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.

Department of the Treasury Internal Revenue Service

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

Αŀ	or the	e 2022 calendar year, or tax year beginning and	enaing					
B (a	Check if opplicable	C Name of organization		D Employer identifi	cation number			
	Addre	HIGH LINE CANAL CONSERVANCY						
	Name chang	Doing business as		81-43379	38			
	Initial return	,	Room/suite	E Telephone number				
	□Final return	4010 E. ORCHARD ROAD		720-767-				
	termin ated			G Gross receipts \$	5,577,062.			
	Amen-	CENTENNIAL, CO 80121		H(a) Is this a group re				
	Application pendi	F Name and address of principal officer: HARRIEI CRITIENDEN	LAMAI	for subordinates	? Yes X No			
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No			
<u> </u>	ax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions			
	<u>Nebsi</u>			H(c) Group exemption				
		organization: X Corporation Trust Association Other	L Year	of formation: 2016 N	M State of legal domicile: CO			
Pa	art I	Summary						
Activities & Governance		Briefly describe the organization's mission or most significant activities: ${ t TO \ \ Pl}$	RESERV	E, PROTECT 2	AND ENHANCE			
'n	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net as:	sets.			
Ver	3			3	16			
õ	4	Number of independent voting members of the governing body (Part VI, line 1b)			16			
ري وي		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			22			
ıtie.		Total number of volunteers (estimate if necessary)			642			
cţi				7a	0.			
⋖	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
ø.	8	Contributions and grants (Part VIII, line 1h)		4,825,043.	5,539,960.			
ğ	9	Program service revenue (Part VIII, line 2g)		0.	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		768.	2,679.			
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-44,482.	-101,062.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,781,329.	5,441,577.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		873,253.	1,073,958.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
x	b	Total fundraising expenses (Part IX, column (D), line 25) 338,55	50.					
Ú	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		688,635.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,561,888.	2,282,580.			
	19	Revenue less expenses. Subtract line 18 from line 12		3,219,441.	3,158,997.			
Or			Ве	eginning of Current Year	End of Year			
Net Assets or	20	Total assets (Part X, line 16)		5,649,262.	8,884,448.			
t As	21	Total liabilities (Part X, line 26)		99,670.	175,859.			
	22	Net assets or fund balances. Subtract line 21 from line 20		5,549,592.	8,708,589.			
	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedules			/ knowledge and belief, it is			
true,	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.				
		Signature of officer		l Date				
Sig			CEC	Date				
Her	е	HARRIET CRITTENDEN LAMAIR, EXECUTIVE DIRE	CTOR					
		Type or print name and title		Date Check C	PTIN			
D - 1 -		Print/Type preparer's name Preparer's signature		l if				
Paid		KEVIN RICKMAN		self-employ	•			
	arer	Firm's name BROCK AND COMPANY, CPAS, P.C. Firm's address 4940 PEARL EAST CR., SUITE 300		Firm's EIN 8	4-0930288			
use	Only	Firm's address 4940 PEARL EAST CR., SUITE 300 BOULDER, CO 80301		n	2_111_2071			
	. 41 23	·		Phone no. 3 U	3-444-2971 X Yes No			
iviay	/ tne II	RS discuss this return with the preparer shown above? See instructions			X Yes No			

	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	TO PRESERVE, PROTECT AND ENHANCE THE 71-MILE LEGACY CANAL WITH SU	JPPORT
	FROM EACH JURISDICTION AND IN PARTNERSHIP WITH DENVER WATER.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3		Yes X No
	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 exp	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	nses, and
	revenue, if any, for each program service reported.	4 640
4a	(Code:) (Expenses \$1,795,958. including grants of \$) (Revenue \$	<u>4,640.</u>)
	PRESERVE, PROTECT AND ENHANCE THE HIGH LINE CANAL THROUGH LEADERS	
	STEWARDSHIP, ADVOCACY AND EDUCATION. THE ORGANIZATION'S VISION FO	
	FUTURE IS TO PERMANENTLY PRESERVE THE 71-MILE LINEAR GREENWAY THAT	
	CREATES CONNECTIONS; ENHANCES RECREATION; LEVERAGES ECONOMIC GROV	TH;
	AND IMPROVES ENVIRONMENTAL HEALTH.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	
	(Code) (Expenses w	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1,795,958.	
		Form 990 (2022)

Form 990 (2022) HIGH LINE CANAL CONSERVANCY 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	Х	
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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		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? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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		X

Form 990 (2022) HIGH LINE CANAL CONSERVANCY
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			,,
	Schedule K. If "No," go to line 25a	24a		X
	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	04.		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			.,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
24	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	34		x
35.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<u></u>
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				_
	Check if Schedule O contains a response or note to any line in this Part V			
	5. "		Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 28 Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable 1b 0			
b	Enter the number of Fernie W Zermoldeed of line 14. Enter 6 in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	46	Х	
	(gambling) winnings to prize winners?	1c	000	<u> </u>

Form 990 (2022) HIGH LINE CANAL CONSERVANCY

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Page 5 81-4337938

			Yes	No
2 a	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		77	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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			x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
D	If "Yes," enter the name of the foreign country Con instructions for filing requirements for FigCFN Form 114. Penert of Foreign Reply and Figure 1.0 Accounts (FRAR)			
50	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Eo.		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	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?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
va	any contributions that were not tax deductible as charitable contributions?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
Ī	to file Form 8282?	7с		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	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.)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the			
D	organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand 13c			
		14a		Х
	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		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.	.5		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, 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.			

HIGH LINE CANAL CONSERVANCY

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 16 **1a** Enter the number of voting members of the governing body at the end of the tax year 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. 16 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 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 Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b 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? Х 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. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? X The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization Х 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 with a Х taxable entity during the year? 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 organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Another's website Other (explain on Schedule O) Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

80121

Form **990** (2022)

THE ORGANIZATION - 720-767-2452 4010 E. ORCHARD ROAD, CENTENNIAL,

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 ne	or any related	orga	niza	tion	con	npen	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	person is both an a director/trustee)			compensation	compensation	amount of
	week		cer an	ia a a	Irecto	r/trus	iee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ıl trus		ee/	m pen		1099-NEC)	1099-NEO)	and related
	below	Individual trustee or director	In stit utio nal tru stee	-	Key employee	st co	er	1355 1.25,		organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			· ·
(1) PAULA HERZMARK	2.00									
CHAIR		X		X				0.	0.	0.
(2) SUZANNE WHITE	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(3) JOSH TENNESON	2.00									
SECRETARY		Х		Х				0.	0.	0.
(4) GRAHAM HOLLIS	2.00									
TREASURER		Х		Х				0.	0.	0.
(5) DIRK MCDERMOTT	1.00							_		
DIRECTOR		Х						0.	0.	0.
(6) KENDRA BLACK	1.00							_	_	_
EX OFFICIO		Х						0.	0.	0.
(7) KARL FRIEDMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(8) MIKE ROSSER	1.00									
DIRECTOR		Х						0.	0.	0.
(9) NANCY SHARP	1.00							_		
EX OFFICIO		Х						0.	0.	0.
(10) TOM GART	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(11) CRAIG JONES	1.00								•	•
DIRECTOR	1 00	Х						0.	0.	0.
(12) JASON SWANN	1.00	37							0	0
Constitution (13) STEVE COFFIN	1 00	Х						0.	0.	0.
	1.00	37							_	•
DIRECTOR	1 00	Х						0.	0.	0.
(14) EVAN ELA DIRECTOR	1.00	Х						0.	0.	0.
(15) DEBI HUNTER HOLEN	1.00	Λ						0.	0.	· ·
DIRECTOR	1.00	Х						0.	0.	0.
(16) RODNEY MILTON	1.00	Λ						· ·	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(17) HARRIET CRITTENDEN LAMAIR	40.00							0.		•
EXECUTIVE DIRECTOR	10.00	1		Х				134,649.	0.	7,557.
						_		. ,		000

232007 12-13-22 Form **990** (2022)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			(C	C)			(D)	(E)			(F)	
Name and title	Average	(do		Posi) than c	no	Reportable	Reportable	,	E	stimate	ed
	hours per	box	, unles	ss per	rson i	s both	an	compensation	compensation	n n	ar	nount	of
	week		cer an	id a di	irecto	r/trus	ee)	from	from related			other	
	(list any	rector						the	organization			pensa	
	hours for related	or di	ee			ated		organization	(W-2/1099-MIS			rom th	
	organizations	ustee	trust		e e	Suadu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		_	janizat d relat	
	below	lual tr	tional		ploye	st con	_	1099-1120)				anizati	
	line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former				0.9	amean	5110
		_	_		×	1 0	_			$\neg \neg$			
1b Subtotal								134,649.		0.		7,5	57.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								134,649.		0.	0. 7,557.		
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	e			
compensation from the organization													1
										ſ		Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	сеу е	empl	oye	e, or	hig	hest compensated emp	oyee on				
line 1a? If "Yes," complete Schedule J for si											3		X
4 For any individual listed on line 1a, is the su													7.7
and related organizations greater than \$150											4		Х
5 Did any person listed on line 1a receive or a											_		37
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	e J fo	or su	ıch <u>r</u>	oers	on .					5		Х
Complete this table for your five highest con	mponeated ind	lono	ndor	at cc	ntro	actor	c +h	act received more than \$	100 000 of com	20000	tion fr		
the organization. Report compensation for t										Jerisai	LIOIT III	5111	
(A)	,			. <u>.</u>				(B)			((C)	
Name and business								Description of s	ervices	C		nsatio	n
SAVATREE, LLC, 15558 EAST	HINSDA	\mathbf{LE}	С	IR	CL	Ε,							
CENTENNIAL, CO 80112							_	CONTRACT LAB	OR		10	9,4	<u> 17.</u>
							\dashv						
-													
2 Total number of independent contractors (in \$100,000 of compensation from the organize	ŭ	ot lin	nited	to t	thos 1		ted	above) who received mo	ore than				

81-4337938 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 280,050. c Fundraising events 1c d Related organizations 1d 340,650. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 4,919,260. 1f 1g |\$ g Noncash contributions included in lines 1a-1f 5,539,960 h Total. Add lines 1a-1f **Business Code** 2 a _____ Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 2,679. 2,679. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) 6c d Net rental income or (loss) (ii) Other (i) Securities 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses 7b c Gain or (loss) ______7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 280,050. of contributions reported on line 1c). See 24,500. Part IV, line 18 130,202. **b** Less: direct expenses -105,702 -105,702. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 9,923. 10a and allowances 5,283. **b** Less: cost of goods sold 4,640. 4,640. c Net income or (loss) from sales of inventory **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d

5,441,577.

4,640.

12 Total revenue. See instructions

Form 990 (2022) HIGH LINE CANAL CONSERVANCY Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
	Check if Schedule O contains a respon	se or note to any line in			X					
	not include amounts reported on lines 6b, 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									
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	134,649.	67,324.	26,930.	40,395.					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	779,055.	560,473.	60,398.	158,184.					
8	Pension plan accruals and contributions (include	45 50:	40.045							
	section 401(k) and 403(b) employer contributions)	17,524. 70,789.	12,041. 48,638.	1,675. 6,766.	3,808. 15,385.					
9	Other employee benefits	70,789.	48,638.	6,766.	15,385.					
10	Payroll taxes	71,941.	49,430.	6,876.	15,635.					
11	Fees for services (nonemployees):									
а	Management									
b	Legal	04.644	10.000	0.145	2 225					
С	Accounting	24,644.	12,262.	9,147.	3,235.					
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	,	C2E 471	EO4 7E1	6 1 2 1	24 500					
	column (A), amount, list line 11g expenses on Sch O.)	635,471.	594,751. 29,524.	6,131. 1,142.	34,589. 5,875.					
12	Advertising and promotion	36,541. 7,160.	29,324.	1,144.	2,8/3.					
13	Office expenses	38,588.	2,483. 18,675.	2,754. 3,404.	1,923. 16,509.					
14	Information technology	30,300.	10,075.	3,404.	10,303.					
15	Royalties	15,791.	9,705.	2,953.	3,133.					
16	Occupancy	3,381.	1,806.	1,547.	28.					
17	Travel Payments of travel or entertainment expenses	3,301.	1,000.	1,311	20•					
18	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	49,656.	44,692.	3,735.	1,229.					
20	Interest	272.	11,000	272.	±,227•					
21	Payments to affiliates	2,2•		2,2•						
22	Depreciation, depletion, and amortization	52,689.	35,584.	5,289.	11,816.					
23	Insurance	6,440.	4,161.	619.	1,660.					
24	Other expenses, Itemize expenses not covered	,,==,	_,		=/***					
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),									
	amount, list line 24e expenses on Schedule 0.) CANAL IMPROVEMENT PROJE	199,753.	199,753.							
a h	PROGRAM EXPENSES	69,484.	69,484.							
2	PRINTING AND POSTAGE	42,659.	24,284.	1,094.	17,281.					
d	MISCELLANEOUS	7,008.	263.	5,677.	1,068.					
-	All other expenses	19,085.	10,625.	1,663.	6,797.					
25	Total functional expenses. Add lines 1 through 24e	2,282,580.	1,795,958.	148,072.	338,550.					
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)									
					E 000 (2222)					

Form 990 (2022)
Part X Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			284,632.	1	700,201.
	2	Savings and temporary cash investments			2,158,479.	2	1,801,454.
	3	Pledges and grants receivable, net			3,012,161.	3	6,225,102.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqui	alified per				
		under section 4958(f)(1)), and persons describ		6			
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			11,052.	8	5,033.
Ą	9				20,238.	9	6,915.
	10a	Land, buildings, and equipment: cost or other	.				
		basis. Complete Part VI of Schedule D	. 10a	206,607.			
	b	Less: accumulated depreciation	. 10b	96,596.	162,700.	10c	110,011.
	11	Investments - publicly traded securities			11	35,732.	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must ed			5,649,262.	16	8,884,448.
	17	Accounts payable and accrued expenses			92,776.	17	172,185.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV o	of Schedule D		21	
Se	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, suk					
iab		controlled entity or family member of any of the	iese perso	ons		22	
_	23	Secured mortgages and notes payable to unre		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	•	·	6 004		2 684
		of Schedule D			6,894.		3,674.
	26			77	99,670.	26	175,859.
S		Organizations that follow FASB ASC 958, c	heck here	· X			
Jce		and complete lines 27, 28, 32, and 33.			1 000 052		1 0/1 105
alar	27	Net assets without donor restrictions			1,008,053.	27	1,041,195. 7,667,394.
Ä	28	Net assets with donor restrictions			4,541,539.	28	1,001,394.
Ŭ.		Organizations that do not follow FASB ASC	958, che	ck here			
or F		and complete lines 29 through 33.					
ts (29	Capital stock or trust principal, or current fund				29	
SSe	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			5,549,592.	31	Q 700 E00
ž	32	Total net assets or fund balances		1		32	8,708,589.
	33	Total liabilities and net assets/fund balances			5,649,262.	33	8,884,448.

Form **990** (2022)

Ра	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,	441	L,5	<u>77.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			2,5	
3	Revenue less expenses. Subtract line 2 from line 1	3	3,	158	3,9	97.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,	549	, 5	92.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	8,	708	3,5	89.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	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	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3h		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public

Inspection

Name of the organization
HIGH LINE CANAL CONSERVANCY

Employer identification number

OMB No. 1545-0047

					L CONSERVANCE				8	1-4337938				
Pa	art	I	Reason for Public C	Charity Status. ((All organizations must o	omplete th	nis part.) S	ee instruction	S.					
The	orc	ani	zation is not a private found											
1	Г		A church, convention of chu	•	- ·	•	•	I)(A)(i).						
2	F	ī	A school described in secti					Α Α /						
3	F	Ħ	A hospital or a cooperative		•		(b)(1)(A)(ii	ii).						
4	F	Ħ	A medical research organiza					•	(iii) Enter	the hospital's name				
•			city, and state:	ation operated in cor	ijanotion with a noopital	accombca	000110	((5)(1)(1-)	(III)i Eritor	the ricepital o riame,				
5		\neg	An organization operated for	or the benefit of a col	lege or university owner	l or operat	ed by a go	vernmental ur	nit describe	ad in				
3			section 170(b)(1)(A)(iv). (C		lege of difficulty owner	or operat	cd by a gc	verninentarar	iii describi	24 111				
_		\neg		•			70/L\/4\/A\	()						
6		-		ate, or local government or governmental unit described in section 170(b)(1)(A)(v).										
′		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in												
_	section 170(b)(1)(A)(vi). (Complete Part II.)													
8		\exists	A community trust describe							_				
9		Ш	An agricultural research org				-		-	-				
			or university or a non-land-g	grant college of agricu	ulture (see instructions).	Enter the	name, city	, and state of	the college	eor				
		_	university:											
10	L		An organization that normal	Ily receives (1) more t	than 33 1/3% of its supp	ort from c	ontributior	ns, membershi	p fees, and	d gross receipts from				
			activities related to its exem	npt functions, subject	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	support f	rom gross investment				
			income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.				
			See section 509(a)(2). (Cor	mplete Part III.)										
11		╛	An organization organized a	and operated exclusi	vely to test for public sa	fety.See	section 50	09(a)(4).						
12			An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to car	ry out the	purposes of one or				
			more publicly supported org	ganizations described	d in section 509(a)(1) d	r section	509(a)(2).	See section 5	609(a)(3). (Check the box on				
			lines 12a through 12d that of	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and	12g.					
a	ı [Type I. A supporting orga	anization operated, su	upervised, or controlled	by its supp	orted org	anization(s), ty	pically by	giving				
			the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	upporting				
			organization. You must c	complete Part IV, Se	ections A and B.									
k) [Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	ed organization	n(s), by hav	ving				
			control or management of	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the supp	ported				
			organization(s). You mus	t complete Part IV,	Sections A and C.	•		_						
c	; [Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionall	y integrate	ed with,				
			its supported organization	- '					, 0	,				
c	ı		Type III non-functionally		-				ted organiz	zation(s)				
			that is not functionally into						-					
			requirement (see instructi	-	•	-		•						
e	. [Check this box if the orga	•	-				I Type III					
			functionally integrated, or					1,7001, 1,7001	., . , po					
1		nte	r the number of supported of		iany integrated eapperti	ng organiz	ation.							
			ide the following information	•	d organization(s)									
`	<u>, </u>) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other				
			organization		(described on lines 1-10	Yes	No	support (see in	structions)	support (see instructions)				
					above (see instructions))	100								
Tot	al													

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1320049.	1346965.	2082934.	4825043.	5539960.	<u> 15114951.</u>
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	10000	10110				
4	Total. Add lines 1 through 3	1320049.	1346965.	2082934.	4825043.	5539960.	15114951.
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,						450000
	column (f)						4538332.
	Public support. Subtract line 5 from line 4.						10576619.
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019 1346965.	(c) 2020	(d) 2021 4825043.	(e) 2022	(f) Total 15114951.
	Amounts from line 4	1320049.	1346965.	2082934.	4823043.	5539960.	13114931.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	2 176	1 266	2 612	768.	2 670	12 602
_	and income from similar sources	2,176.	4,366.	2,613.	/00•	2,679.	12,602.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
IU	Other income. Do not include gain						
	or loss from the sale of capital						
11	assets (Explain in Part VI.)						15127553.
	Gross receipts from related activities,	oto (soo instructio	ne)			12	104,530.
	First 5 years. If the Form 990 is for the	•	,	ourth or fifth tax v			101/3301
.0	organization, check this box and stor	-					
Sec	etion C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		14	69.92 %
	Public support percentage from 2021					15	72.62 %
	33 1/3% support test - 2022. If the o					ore, check this bo	
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	_					
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c	heck a box on line			
	more, and if the organization meets th	_					
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	s

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

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

Se	ction A. Public Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		T				,
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	-			•		
0-	check this box and stop here						
	ction C. Computation of Publi			. (5)		T .= T	
	Public support percentage for 2022 (I			.,,		15	%
	Public support percentage from 2021 ction D. Computation of Inves					16	%
				10 l (f)		47	0/
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	7 is not
198	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						L
k	33 1/3% support tests - 2021. If the						
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	in ala not check a	DOX on line 14, 198	a, or 190, check th	iis box and see ins	structions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
	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		
Sect	tion B. Type I Supporting Organizations	, 110		
	<u>,</u>		Yes	No
4	Did the severing body, members of the severing body, officers esting in their official conseits, or membership of one or		162	NO
	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		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	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			
	· · · · · · · · · · · · · · · · · · ·	3		
Sect	supported organizations played in this regard. tion 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	١.		
а	The organization satisfied the Activities Test. Complete line 2 below.	,-		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	etruction	ic)	
	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
	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		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	u		
	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	2b		
	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
	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	Ja		
		3b		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	JU		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations				
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 m		·				
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
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	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	ınization (see			

Schedule A (Form 990) 2022

instructions).

	dule A (Form 990) 2022 HIGH LINE CAN Type III Non-Functionally Integrated 509	AL CONSERVANCY	nizatione / //		1-4337938 Page 7
	ion D - Distributions	(a)(b) Supporting Orga	nizations (continu	<u>iea)</u> 	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	Guiront Tour
2	Amounts paid to perform activity that directly furthers exemp				
_	organizations, in excess of income from activity	or purposes or supported		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	.	3	
4	Amounts paid to acquire exempt-use assets	oo or supported organizations	,	4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	ovide details in a sure any		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
_	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C. line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	•	(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ıs	Distributable Amount for 2022
Sect	Distributable amount for 2022 from Section C, line 6	Excess Distributions		ıs	
	· , , , , , , , , , , , , , , , , , , ,	Excess Distributions		ıs	
1	Distributable amount for 2022 from Section C, line 6	Excess Distributions		ıs	
1	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reason-	Excess Distributions		IS	
1 2 3	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.	Excess Distributions		is	
1 2 3 a	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022	Excess Distributions		ıs	
1 2 3 a b	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017	Excess Distributions		ns	
1 2 3 a b c	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017 From 2018	Excess Distributions		ns	
1 2 3 a b c d	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017 From 2018 From 2019	Excess Distributions		ns	
1 2 3 a b c d e	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017 From 2018 From 2019 From 2020	Excess Distributions		ns	
1 2 3 a b c d e f	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017 From 2018 From 2019 From 2020 From 2021	Excess Distributions		ns	
1 2 3 a b c d e f g	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017 From 2018 From 2019 From 2020 From 2021 Total of lines 3a through 3e	Excess Distributions		ns	
1 2 3 a b c d e f g	Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 From 2017 From 2018 From 2019 From 2020 From 2021 Total of lines 3a through 3e Applied to underdistributions of prior years	Excess Distributions		ns	

Schedule A (Form 990) 2022

Distributions for 2022 from Section D,

a Applied to underdistributions of prior yearsb Applied to 2022 distributable amount

Remainder. Subtract lines 4a and 4b from line 4.
 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater

than zero, explain in **Part VI.** See instructions.

6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2023. Add lines 3j

Part VI. See instructions.

line 7:

and 4c.
 B Preakdown of line 7:
 a Excess from 2018
 b Excess from 2019
 c Excess from 2020
 d Excess from 2021
 e Excess from 2022

232028 12-09-22 Schedule A (Form 990) 2022

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

HIGH LINE CANAL CONSERVANCY

Employer identification number 81-4337938

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		imilar Funds o	or Accoun	ts. Complete if the
	organization answered Tee Sitt offit 600, Fart IV, IIII	(a) Donor advise	d funds	(b) Fun	ds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v		ld in donor advise	d funds	
	are the organization's property, subject to the organization's	exclusive legal control?			Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any	y other purpose c	onferring	
	impermissible private benefit?				
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes	s" on Form 990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	_		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation of	a historically	important land area
	Protection of natural habitat		Preservation of	a certified his	storic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribu	ition in the form o	of a conserva	
	day of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b					
С	Number of conservation easements on a certified historic stru			2c	
d	Number of conservation easements included in (c) acquired a				
	historic structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the	organization	during the tax
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the per		ion, handling of		
	violations, and enforcement of the conservation easements it				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, an	a enforcing conse	ervation ease	ments during the year
7	Amount of avances incurred in manitaring increasing hand	lling of violations, and ant	iavaina aanaamiati		to duving the year
7	Amount of expenses incurred in monitoring, inspecting, hand	illing of violations, and em	ording conservati	on easemen	is during the year
8	Does each conservation easement reported on line 2(d) above	a satisfy the requirement	s of soction 170/h	\(\(\(\D\)\(i\)	
0					Yes No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation				
9	balance sheet, and include, if applicable, the text of the footn				
	organization's accounting for conservation easements.	lote to the organization's	ililailciai stateillei	ilis illai desc	indes trie
Par	t III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Oth	ner Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its reve	enue statement an	nd balance sh	neet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education,	or research in fur	therance of p	oublic
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that desc	cribes these items	S	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue	statement and ba	alance sheet	works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furthe	erance of put	olic service,
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1				\$
					\$
2	If the organization received or held works of art, historical trea			gain, provide)
	the following amounts required to be reported under FASB A			- • •	
а	Revenue included on Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X				\$

		NE CANAL CO						-433			ige 2
Pai	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	Similar As	sets	(contir	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	ollowing that	t make si	gnificant use c	of its			
	collection items (check all that apply):										
а	Public exhibition	c	ı 🔲	Loan or exc	hange progra	am					
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	e organizatio	on's exen	npt purpose in	Part XI	II.		
5	During the year, did the organization solicit o	r receive donations	of art, his	storical treas	sures, or othe	er similar	assets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	nization's col	lection?				Yes		No
Pai	t IV Escrow and Custodial Arran							rt IV, lin	e 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for o	contributions	or other as	sets not i	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
	, ,	•	Ü					P	Amount	t	
С	Beginning balance						1c				
	Additions during the year										
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.							—			ĺ
Pai											
	·	(a) Current year		rior year	(c) Two yea		(d) Three years	back ((e) Four	years I	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1d	z. column (a)) held as:			· · · · ·			
a	Board designated or quasi-endowment	•	%	y , ()	,						
b	Permanent endowment	%									
		<u></u> , -									
•	The percentages on lines 2a, 2b, and 2c short										
За	Are there endowment funds not in the posses	•	ation tha	t are held an	d administer	red for th	e				
	organization by:								ſ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the								<u> </u>		
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990), Part IV	/, line 11a. S	ee Form 990), Part X,	line 10.				
	Description of property	(a) Cost or o			or other		ccumulated	1	d) Bool	k value	,
		basis (investr		basis		,	oreciation	'	,		
1a	Land	,			-						
	Buildings										
	Leasehold improvements			19	6,900.		93,037		10	3,86	53.
	Equipment				9,707.		3,559			5,14	
	Other						,				

Schedule D (Form 990) 2022

110,011.

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

Schedule D (Form 990) 2022 HIGH LINE CA	ANAL CONSERVAN	NCY 8	1-4337938	Page
Part VII Investments - Other Securities.				<u> </u>
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market v	alue
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market v	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a) [Description		(b) Book va	lue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)			
Complete if the organization answered "Yes" of	on Form 990, Part IV. line	11e or 11f. See Form 990. Part X. line 2	.5.	
1. (a) Description of liability		2.2.2.2.3,	(b) Book va	alue
(1) Federal income taxes			1.7.255	
(2) FINANCING LEASE OBLIGATION			3	,674
(3)	<u>'</u>		†	, 0, 1
(5) (4)			1	

	,
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FINANCING LEASE OBLIGATION	3,674.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990 Part X col (B) line 25)	3,674.

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

Schedule D (Form 990) 2022

Pa	rt XI	Reconciliation of Revenue per Audited Financial S		levenue per Re	turn.	
		Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.			
1	Total r	revenue, gains, and other support per audited financial statements			1	5,531,698.
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:				
а		nrealized gains (losses) on investments				
b	Donat	ed services and use of facilities	2b	90,121.		
С	Recov	veries of prior year grants	2c			
d	l Other	(Describe in Part XIII.)	2d			
е	Add lii	nes 2a through 2d			2e	90,121. 5,441,577.
3	Subtra	act line 2e from line 1			3	5,441,577.
4	Amou	nts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b			
С	Add lii	nes 4a and 4b			4c	0.
5	Total r	revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line	12.)		5	5,441,577.
Pa	rt XII	Reconciliation of Expenses per Audited Financial		Expenses per F	Returr).
		Complete if the organization answered "Yes" on Form 990, Part IV				
1	Total e	expenses and losses per audited financial statements			1	2,372,701.
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donat	ed services and use of facilities	2a	90,121.		
b	Prior y	year adjustments	2b			
С	Other	losses	2c			
d	l Other	(Describe in Part XIII.)	2d			
е	Add lii	nes 2a through 2d			2e	90,121.
3	Subtra	act line 2e from line 1			3	2,282,580.
4		nts included on Form 990, Part IX, line 25, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b			
С	: Add lii	nes 4a and 4b			4c	0.
5	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. lin	ne 18.)		5	2,282,580.
Pa	rt XIII	Supplemental Information.				
Prov	ide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a at	nd 4; Part IV, lines 1b a	nd 2b; Part V, line 4	; Part >	, line 2; Part XI,
lines	s 2d and	4b; and Part XII, lines 2d and 4b. Also complete this part to provid	e any additional inform	ation.		
			<u> </u>			<u> </u>

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

HIGH LI	NE CANAL CONSERVANO	CY			81-4337	938
	· Complete if the organization answe		es" or	n Form 990, Part IV, I		
Indicate whether the organization rais a	sed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual cart VII) or entity in connection with providuals or entities (fundraisers) pursua	ion of ion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit c		 utions	or has been notified	it is exempt from re	gistration

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 \$5,00

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines i and 60. List e	events with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			DINE FOR THE		NONE	(add col. (a) through
			HIGH LINE			1 ' ' '
			(event type)	(event type)	(total number)	- col. (c))
Jue						
Revenue	1	Gross receipts	304,550.			304,550.
ď						
	2	Less: Contributions	280,050.			280,050.
	3	Gross income (line 1 minus line 2)	24,500.			24,500.
	4	Cash prizes				
	5	Noncash prizes				
ses						
ens	6	Rent/facility costs	38,356.			38,356.
Direct Expenses						
ect	7	Food and beverages	35,246.			35,246.
ä						
	8	Entertainment	56.600			56.600
	9	Other direct expenses	56,600.			56,600.
		Direct expense summary. Add lines 4 through	. ,			130,202.
Da	11 irt l	Net income summary. Subtract line 10 from li Gaming. Complete if the organization a		.000 Dest IV line 10 and		-105,702.
ГС		\$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	1990, Part IV, line 19, or i	reported more than	
		\$13,000 OH FORM 990-EZ, line oa.		(b) Pull tabs/instant		(d) Total gaming (add
ne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue				ад., р д		(2)
Re	1	Gross revenue				
	•	dross revenue				
	2	Cash prizes				
ses	_					
ben	3	Noncash prizes				
ŭ						
Direct Expenses	4	Rent/facility costs				
⊡						
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	☐ No	☐ No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			<u> </u>
	_					
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming ac				Yes No
b	If "	No," explain:				
	_					
10-	\^/-	ore any of the organization's coming linears :-	woked augrended sut-	rminated during the tarre	voor?	Yes No
		ere any of the organization's gaming licenses re Yes," explain:	· · · · · · · · · · · · · · · · · · ·	•	/cai (resNO
N	11	100, GAPIAITI.				

Sch	edule G (Form 990) 2022 HIGH LINE CANAL CONSERVANCY 81-4	<u> </u>	930	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	O 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?		Yes	O No
13	Indicate the percentage of gaming activity conducted in:	i		
а	The organization's facility	13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🔲	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	s the organization required under state law to make charitable distributions from the gaming proceeds to			
а	retain the state gaming license?		Yes	☐ No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III. lir	nes 9. 9	9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	,	,,

232083 10-27-22 Schedule G (Form 990) 2022

Schedule G	(Form 990)	HIGH LINE	CANAL	CONSERVANCY	81-4337938	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continued)				

SCHEDULE 0 (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.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HIGH LINE CANAL CONSERVANCY

Employer identification number 81-4337938

HIGH LINE CANAL CONSERVANCY	81-433/938						
FORM 990, PART VI, SECTION B, LINE 11B:							
THE FORM 990 IS PROVIDED TO MANAGEMENT AND THE BOARD OF DIRECTORS FOR							
APPROVAL PRIOR TO FILING.							
FORM 990, PART VI, SECTION B, LINE 12C:							
DIRECTORS AND OFFICERS ARE REQUIRED TO SIGN AN ACKNOWLEDGEMENT FORM							
ANNUALLY.							
FORM 990, PART VI, SECTION C, LINE 19:							
GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.							
FORM 990, PART IX, LINE 11G, OTHER FEES:							
CONTRACT LABOR:							
PROGRAM SERVICE EXPENSES	594,751.						
MANAGEMENT AND GENERAL EXPENSES	6,131.						
FUNDRAISING EXPENSES	34,589.						
TOTAL EXPENSES	635,471.						
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	635,471.						