	Total revenue (must equal Part VIII, column (A), line 12)			40,121
2	Total expenses (must equal Part IX, column (A), line 25)			25,333
3	Revenue less expenses. Subtract line 2 from line 1			14,788
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		2,	,022,432
5	Net unrealized gains (losses) on investments			10,342
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		2,	,047,562
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		
		_	Ye	es No
1 Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2	а	V
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or		
	reviewed on a separate basis, consolidated basis, or both.			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	. 2	b	'
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	ıa		
	separate basis, consolidated basis, or both.			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		С	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	on		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t	he		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3	а	· ·
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .	. 3		

Form **990** (2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

SOU	тнво	ROUGH OPEN LAND FOUNDA					22-30		
Par		Reason for Public Char						ons.	
The o	_	zation is not a private founda		,		-	•		
1		church, convention of church					0(b)(1)(A)(i).		
2		school described in section			-	-			
3		hospital or a cooperative hos							
4	_	medical research organization	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). En	ter the
_		ospital's name, city, and state							
5	_	n organization operated for rection 170(b)(1)(A)(iv). (Com		college or university	owned c	r operate	ed by a government	al unit	described in
6		federal, state, or local govern							
7		n organization that normally			port from	a gover	nmental unit or from	n the g	eneral public
		escribed in section 170(b)(1)							
8	□ A	community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)				
9		n agricultural research organi							
	U	r university or a non-land-gra niversity: 		·	·				-
10	✓ A	n organization that normally r	eceives (1) more	than 331/3% of its su	pport fro	m contrib	outions, membership	fees, a	and gross
	SI	eceipts from activities related upport from gross investment	t income and uni	related business taxal	ble incon	epuons, a ne (less se	ection 511 tax) from	busine	SSES
	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)								
11	1 An organization organized and operated exclusively to test for public safety. See section 509(a)(4) .								
12		n organization organized and							
	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check								
	tr	ne box on lines 12a through 12		• • • • • • • • • • • • • • • • • • • •			•		•
а		Type I. A supporting organ							
		the supported organization					he directors or trust	ees of	the
		supporting organization. You	ou must comple	ete Part IV, Sections	A and B	•			
b		Type II. A supporting organ							
		control or management of				persons	that control or man	age the	supported
		organization(s). You must	-	•					
С	L	Type III functionally integ its supported organization(ally inte	grated with,
ام	_		, ,	•		-		نم امیلس	iti(-)
d		Type III non-functionally i that is not functionally integ							
		requirement (see instruction						u an a	iteritiveriess.
_		` `	,	•		•		. п. т	111
е	L	Check this box if the organ functionally integrated, or I						e II, Typ	e III
f	Ent	er the number of supported of			oporting (Jigariizat	ЮП.		
g		vide the following information	•					•	
9		me of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi)	Amount of
	(1)	me of dappertod organization	(11) 2.11	(described on lines 1-10	listed in you	ur governing	support (see		support (see
				above (see instructions))	docu	ment?	instructions)	ins	structions)
					Yes	No			
(A)									
(D)									
(B)									
(C)									
(D)									
(E)									
Tota	l I								

Schedule A (Form 990) 2023 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(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 Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (d) 2022 (c) 2021 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 . . . 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. 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 b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Schedule A (Form 990) 2023 Page **3**

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	26,305	27,852	29,207	25,329	30,038	138,731
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that 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						
6	Total. Add lines 1 through 5	26,305	27,852	29,207	25,329	30,038	138,731
7a	Amounts included on lines 1, 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.)						138,731
Secti	on B. Total Support	•	•	'	•		-
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	26,305	27,852	29,207	25,329	30,038	138,731
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources	4,732	4,193	4,255	4,756	10,083	28,019
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	4,732	4,193	4,255	4,756	10,083	28,019
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	31,037	32,045	33,462	30,085	40,121	166,750
14	First 5 years. If the Form 990 is for the		first, second	, third, fourth,	or fifth tax ye	ar as a sectio	n 501(c)(3)
	organization, check this box and stop he						🗌
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8		•	. (//		15	83.2 %
16	Public support percentage from 2022 Sch					16	87.82 %
	on D. Computation of Investment In						
17	Investment income percentage for 2023 (-		17	16.8 %
18	Investment income percentage from 2022					18	12.18 %
19a	331/3% support tests—2023. If the organ						
	17 is not more than 33 ¹ / ₃ %, check this box	_	_	-		_	_
b	331/3% support tests—2022. If the organiz						
	line 18 is not more than 331/3%, check this I	_	=		-	-	_
20	Private foundation. If the organization di	d not check a k	oox on line 14,	19a, or 19b, c	heck this box	and see instruc	ctions . \square

Schedule A (Form 990) 2023 Page 4

Part IV **Supporting Organizations**

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

Se

Secti	on 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 Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3b 3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. 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? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	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 Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
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," answer line 10b below.</i>	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No 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 on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on 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 Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 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 No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No 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. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 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. 3a

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.

3b

Schedule A (Form 990) 2023 Page **6**

				. ago -
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional	ally i	integrated Type III suppor	ting organization
	(see instructions).			

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 From 2019 **c** From 2020 **d** From 2021 **e** From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

varrie C	i tile organization		Employer identification number
SOUT	HBOROUGH OPEN LAND FOUNDATION INC		22-3002718
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	ds or Accounts
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	advisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · · · □ Yes □ No
Par	Conservation Easements		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (for example, recreation)		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year.	•	Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified hi		2c
d	Number of conservation easements included on line		
	on a historic structure listed in the National Register	·	· 2d
3	Number of conservation easements modified, trans	ferred, released, extinguished, or terr	
	tax year	, , , , , , , , , , , , , , , , , , , ,	, ,
4	Number of states where property subject to conserv	ation easement is located	
5	Does the organization have a written policy regard		pection, handling of
	violations, and enforcement of the conservation eas	ements it holds?	· · · · · · □ Yes □ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	g conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports co		
	sheet, and include, if applicable, the text of the footi	_	atements that describes the
	organization's accounting for conservation easemer		
Part			Other Similar Assets
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS	•	
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote to		
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held	·	search in furtherance of public service,
	provide the following amounts relating to these item		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,	historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under FA	-	
а	Revenue included on Form 990, Part VIII, line 1 .		\$
b	Assets included in Form 990, Part X		\$

Schedul	le D (Form 990) 2023									F	Page 2
Part	III Organizations Maintaining	Collections of A	Art, Hist	orical T	reasures	, or Ot	her Similar <i>I</i>	Asse	ets (co	ntinı	ıed)
3	Using the organization's acquisition, a collection items (check all that apply).	accession, and oth	her record	ds, chec	k any of th	e follow	ving that make	sig	nificant	use	of its
а	☐ Public exhibition		d [Loan	or exchang	je progr	am				
b	Scholarly research		_	Other	_						
	☐ Preservation for future generations										
4	Provide a description of the organizat XIII.	ion's collections a	and explai	in how th	ney further	the org	janization's ex	emp	t purpo	se in	n Par
5	During the year, did the organization assets to be sold to raise funds rather							nilar	☐ Yes	s [No
Part	IV Escrow and Custodial Arra	ngements									
	Complete if the organization 990, Part X, line 21.		' on Forn	n 990, F	Part IV, lin	e 9, or	reported an a	amo	unt on	Forr	m
1a	Is the organization an agent, trustee, included on Form 990, Part X?							not	☐ Ye:	 s [No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fol	lowing ta	able.						
								Amo	ount		
С	Beginning balance					1c	;				
d	Additions during the year					1d					
е	Distributions during the year					1e	,				
f	Ending balance					1f					
2a	Did the organization include an amour							itv?	☐ Ye	s \lceil	No
	If "Yes," explain the arrangement in Pa							-		ĺ	
	EV Endowment Funds	are Alli. Official fiore	3 II 1110 OX	piariatioi	11140 00011	provide	Ja III I alt Alli	•			
· ai	Complete if the organization	answered "Yes"	' on Forn	n 990 F	Part IV lin	e 10					
	Complete ii the organization	(a) Current year	(b) Prio		(c) Two yea		(d) Three years ba	ack	(e) Four	vears	hack
10	Beginning of year balance	• • •	(6) 1 110		(0) 1 110 you				(0) 1 001		
1a		27,290		30,250		30,250	30,2			31	0,250
b	Contributions	0		0		0		0			0
С	Net investment earnings, gains, and										
	losses	0		0		0		0			0
d	Grants or scholarships	0		0		0		0			0
е	Other expenditures for facilities and										
	programs	0		2,960		0		0			0
f	Administrative expenses	0		0		0		0			0
g	End of year balance	27,290		27,290		30,250	30,2	250		30	0,250
2	Provide the estimated percentage of the	he current year en	d balance	e (line 1g	, column (a	a)) held a	as:				
а	Board designated or quasi-endowmer	nt 100 9	%								
b	Permanent endowment0	%									
С	Term endowment 0 %	· ·									
	The percentages on lines 2a, 2b, and 2	2c should equal 10	00%.								
3a	Are there endowment funds not in the organization by:			ation tha	at are held	and ad	ministered for	the	[·	Yes	No
	(i) Unrelated organizations?								3a(i)		~
	(ii) Related organizations?								3a(ii)		~
h	If "Yes" on line 3a(ii), are the related or								3b		
4	Describe in Part XIII the intended uses	•	•					•	0.0		
Part			ni 3 GIIUU	WITH CHILLIC	us.						
CITU	Complete if the organization	answered "Yes'						0, P			
	Description of property	(a) Cost or oth			r other basis ther)		Accumulated epreciation		(d) Book	: value	9
1a	Land	1	,681,629		0					1,68	1,629
b	Buildings		0		0		0				0
С	Leasehold improvements		0		0		0				0
لہ	Fauinment				450		450				

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

e Other

0

1,681,629

0

Part VII	Investments – Other Securities	V 5 445 O E	000 Dark V line 10
	Complete if the organization answered "Yes" on Form 990, Part I (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial			
` '	neld equity interests		
. ,			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	mn (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII	Investments—Program Related		
T dit VIII	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11c. See Fo	orm 990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(-)	(0) = 0000 10000	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	mn (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX	mn (b) must equal Form 990, Part X, line 13, col. (B)) Other Assets		
raitix	Complete if the organization answered "Yes" on Form 990, Part I	V line 11d See F	orm 990 Part X line 15
	(a) Description	.,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	mn (b) must equal Form 990, Part X, line 15, col. (B))		
Part X	Other Liabilities	· · · · · · ·	•
I alt X	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See Form 990, Part X,
	line 25.		
1.	(a) Description of liability		(b) Book value
(1) Federal in	ncome taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)	mn (b) must equal Form 990, Part X, line 25, col. (B))		
	r uncertain tax positions. In Part XIII, provide the text of the footnote to the organ		tements that reports the
	s liability for uncertain tax positions under FASB ASC 740. Check here if the text		

Schedule D (Form 990) 2023 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: Net unrealized gains (losses) on investments Donated services and use of facilities h Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d 2e 3 3 Subtract line **2e** from line **1** Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 2a 2b Prior year adjustments Other losses 2c Other (Describe in Part XIII.) Add lines 2a through 2d . . . 2e 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines **4a** and **4b** 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). 5 **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. Schedule D, Part V, Line 4 - To provide funds for management of the Elaine and Philip Beals Preserve. Interest and gains from these funds may be used for the operations of the organization.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

SOUTHBOROUGH OPEN LAND FOUNDATION INC	22-3002718
Form 990, Part VI, Section A, Line 7a - Members in good standing can vote at our Annual Meeting to elect	members of the Board of
Trustees.	
Form 990, Part VI, Section B, Line 11b - The Board of Trustees discusses the return at Board Meetings and	
return is posted on a shared Internet location for all Board members to review. In addition, the completed	return is posted on the
organization's public website for public viewing.	
Form 990, Part VI, Section B, Line 12c - The Southborough Open Land Foundation has all trustees comple	
they have had no conflicts of interest in the previous year at a board meeting after the annual meeting each	
of interest policy at this time and require that all board members sign the policy. In keeping with this policy	
Disclose to the board the existence of any actual, potential, or preceived conflict of interest. 2. Abstain fro	
employees, or committee members, any issue, matter, or transaction in which he or she has an actual, poi	
interest unless specifically asked by the board or a board committee to give information on the issue, mat himself or herself from board and committee discussions on any issue, matter, or transaction involving a	
requested by the board or committee to give information on the issue, matter, or transaction involving a	
matter, or transaction. 5. When requested by the board, to resign from the board of trustees, advisory board	
as the matter giving rise to the conflict of interest has been resolved, when, in the opinion of the board pro	
sufficiently resolved, the trustee may be invited to rejoin the board, advisory board, or committee.	
<u> </u>	
Form 990, Part VI, Section C, Line 19 - The organization's Articles of Incorporation, By-Laws, and Conflict	of Interest policy is available on
the Organization's public website.	
-	
Form 990, Part XII, Line 1 - In previous years the Form 990 was prepared by an Accountant. He recorded the	ne accounting basis as Cash
although he also recorded accruals such as Accounts Receivable and Accounts Payable - which was as re	ecorded in our records since we
maintain our books on an Accrual basis. This year I am adjusting the return to specify Accrual Basis to maintain	atch how we maintain our financial
records. (The impact is very small either way).	

Schedule O, Statement 1

SOUTHBOROUGH OPEN LAND FOUNDATION INC

Form: Form 990 (2023)

Page: 2

Part III, Line 1

Mission Description

Description

Southborough in its natural scenic, open, or rural condition; by preserving ecologically or agriculturally sensitive land and creating protected wildlife habitats; by disseminating information to, and otherwise educating, the general public as to the need and value of wise land use in southborough; and by engaging in such other activities as shall tend to preserve, beautify and enhance Southborough.

Schedule O, Statement 2

SOUTHBOROUGH OPEN LAND FOUNDATION INC

Form: Form 990 (2023)

EIN: 22-3002718

Part III, Line 4d

Page: 2

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Property stewardship items such as: (a) signs and trail markers (b) equipment for trail and property maintenance, (c) wood chips, (d) hazardous waste disposal. Programs including (a) donations to related organizations (b) speakers for public educational talks.	2,072	0	0
	Grants to other related organizations.	1,100	1,100	0
Total:		3,172	1,100	0