

		PUB	LIC DISCLOSURE COPY - STATE REGISTRATE Return of Organization Exempt Fron		28 OMB No. 1545-0047
Form 990			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		2022
			Do not enter social security numbers on this form as it may		Open to Public
Depa Interr	rtment o nal Reve	of the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and the late	st information.	Inspection
AF	or th	e 2022 calend	ar year, or tax year beginning $ { m JUL}1,2022$ and ending	<u>JUN 30, 2023</u>	
B c	Check if pplicab	le: C Name o	forganization	D Employer identifi	cation number
	Addre	ge THE	ADIRONDACK COUNCIL, INC.		
	Name chang Initial	ge Doing b	usiness as	14-15943	86
	return Final return	Number	and street (or P.0. box if mail is not delivered to street address) BOX $D-2$	uite E Telephone numbe 518-873-	
	termii ated	¹⁻ City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	3,080,245.
	Amen		ABETHTOWN, NY 12932	H(a) Is this a group r	eturn
	Applio tion pendi		nd address of principal officer: SARAH HATFIELD	for subordinates	s? Yes X No
		SAME	AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No
<u> 1</u>	Tax-ex	empt status:			list. See instructions
	Nebsi		ADIRONDACKCOUNCIL.ORG	H(c) Group exemption	
			X Corporation Trust Association Other L	Year of formation: 1977	VI State of legal domicile: NY
Pá	art I	Summary			
e	1	Briefly describ	e the organization's mission or most significant activities: SEE PART	III, LINE I	
Governance	2	Check this bo	x if the organization discontinued its operations or disposed of n	nore than 25% of its net as	sots
veri	3			3	26
ŝ	4		lependent voting members of the governing body (Part VI, line 1b)		26
ళ ల	5		of individuals employed in calendar year 2022 (Part V, line 2a)		27
Activities &	6		of volunteers (estimate if necessary)		50
cti∕			d business revenue from Part VIII, column (C), line 12		0.
Ā			business taxable income from Form 990-T, Part I, line 11		0.
				Prior Year	Current Year
đ	8	Contributions	and grants (Part VIII, line 1h)	2,503,863.	2,743,277.
ň	9	Program servi	ce revenue (Part VIII, line 2g)	0.	0.
Revenue	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	132,769.	206,121.
œ	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26,492.	17,114.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,663,124.	2,966,512.
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1·3)	0.	0.
	14	•	to or for members (Part IX, column (A), line 4)	0.	0.
es	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	1,816,494.	2,014,275.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
ă	b		ing expenses (Part IX, column (D), line 25) 81,774.	1 11 5 001	0.00 450
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,116,001.	979,459.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,932,495.	2,993,734.
	19	Revenue less	expenses. Subtract line 18 from line 12	-269,371.	-27,222.
Net Assets or				Beginning of Current Year	End of Year
Sset	20	Total assets (8,899,831.	10,135,231.
et A	21		(Part X, line 26)	<u>131,086.</u> 8,768,745.	344,485.
	art II	Net assets or	fund balances. Subtract line 21 from line 20	0,/00,/43.	9,790,746.
		-	I declare that I have examined this return, including accompanying schedules and sta	tements and to the best of m	knowledge and belief it is
			. Declaration of preparer (other than officer) is based on all information of which prep		אווטשופעשר מווע שלוולו, ונ וצ
<u></u>	,				
Sig	n	Signature of or	fficer	Date	

Sign	erginatare er entret							
Here	SARAH HATFIELD, BOARD CHAIR							
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date					
Paid	ALAN W. CLINK, CPA			self-employed P01256785				
Preparer	Firm's name MENGEL, METZGER,	BARR & CO. LLP		Firm's EIN 16-1092347				
Use Only	Firm's address 11 BRITISH AMERIC.							
	LATHAM, NY 12110		Phone no. 518 - 785 - 0134					
May the IF	May the IRS discuss this return with the preparer shown above? See instructions							
232001 12-1	32001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)							

SEE SCHEDULE O FO	OR ORGANIZATION	MISSION	STATEMENT	CONTINUATION

Form	990 (2022) THE ADIRONDACK COUNCIL, INC. 14-1594386 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
•	
3	3 3 3 3 3 3 3 3
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,473,160. including grants of \$) (Revenue \$) (Revenue \$)
	WITH STRONG PARTNER ORGANIZATIONS, COLLABORATION WITH ELECTED/APPOINTED
	GOVERNMENT OFFICIALS, AND CITIZEN PARTICIPATION, THE COUNCIL
	SUCCESSFULLY ADVOCATED FOR POLICIES AND FUNDING TO BENEFIT THE
	ENVIRONMENT AND COMMUNITIES OF THE ADIRONDACK PARK.
	WILDERNESS: ENSURING THE WILD CHARACTER AND ECOLOGICAL INTEGRITY OF THE
	ADIRONDACK PARK AND FOREST PRESERVE. INAUGURAL VISITOR USE MANAGEMENT
	STUDY UNDERWAY: IN 2022, THE ADIRONDACK COUNCIL HELPED SECURE \$600,000
	IN STATE FUNDING THAT WOULD ALLOW THE DEPARTMENT OF ENVIRONMENTAL
	CONSERVATION (DEC) TO HIRE A LEAD CONSULTING FIRM TO STUDY VISITOR USE
	MANAGEMENT IN THE ADIRONDACK AND CATSKILL PARKS. IN EARLY 2023, THE
	COUNCIL AND OTHER STAKEHOLDERS ATTENDED THE FIRST PUBLIC LISTENING
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 2,473,160.
	Form 990 (2022)

Form	990	(2022)

Form 990 (2022) THE ADIRONDACK COUNCIL, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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		<u> </u>
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		<u> </u>
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		X X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X X
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		X X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11a</u>	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			- v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	A	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	А	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
h	Schedule D, Parts XI and XII	<u>12a</u>	-11	<u> </u>
D		106		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
	Did the energia tion maintain an efficiency and so and so this is a file of the United Obstan O	14a		X
14а ь		140		- 23
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		x

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THE ADIRONDACK COUNCIL, INC. 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		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		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00		x
00	"Yes," complete Schedule L, Part IV	28c 29	Х	<u> </u>
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	л	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
24	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	- 55		
54		34		x
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	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?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		x
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		x
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	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 19			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
~	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
-			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 27			
L	, , , , , , , , , , , , , , , , , , , ,	Oh	х	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b 3a	<u>л</u>	x
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" to line 3b, provide an explanation on Schedule O	3b		- 23
	It "Yes," has it filed a Form 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O	55		<u> </u>
Tu	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country	104		
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	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			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		- v
		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		x
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		- 23
g h	If the organization received a contribution of qualified intellectual property, did the organization life rorm 8099 as required?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
Ũ	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 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
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.	- 10		
а	•	13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
U	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		<u> </u>
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		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	_		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

THE ADIRONDACK COUNCIL, INC.

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

Check if Schedule O contains a resp	onse or note to any	/ line in this Part VI	
oncorring a resp	01130 01 11010 10 411		

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
74	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	10		
D		7b	х	
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	70	- 21	
8		0-	Х	
a	The governing body?	8a 0h	X	
a	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	•		x
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		~	<u>.</u>
10-		40-	Yes	<u>No</u> X
	Did the organization have local chapters, branches, or affiliates?	10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		77	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY, AL, AK, AR, CA, CO, CT, FL, GA	,IL,	HI,	KS
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only) a	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			

19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflict of interest	policy, and	financial
	statements available to the public during the tax year.			

20	State the name, address, and telephone number of the person who possesses the organization's books and records
	ELAINE BURKE - 518-873-2240

F

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box.	box, unless person is both an		compensation	compensation	amount of			
	week		officer and a director/trustee)		from	from related	other			
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	organizations below	ual tr	tional		n ploye	t com /ee	~	1099-NEC)		organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	ƙey employee	Highest compensated employee	Former			organizations
(1) WILLIAM C. JANEWAY	40.00	_		0	-		4			
EXECUTIVE DIRECTOR				х				171,192.	Ο.	29,867.
(2) RAUL AGUIRRE	40.00									
ACTING EXECUTIVE DIRECTOR				Х				122,883.	0.	26,585.
(3) ELAINE BURKE	40.00									
DIRECTOR OF OPERATIONS				Х				91,137.	0.	25,136.
(4) MARY BIJUR	1.00									
DIRECTOR		Х						0.	0.	0.
(5) KURT ABRAHAMSON	4.00									
DIRECTOR		Х						0.	0.	0.
(6) DAVID E. BRONSTON	1.00									
DIRECTOR		Х						0.	0.	0.
(7) ANN E. CARMEL	6.00									
DIRECTOR		Х						0.	0.	0.
(8) DIANE W. FISH	1.00									
DIRECTOR		Х						0.	0.	0.
(9) DOUG STEWART	1.00									
DIRECTOR		Х						0.	0.	0.
(10) LAUREL SKARBINSKI	1.00									
DIRECTOR		Х						0.	0.	0.
(11) KATE RUSSELL	1.00									
DIRECTOR		Х						0.	0.	0.
(12) GEORGINA CULLMAN, PH.D.	4.00									
DIRECTOR		х						0.	0.	0.
(13) CHARLES D. CANHAM, PH.D.	4.00									
DIRECTOR		Х						0.	0.	0.
(14) ROBERT J. KAFIN	6.00									
DIRECTOR		Х						0.	0.	0.
(15) DANIEL J. RYTERBAND	1.00									
DIRECTOR		Х						0.	0.	0.
(16) BRIAN RUDER	4.00									_
DIRECTOR		Х						0.	0.	0.
(17) JOHN RESCHOVSKY	4.00									_
DIRECTOR		Х						0.	0.	0.

Form 990 (2022) THE ADIRC	NDACK C	<u>'OU</u>	NC	IL	· /	IN	с.	1	14-1594	1386	Pa	age 8
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloye	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A) (B) (C)				(D)	(E)		(F)					
Name and title	Average			Pos	ition			Reportable	Reportable		imate	d
	hours per	(do not check more than one box, unless person is both an						compensation	compensation		amount of	
	week					or/trust		from	from related	c	other	
	(list any	ctor						the	organizations	comp	ensat	tion
	hours for	r dire				ed		organization	(W-2/1099-MISC/	fro	m the	Э
	related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	orga	nizati	on
	organizations	al trus	nal tr		loyee	e e		1099-NEC)			relate	
	below	ndividual trustee or director	n stit utio nal trustee	Officer	emp	Highest compensated employee	Former			orgar	nizatio	ons
	line)	Ind	Ins	Offi	Key	Hig em	For			_		
(18) PHILIP R. FORLENZA	4.00								_			
DIRECTOR		Х						0.	0.	<u> </u>		0.
(19) JEROME PAGE	1.00											
DIRECTOR		Х						0.	0.	<u> </u>		0.
(20) JUSTIN POTTER	1.00											
DIRECTOR		Х						0.	0.			0.
(21) NOAH SHAW	1.00											
DIRECTOR		Х						0.	0.			0.
(22) RUSH HOLT, PH.D.	1.00											
DIRECTOR		Х						0.	0.			0.
(23) MICHALE GLENNON, PH.D.	1.00									T		
DIRECTOR		Х						0.	0.			0.
(24) ERIC W. LAWSON	2.00											
DIRECTOR		Х						0.	0.			Ο.
(25) DOUGLAS SCHULTZ	1.00											
INCOMING TREASURER		х						0.	0.			Ο.
(26) SARAH C. HATFIELD	20.00									1		
CHAIR		х		х				0.	0.			Ο.
1b Subtotal				385,212.	0.		.,58					
c Total from continuation sheets to Part VI							•	0.	0.		,	0.
d Total (add lines 1b and 1c)								385,212.	0.	_	.,58	38.
2 Total number of individuals (including but no								· · ·			1	
compensation from the organization		000		u un		,	010					2
compendation nom the organization											Yes	No
3 Did the organization list any former officer,	director trust	oo k		mnl		e or	hia	hest compensated empl				
										3		Х
line 1a? If "Yes," complete Schedule J for stFor any individual listed on line 1a, is the su												
										4	x	
and related organizations greater than \$1505 Did any person listed on line 1a receive or a										-4		
	•							•	iual ior services	5		х
rendered to the organization? <i>If</i> "Yes," <i>com</i> Section B. Independent Contractors	blete Schedule	e J fo	or su	ich į	oers	on .				5		<u></u>
•	nnoncotod ind	000	adar	-+	t.v	ootor		at received more than f	100 000 of company		~~	
1 Complete this table for your five highest con the experimentary Depart componential for t	•	•							•	ation from	TI	
the organization. Report compensation for t	ne calendar ye	ear e	nair	ig w		or wi	<u>tnin</u>		ear.	(0)		
(A) Name and business	address	NC	ONE	7				(B) Description of s	ervices	(C) Compen		h
		110		-			-	2000.10.000				<u> </u>
							-					
							_					
							\dashv					
• Tabalasanaka (1.1. 1.1. 1.1. 1.1.	al al color							- k				
2 Total number of independent contractors (ir	icluding but no	ot lin	nitec	to to	tnos	se lis	τed	above) who received mo	ore than			

Form 990 THE ADIRC	NDACK C	:0U	NC	IL	',	IN	c.		14-159	4386		
		nplo	yee			ligh	est (Compensated Employees (continued)				
(A) Name and title	(B) Average hours	(C) Position (check all that apply)				ly)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other			
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(27) ETHAN WINTER SECRETARY	4.00	x		x				0.	0.	0.		
(28) CURTIS R. WELLING TREASURER	5.00	x		x				0.	0.	0.		
(29) LIZA COWAN	4.00											
VICE CHAIR		X		X				0.	0.	0.		
Total to Part VII, Section A, line 1c												

	<u>1 990 (</u>				CK COUNCI	L, INC.		14-1594	386 Page 9
Pa	rt VII								
		Check if Schedule O	contains	a response	e or note to any lir			(0)	
						(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue	function revenue	business revenue	from tax under
									sections 512 - 514
nts nts	1 a	Federated campaigns				4			
àrai our	b					4			
Contributions, Gifts, Grants and Other Similar Amounts	С	• • • • • • • • • • • • • • • • • • • •			5,850.	-			
Gift lar	d	Related organizations		. 1d		4			
imi	е	Government grants (contr				4			
er S	f	All other contributions, gifts,							
ibu		similar amounts not included			<u>,737,427.</u>	-			
ontr of O	g	Noncash contributions included in			177,772.				
<u>a Ö</u>	h	Total. Add lines 1a-1f				2,743,277.			
					Business Code				
ce	2 a								
ervi	b								
n Si	С								
Program Service Revenue	d								
rog	е								
Ъ	f	All other program service							
	g	Total. Add lines 2a-2f							
	3	Investment income (inclue				166 600			166 600
						166,608.			166,608.
	4	Income from investment of		-	-				
	5	Royalties	· · · · · · · · · · · · · · · · · · ·	() D I					
		_		(i) Real	(ii) Personal	-			
		Gross rents		21,300		-			
	b	Less: rental expenses		5,810		4			
	c	Rental income or (loss)	6c	5,490		E 400			E 400
	d		s)) Securities	(ii) Oth er	5,490.			5,490.
	7 a	Gross amount from sales of		26,903		-			
		assets other than inventory	7a ± 2	10,903	•	-			
•	b	Less: cost or other basis		00 2 2 0 0					
venue		and sales expenses		87,390 89,513	•	-			
		Gain or (loss)				39,513.			20 512
r B		Net gain or (loss)				59,515.			39,513.
Other Re	8 a	Gross income from fundraisi including \$5	-						
0									
		contributions reported on	-		3,028.				
	h	Part IV, line 18							
		Net income or (loss) from				-7,505.			-7,505.
		Gross income from gamir				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	5 a	Part IV, line 19	-						
	h	Less: direct expenses							
		Net income or (loss) from			5				
		Gross sales of inventory,							
	10 4	and allowances			a 19,070.				
	b	Less: cost of goods sold							
		Net income or (loss) from		····· <u> </u>		19,070.	19,070.		
			20,00 01		Business Code	,			
sno	11 a	MISCELLANEOUS	S INC	OME	900099	59.	59.		
Miscellaneous Revenue	b								
ella ver	c								
lsci Be	d	All other revenue							
Σ	e	Total. Add lines 11a-11d				59.			
	12	Total revenue. See instruction				2,966,512.	19,129.	0.	204,106.

THE ADIRONDACK COUNCIL, Part IX Statement of Functional Expenses

1		Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	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	466,800.	396,780.	56,016.	14,004
	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	1,166,933.	991,892.	140,032.	35,009
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	45,570.	38,735.	5,468.	1,367 6,552 3,497
9	Other employee benefits	218,410.	185,649.	26,209.	6,552
0	Payroll taxes	116,562.	99,076.	13,989.	3,497
	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
	Advertising and promotion	168,481.	149,161.	16,015.	3,305
	Office expenses	151,520.	128,792.	18,183.	4,545
	Information technology			,	•
	Royalties				
	Occupancy	60,797.	50,168.	8,503.	2,126
	Travel	84,475.	71,804.	10,137.	2,534
	Payments of travel or entertainment expenses	01/1/01	, 1,0010		2,331
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	· · · · · · · · · · · · · · · · · · ·				
	Payments to affiliates	7,093.	5,323.	1 / 20	332
	Depreciation, depletion, and amortization	2,491.	5,343.	1,438. 2,491.	334
		2,491.		2,491.	
	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.)	220 656	150 012	00 (42	
	PROFESSIONAL FEES	239,656.	159,013.	80,643.	2 402
	PRINTING AND PUBLICATIO	113,428.	96,414.	13,611.	3,403
	EQUIPMENT RENTAL	71,117.	60,449.	8,534.	2,134
	DUES, FEES AND LICENSES	31,522.	6,565.	22,420.	2,537
	All other expenses	48,879.	33,339.	15,111.	429
5	Total functional expenses. Add lines 1 through 24e	2,993,734.	2,473,160.	438,800.	81,774
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

INC.

THE ADIRONDACK COUNCIL, INC	•
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14-1594386 Page 11

		Dalance Sheet							
		Check if Schedule O contains a response or not	e to any	line in this Part X					
					(A) Beginning of year		(B) End of year		
	4	Cash pap interact bearing			1,046,889.	1	1,095,369.		
	1				103,562.	2	3,147.		
	2	Savings and temporary cash investments			46,608.		19,000.		
	3	Pledges and grants receivable, net			40,000.	3 4	0.		
	4	Accounts receivable, net			112.	4	0•		
	5	Loans and other receivables from any current or							
		trustee, key employee, creator or founder, subst				5			
	6	controlled entity or family member of any of thes				5			
	0	Loans and other receivables from other disqualit under section 4958(f)(1)), and persons described				6			
	7					7			
Assets		Notes and loans receivable, net			29,063.	8	36,626.		
Ass	8	Inventories for sale or use Prepaid expenses and deferred charges			2,799.	9	6,899.		
		Land, buildings, and equipment: cost or other			2,155.	9	0,055.		
	IUa	basis. Complete Part VI of Schedule D	102	466,831.					
	h	Less: accumulated depreciation		209,662.	250,892.	10c	257,169.		
	11	Investments - publicly traded securities			6,685,458.	11	7,719,753.		
	12	Investments - other securities. See Part IV, line 1			3,028.	12	3,028.		
	12	Investments - program-related. See Part IV, line			5,020.	13	5,020.		
	14					14			
	15	Intangible assets Other assets. See Part IV, line 11			731,090.	15	994,240.		
	16	Total assets. Add lines 1 through 15 (must equ			8,899,831.	16	10,135,231.		
	17	Accounts payable and accrued expenses			123,336.	17	126,679.		
	18	Grants payable				18			
	19	Deferred revenue			7,750.	19	18,525.		
	20	Tax-exempt bond liabilities			.,	20			
	21	Escrow or custodial account liability. Complete I				21			
	22	Loans and other payables to any current or form							
Liabilities		trustee, key employee, creator or founder, subst							
bili		controlled entity or family member of any of the				22			
Lia	23	Secured mortgages and notes payable to unrela				23			
	24	Unsecured notes and loans payable to unrelated				24			
	25	Other liabilities (including federal income tax, pa							
		parties, and other liabilities not included on lines							
		of Schedule D	,		0.	25	199,281.		
	26				131,086.	26	344,485.		
		Organizations that follow FASB ASC 958, che							
sec		and complete lines 27, 28, 32, and 33.							
anc	27	Net assets without donor restrictions			8,265,711. 503,034.	27	<u>9,263,787.</u> 526,959.		
Bal	28	Net assets with donor restrictions	Net assets with donor restrictions						
pu		Organizations that do not follow FASB ASC 9							
Ъ		and complete lines 29 through 33.							
S O	29	Capital stock or trust principal, or current funds				29			
set	30	Paid-in or capital surplus, or land, building, or ec				30			
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in	come, o	r other funds		31			
Net	32	Total net assets or fund balances			8,768,745.	32	9,790,746.		
	33				8,899,831.	33	10,135,231.		

Form **990** (2022)

Part X | Balance Sheet

Form	000	(ว∩วว
FOIIII	990	2022

Form	1990 (2022) THE ADIRONDACK COUNCIL, INC.	14-15	94386	Pag	_{ge} 12
	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	2,966	5,51	12.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,993	3,73	34.
3	Revenue less expenses. Subtract line 2 from line 1	3	-27	7,22	22.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,768	3,74	45.
5	Net unrealized gains (losses) on investments	5	1,049),22	23.
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	9,790),74	46.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				1
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. <u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Nan	ne of t	the organization					1		identification number	
				COUNCIL, INC					4-1594386	
Pa	irt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	•		
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	neck only (one box.)				
1		A church, convention of ch					1)(A)(i).			
2	\square	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3	\square	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	H	• •					•	iii) Entor	the hospital's name	
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:									
_										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
		section 170(b)(1)(A)(iv). (Complete Part II.)								
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X	An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from the	e general p	oublic described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a la	and-grant	college	
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of th	ne college	or	
		university:								
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership	o fees, and	d gross receipts from	
		activities related to its exem		••			•		•	
		income and unrelated busir							-	
		See section 509(a)(2). (Con				looo doqui	iou by the orga	anzation a		
11		An organization organized a		vely to test for public sa	intu Soo	section 50	NO(a)(4)			
12	H	An organization organized a	-	•	•			v out tho	nurneses of one or	
12		more publicly supported or	•		•			-		
			-							
_		lines 12a through 12d that	• •					-	- ii	
а		Type I. A supporting orga	-		• • • •	-				
		the supported organization			majority o	of the direc	ctors or trustees	s of the su	ipporting	
_		organization. You must o	-							
b		Type II. A supporting org	-				-		-	
		control or management o			ame perso	ns that co	ntrol or manage	e the supp	ported	
		organization(s). You mus	-							
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally	integrate	d with,	
	_	its supported organization	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.			
d		Type III non-functionally	integrated. A supp	porting organization oper	ated in cor	nnection w	vith its supporte	ed organiz	ation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and a	an attentiv	veness	
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	v .			
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II,	Type III		
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.				
f	Ente	er the number of supported o	organizations							
g		vide the following informatior					•			
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of n		(vi) Amount of other	
		organization		above (see instructions))	Yes	No	support (see ins	tructions)	support (see instructions)	
_										
Tota	al									

THE ADIRONDACK COUNCIL, INC.

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.")	1859833.	2288254.	3147459.	2503863.	2743277.	12542686.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1859833.	2288254.	3147459.	2503863.	2743277.	12542686.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						887,715.
6	Public support. Subtract line 5 from line 4.						11654971.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	1859833.	2288254.	3147459.	2503863.	2743277.	12542686.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	94,156.	142,010.	109,255.	142,276.	172,098.	659,795.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	-7,672.					-7,672.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	324.	513.	267,316.	19.	59.	268,231.
11	Total support. Add lines 7 through 10						13463040.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	162,972.
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stop	ohere					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	olumn (f))		14	86.57 %
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	93.64 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	
	$\ensuremath{ \text{stop} here.}$ The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, cheo	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2022

		υ	А

Schedule A (Form 990) 2022 Part III Support Schedule for Organizations Described in Section 509(a)(2)

THE ADIRONDACK COUNCIL, INC.

(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.) Section 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	o							
	Total. Add lines 1 through 5							
<i>i</i> a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
D	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							
	Public support. (Subtract line 7c from line 6.)							
		() 00/0	(1) 00 / 0	() 0000	()) 000 (1 ,	1	(0)
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
~	Add lines 10a and 10b							
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital							
10	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 th	•					, .	·
800	check this box and stop here							·····
	•							
	Public support percentage for 2022 (column (f))		15		%
	Public support percentage from 2021					16		%
Sec	tion D. Computation of Inves	stment Income	e Percentage			· · ·		
17	Investment income percentage for 20	022 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17		%
	Investment income percentage from					18		%
	33 1/3% support tests - 2022. If the					<u> </u>	%, and line 1	
	more than 33 1/3%, check this box at							
h	33 1/3% support tests - 2021. If the	-	-					
J								
00	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization	on ala not check a	box on line 14, 19	a, or 190, check th	his box and see ins	structic	Dris	

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.)	
All Supporting Organizations	
of the organization's supported organizations listed by name in the organization's governing	
nents? If "No," describe in Part VI how the supported organizations are designated. If designated by	
or purpose, describe the designation. If historic and continuing relationship, explain.	1
e organization have any supported organization that does not have an IRS determination of status	
section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	
zation was described in section 509(a)(1) or (2).	2
e organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	
b and 3c below.	3a
e organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	
ed the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	
zation made the determination.	36
e organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	
ses? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	30
ny supported organization not organized in the United States ("foreign supported organization")? If	
and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a
e organization have ultimate control and discretion in deciding whether to make grants to the foreign	
rted organization? If "Yes," describe in Part VI how the organization had such control and discretion	
e being controlled or supervised by or in connection with its supported organizations.	4b
e organization support any foreign supported organization that does not have an IRS determination	
sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	
ure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	
	40
e organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	
r lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN	
ers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	
authority under the organization's organizing document authorizing such action; and (iv) how the action	5a
ccomplished (such as by amendment to the organizing document). or Type II only. Was any added or substituted supported organization part of a class already	Ja
nated in the organization's organizing document?	5b
itutions only. Was the substitution the result of an event beyond the organization's control?	50
e organization provide support (whether in the form of grants or the provision of services or facilities) to	
e other than (i) its supported organizations, (ii) individuals that are part of the charitable class	
ted by one or more of its supported organizations, or (iii) other supporting organizations that also	
rt or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	
	6
e organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	
fined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	
to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7
e organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?	
," complete Part I of Schedule L (Form 990).	8
ne organization controlled directly or indirectly at any time during the tax year by one or more	
lified persons, as defined in section 4946 (other than foundation managers and organizations described	
tion 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a
e or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	
pporting organization had an interest? If "Yes," provide detail in Part VI.	9b
disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	
assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	90
ne organization subject to the excess business holdings rules of section 4943 because of section	

Yes

No

10a

- 10a Was th 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated
 - 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.)

THE ADIRONDACK COUNCIL, INC.

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

Section A

Schedule A (Form 990) 2022

- 1 Are all docum class o
- 2 Did the under organi
- 3a Did the lines 3
- b Did the satisfie organi
- c Did the purpos
- 4a Was a "Yes,"
- b Did the suppo despit
- c Did the under to ens purpos
- 5a Did the answe numbe (iii) the was ac
- b Type I desigr
- c Substi
- 6 Did the anyone benefit suppo Part V
- Did the 7 (as de regard
- Did the 8 If "Yes
- 9a Was th disqua in sect
- b Did on the su
- c Did a d from, a
- supporting organizations)? If "Yes," answer line 10b below.

Part IV		
Schedule A (F	orm 990) 2022	THE

THE ADIRONDACK COUNCIL, INC.

2

			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		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization.	
Section C. Type II Supporting Organizations	

 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

 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 managed

 1
 1

Section D	. All Type III	Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- a ____ The organization satisfied the Activities Test. *Complete* line 2 *below.*
- **b** The organization is the parent of each of its supported organizations. *Complete* line 3 *below.*

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instruction <u>s).</u>
---	--	---	-------------------------	-----------------	---------------------	-----------------------------

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

No

Yes

2 Enter 0.85 of line 1.

4

6

7

Enter greater of line 2 or line 3.

5 Income tax imposed in prior year

instructions).

3 Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

hec ar	Hule A (Form 990) 2022 THE ADIRONDACK COUNCIL t V Type III Non-Functionally Integrated 509(a)(3) Supporti		zations	14-1594386 Pag
	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI) See instruction
	All other Type III non-functionally integrated supporting organizations mu			
ectio	on 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		
1	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
5	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		
3	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ectio	on 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		
ł	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		
,	Recoveries of prior-year distributions	7		
3	Minimum Asset Amount (add line 7 to line 6)	8		

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

2

3

4

5

6

Schedule A (Form 990) 2022

and 4c.

Sche	dule A (Form 990) 2022 THE ADIRONDAC	CK COUNCIL, INC	•	14	4-1594386 Pag
Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	the 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	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
а	Applied to direct distributions of prior years				
	Applied to 2022 distributable amount				
b					
b	Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4.				
b c	Applied to 2022 distributable amountRemainder. Subtract lines 4a and 4b from line 4.Remaining underdistributions for years prior to 2022, if				
b c	Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4.				

and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022

6 Page 7 THE ADIRONDACK COUNCIL, INC.

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME	
2018 AMOUNT: \$	324.
2019 AMOUNT: \$	513.
2020 AMOUNT: \$	267,316.
2021 AMOUNT: \$	19.
2022 AMOUNT: \$	59.

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

INC.

OMB No. 1545-0047

2022

Employer identification number

14-1594386

Schedule B	
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check or	1e):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

THE ADIRONDACK COUNCIL,

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2022)



THE A	4-1594386		
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$90,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 127,251.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>100,000.</u>	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$ <u>500,000.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>106,950.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
223452 11-15	5-22		Schedule B (Form 990) (2022)

Name of organization

Employer identification number

no. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
2	300 SHARES FACTSET RESEARCH SYSTMES, INC.		
		\$127,251.	02/01/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
3453 11-1	5-22	Ψ	Schedule B (Form 990) (2022)

THE ADIRONDACK COUNCIL, INC.

Schedule B (Form 990) (2022) Name of organization

(a)

No.

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

(b)

(c)

Employer identification number

(d)

14-1594386

Page 3

Schedule	B (Form 990) (2022)		Page 4				
Name of c	organization		Employer identification number				
THE A	DIRONDACK COUNCIL, INC.		14-1594386				
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, o Use duplicate copies of Part III if additionals	through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif	t				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
	(e) Transfer of gift						
	Transferee's name, address, a		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(_) Tu					
	Transferee's name, address, a	(e) Transfer of gif nd ZIP + 4	Relationship of transferor to transferee				

SCHEDULE C	Political Campaign and Lobbying Activities				C	OMB No. 1545-0047		
(Form 990)	For Org	or Organizations Exempt From Income Tax Under section 501(c) and section 527			07		202	2
		if the organization is described b					LUL	L
Department of the Treasury Internal Revenue Service	-	to www.irs.gov/Form990 for ins			0-22.		Open to Pu Inspectio	
					ainn Aa		•	
•		Form 990, Part IV, line 3, or Form plete Parts I-A and B. Do not com		ie 46 (Political Camp	baign Ac	tivities	s), then	
		11(c)(3)) organizations: Complete P		Do not complete Par	+ I.B			
 Section 501(c) (other Section 527 organization 			ants I-A and C below.	Do not complete Par	ι I-D.			
U U	•	Form 990, Part IV, line 4, or For	m 990-E7 Part VI lii	ne 47 (Lobbying Act	ivitios) t	hen		
		nave filed Form 5768 (election und					art II-R	
		nave NOT filed Form 5768 (election		-	-			
		Form 990, Part IV, line 5 (Proxy						
Tax) (See separate inst		······································		,		.,	.,	(,
 Section 501(c)(4), (5) 	, or (6) organizat	ions: Complete Part III.						
Name of organization					Employ	/er ide	ntification I	number
	THE ADI	RONDACK COUNCIL, I	INC.			14-	159438	6
Part I-A Comple	ete if the org	anization is exempt under	section 501(c) o	or is a section 52	27 orga	iniza	tion.	
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities ir	n Part IV.				
		ures			\$			
		gn activities						
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3	3).				
1 Enter the amount o	f any excise tax	incurred by the organization under	section 4955		\$ _			
2 Enter the amount o	f any excise tax	incurred by organization managers	under section 4955		\$ _			
3 If the organization i	ncurred a section	n 4955 tax, did it file Form 4720 fo	r this year?			. 🗆	Yes	No
4a Was a correction m	ade?						Yes	No
b If "Yes," describe ir	n Part IV.							
Part I-C Comple	ete if the org	anization is exempt under	section 501(c),	except section &	501(c)(3).		
1 Enter the amount d	irectly expended	l by the filing organization for secti	on 527 exempt functi	ion activities	\$ _			
2 Enter the amount o	f the filing organ	ization's funds contributed to othe	r organizations for se	ction 527				
exempt function ac					\$_			
3 Total exempt functi	on expenditures	. Add lines 1 and 2. Enter here and	on Form 1120-POL,					
		1120-POL for this year?					Yes	No
		ployer identification number (EIN)						on
		tion listed, enter the amount paid f						
		omptly and directly delivered to a s additional space is needed, provid			eparate s	segreg	ated fund or	a
		• • •	1	1				
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid filing organizatio		• •	mount of po utions recei	
				funds. If none, ent			nptly and di	
							ered to a ser	
							ical organiza none, enter	
								<u> </u>

Schedule C (Form 990) 2022 Part II-A Complete if the org	THE ADIRC)ND	ACK COUNCIL	, INC. $501(c)(3)$ and file	<u>14-1</u> d Form 5768 (ele	594386 Page 2	
section 501(h)).							
A Check if the filing organiza	tion belongs to a	n affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,	
	expenses, and share of excess lobbying expenditures). B Check if the filing organization checked box A and "limited control" provisions apply.						
B Check if the filing organiza	tion checked box	(A ar	nd "limited control" pro	visions apply.	() =···		
	ts on Lobbying E ditures" means a		nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to influ	uence public opin	ion (g	grassroots lobbying)				
b Total lobbying expenditures to influ	uence a legislative	e bod	y (direct lobbying)		27,759.		
c Total lobbying expenditures (add lii	nes 1a and 1b)				27,759.		
d Other exempt purpose expenditure	es				2,965,975.		
e Total exempt purpose expenditures	s (add lines 1c ar	nd 1d))		2,993,734.		
f Lobbying nontaxable amount. Ente	er the amount from	m the	following table in both	n columns.	299,687.		
If the amount on line 1e, column (a) o	r (b) is: Th	e lob	bying nontaxable am	ount is:			
Not over \$500,000	20	% of t	the amount on line 1e.				
Over \$500,000 but not over \$1,000	0,000 \$1	00,00	0 plus 15% of the exce	ess over \$500,000.			
Over \$1,000,000 but not over \$1,5	00,000 \$1	75,00	0 plus 10% of the exce	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17,	000,000 \$2	25,00	0 plus 5% of the exces	ss over \$1,500,000.			
Over \$17,000,000	\$1	,000,0	000.				
g Grassroots nontaxable amount (en	ter 25% of line 1f)			74,922.		
h Subtract line 1g from line 1a. If zero	o or less, enter -0				0.		
i Subtract line 1f from line 1c. If zero	o or less, enter -0-				0.		
j If there is an amount other than zer	ro on either line 1	h or l	ine 1i, did the organiza	tion file Form 4720			
reporting section 4911 tax for this	year?					Yes No	
	4-Yea	r Ave	eraging Period Under	Section 501(h)			
(Some organizations the second s			D1(h) election do not l ate instructions for lir	•	of the five columns be	low.	
	Lobbying E	xper	nditures During 4-Yea	r Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2019		(b) 2020	(c) 2021	(d) 2022	(e) Total	
2a Lobbying nontaxable amount	263,01	.0.	277,962.	297,214.	299,687.	1,137,873.	
b Lobbying ceiling amount (150% of line 2a, column(e))						1,706,810.	
c Total lobbying expenditures	8,84	<u>1</u> 7.	3,792.	11,011.	27,759.	51,409.	
d Grassroots nontaxable amount	65,75	53.	69,491.	74,304.	74,922.	284,470.	
e Grassroots ceiling amount							
(150% of line 2d, column (e))						426,705.	
f Grassroots lobbying expenditures							

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 THE ADIRONDACK COUNCIL, INC. 14-15943 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the lobbying activity.	Yes	No	Amo	ount
 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? 				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
 h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? 				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), or sec	tion	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	'No" OR	(b) Part I	II-A, line	3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
expenses for which the section 527(f) tax was paid).				
a Current year				
b Carryover from last year		2 b		
c Total		2c		
		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (See	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
STATE OF NEW YORK PARTIES LOBBIED: THE NYS SENATE AND	ASSEM	BLY, G	OVERNC	R'S
OFFICE, NYS DEPARTMENT OF ENVIRONMENTAL CONSERVATION,	ADIRON	IDACK	PARK	
AGENCY, ENVIRONMENTAL FACILITIES CORPORATION, LAKE GEO	RGE PZ	ARK CO	MMISSI	ON;
FEDERAL (WASHINGTON, DC) PARTIES LOBBIED: US REP PAUL	TONKO	, US S	ENATE	
MAJORITY LEADER CHARLES SCHUMER, US SENATOR KIRSTEN GI	LLIBRA	AND, U	S	

Schedule C (Form 990) 20		ADIROND	ACK CC	DUNCIL,	INC.		-	L4-159	94386	Page 4
Part IV Suppleme	ntal Information	(continued)								
ENVIRONMENTAL	PROTECTION	AGENCY	(EPA)	, PRESI	DENT	JOSEPH	BIDEN	WERE	LOBBI	ED

ON THE FOLLOWING TOPICS IN REGARDS TO BILLS AND ISSUES PERTAINING TO

ADIRONDACK ENVIRONMENTAL CONSERVATION AND PRESERVATION FROM JULY 2022 TO

JUNE 2023:

ADIRONDACK CLEAN WATER INFRASTRUCTURE AND FUNDING

ENVIRONMENTAL PROTECTION FUND (EPF)

WILDLIFE KILLING CONTEST

WILDLIFE CROSSINGS ACT

BIRDS AND BEES PROTECTION ACT

DEBAR LODGE

MT. VAN HOEVENBERG

ALL-TERRAIN VEHICLES (ATV) MINIMUM AGE

TIMBUCTOO SUMMER CLIMATE AND CAREER INSTITUTE

SURVEY OF CLIMATE CHANGE AND ADIRONDACK LAKES ECOSYSTEMS (SCALE)

VISITOR USE MANAGEMENT FRAMEWORK

SEPTIC SYSTEM REPLACEMENT FUNDING

ADIRONDACK ROAD SALT REDUCTION TASK FORCE FUNDING

SAVE MORIAH SHOCK INCARCERATION FACILITY

NATIONAL AMBIENT AIR QUALITY STANDARDS

US EPA SCIENCE & TECHNOLOGY BUDGET

CLEAN AIR STATUS AND TRENDS NETWORK OPERATIONS & FUNDING

MILITARY TRAINING INSIDE THE ADIRONDACK PARK

(Form 990) Complete if the organ Part IV, line 6, 7, 8, 9, 10,		ental Financial Statemen organization answered "Yes" on Form 99 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or	0,			20	1 545-0047 22		
Department of the Treasury Attach to Form 990. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the form of the service			Attach to Form 990. rm990 for instructions and the latest inform	mation.			Open t Inspec	to Public	
	e of the organizati					Emp	ployer i	dentificati	
	-			COUNCIL, INC.				-1594	
Par			ntaining Donor Ad Yes" on Form 990, Part	vised Funds or Other Similar Fund IV, line 6.	ds or Acc	coun	n ts. c	omplete if	the
				(a) Donor advised funds	(b) Fun	ids and	other acco	ounts
1	Total number at er	d of year							
2			s to (during year)						
3	Aggregate value o	grants from	(during year)						
		-	· ········						
4	Aggregate value a	•							
4 5		end of year			lvised funds	6			
•	Did the organization	end of year n inform all d	onors and donor adviso				[Yes	N
•	Did the organization are the organization	end of year n inform all d n's property,	onors and donor adviso subject to the organizat	rs in writing that the assets held in donor ad			[Yes	N
5	Did the organization are the organization Did the organization	end of year n inform all d n's property, n inform all g	onors and donor adviso subject to the organizat rantees, donors, and do	rs in writing that the assets held in donor ad ion's exclusive legal control?	be used on	ly	[Yes	N
5	Did the organization are the organization Did the organization for charitable purp impermissible priv	end of year n inform all d n's property, n inform all g oses and not ate benefit?	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do	rs in writing that the assets held in donor ad- ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos	be used on se conferrin	ly ng	[Yes	
5	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv	end of year n inform all d n's property, n inform all g oses and not ate benefit?	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 99	be used on se conferrin	ly ng	[
5	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserver Purpose(s) of conserver	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply).	be used on se conferrin 0, Part IV, li	ly ng ine 7.	[Yes	N
5 6 Par	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease of land for pu	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply). ecreation or education)	be used on se conferrin 10, Part IV, li n of a histor	ly ng ine 7. rically	importa	Yes	N
5 6 Par	Did the organization are the organization Did the organization for charitable purp impermissible privi- t II Conserv Purpose(s) of conservation Preservation Protection of	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease of land for pu f natural habit	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re tat	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply).	be used on se conferrin 10, Part IV, li n of a histor	ly ng ine 7. rically	importa	Yes	N
5 6 Par 1	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation Protection on Preservation	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease of land for pu f natural habit of open space	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re tat	rs in writing that the assets held in donor ad- ion's exclusive legal control? nor advisors in writing that grant funds can be nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 99 nization (check all that apply). ecreation or education) Preservation Preservation	be used on se conferrin 0, Part IV, li n of a histor n of a certifi	ly ng ine 7. ically ed his	importa	Yes	N
5 6 Par 1	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation Proservation Protection on Preservation Complete lines 2a	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease of land for pu f natural habit of open space through 2d if	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re tat	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply). ecreation or education)	be used on se conferrin 0, Part IV, li n of a histor n of a certifi	ly ng ine 7. ically ed his	importa storic st	Yes ant land are ructure sement on	ea the last
5 6 Par 1	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation Preservation Protection on Preservation Complete lines 2a day of the tax year	end of year n inform all d n's property, n inform all g oses and not <u>ate benefit?</u> ation Ease of land for pu f natural habit of open space through 2d if	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re- tat ce the organization held a	rs in writing that the assets held in donor ad- ion's exclusive legal control? nor advisors in writing that grant funds can be nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 99 nization (check all that apply). ecreation or education) Preservation Preservation	be used on se conferrin 0, Part IV, li n of a histor n of a certifi	ly ig ine 7. ically ed his serva	importa storic st	Yes	ea the last
5 6 Par 1 2 a	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation Preservation Preservation Complete lines 2a day of the tax years Total number of conservation	end of year n inform all d n's property, n inform all g oses and not <u>ate benefit?</u> ation Ease of land for pu f natural habit of open spac through 2d if nservation ea	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re- tat ce the organization held a asements	rs in writing that the assets held in donor ad- ion's exclusive legal control? nor advisors in writing that grant funds can be nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 99 nization (check all that apply). ecreation or education) Preservation Preservation	be used on se conferrin 0, Part IV, li n of a histor n of a certifi rm of a con	ly ine 7. rically ed his servat	importa storic st	Yes ant land are ructure sement on	ea the last
5 6 Par 1	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation Preservation Preservation Complete lines 2a day of the tax year Total number of conservation	end of year n inform all d n's property, n inform all g oses and not <u>ate benefit?</u> ation Ease of land for pu f natural habit of open space through 2d if mservation ease icted by cons	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re tat the organization held a asements servation easements	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply). ecreation or education) Preservation Preservation qualified conservation contribution in the for	be used on se conferrin 0, Part IV, li n of a histor n of a certifi rm of a cons	ly ine 7. rically ed his servat 2a 2b	importa storic st	Yes ant land are ructure sement on	ea the last
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4 Number of states where property subject to conservation easement is located

5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of
	violations, and enforcement of the conservation easements it holds?
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the	e year
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8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	🗌 No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and	

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of	
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,	,
	provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1 \$	

		Ψ
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provid	e
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	\$

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

Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets <i>(continued)</i> a Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its a — Pable orbitation d Lean or exchange program b Bit orbitation e Other c Provide a description of the organization solections and explain how they further the organization's occurred to receive donations of art, historical treasures, or other similar assets to be sold to receive donations of art, historical treasures, or other similar assets to be sold to registration is acquired as part of the organization's collection? Yes No. Part III Escrow and Custodial Arrangements. Complete the following table: Yes No. d Ist the organization and using the organization's acquired to a mount on form 900, Part X ist 21. Yes No. d Interval explain the arrangement in Part XIII and complete the following table: Yes No. d Interval explain the arrangement in Part XIII. Chack here if the arganization and the organization and the site asset in the organization and the organization and the arrangement in Part XIII. Chack here if the arganization and the organization and the organization. Yes No.	_		RONDACK COU					4-15			age 2
collection terms (check all that apply): 	Par	t III Organizations Maintaining Co	ollections of Art,	, Historical Tre	asures, or O	ther S	Similar	Assets	contin	nued)	
a Public exhibition d □ can or exchange program b Scholary research e □ Other	3	Using the organization's acquisition, accessio	n, and other records	, check any of the f	following that ma	ike sign	ificant us	se of its			
b Scholarly research e Other c Preservation for future generations Provide a description of the organization scolections and explain how they further the organization's exempt purpose in Part XIII. 5 Uning the year, dd the organization scolection? Yes No Part V Escrow and Cutstodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Yes No b if "Yes," explain the arrangement in Part XIII and complete the following table: Amount Amount c Beginning balance 1e Amount 1e d Distributions during the year 1e 1e 1e 1e d Distributions during the year 1e		collection items (check all that apply):									
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funder funders on the manifamed as part of the organization answered "Yes" on Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization and or form 990, Part X, line 21. The second and Custodial Arrangements. Complete if the organization assets not included on Form 990, Part X? No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Armount Ted c Beginning balance 1 1 4 Ted Distributions during the year Int 1 1 1 4 Ted Distributions during the year Int 1	а	Public exhibition	d	Loan or exc	hange program						
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be add to raise funds rather than to be maintained as part of the organization's collection? Part W ESCOW and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 980, Part X, line 9, or reported an amount on Form 980, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Is a list organization angenet in Part XIII and complete the following table: Amount to d Additions during the year to d Distributions d Part XII decomplete if the organization narswered 'Yes' on Form 980, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 980, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 980, Part X, line 21, or escow or custodial account liability? Administrative expenses To 9, 137, To 22, 314, To 22, 659, 553, 963, 573, 033, 516, 656, Contributions d Carrent year ablance To 9, 137, To 29, 137,	b	Scholarly research	е	Other							
S During the year, did the organization solicit or receive donations of art, historical ressures, or other similar assets No Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 3, or reported an amount on Form 990, Part X, line 21. No Is Is the organization an agent, trustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part X? Image: Control of Contere control of Control of Control of	с	Preservation for future generations									
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Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X will and complete the following table: Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1d 1d 1d enditions during the year 1e 1e 1f "Hes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endopwater Funds. Complete if the organization answered "Yes" on Form 990, Part XII. Part V Endopwater Funds. Complete if the organization answered "Yes" on Form 990, Part XIII. Part V Endopwater Funds. Complete if the organization answered "Yes" on Form 990, Part XIII. Part V Endopwater Bunds. (a) Current year (b) Phor year (c) Tor years back (c) four year is cholarships	5	During the year, did the organization solicit or	receive donations of	f art, historical treas	sures, or other si	milar as	sets				
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on Form 990, Part X2 Yes No b If "Yes," explain the arrangement in Part XII and complete the following table: Amount c Beginning balance Amount d Additions during the year 1d e Distributions during the year 1d d Additions during the year 1t g Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part X (inthe Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part X (inthe Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part X (inthe Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part X (inthe Yes, "explain the arrangement in Part XIII. Check here if the explanation answered "Yes" on Form 990, Part IV, line 10. Part V End of year balance 12, 797, 131, 956, 80, 973, 573, 033, 516, 698, 513, 963, 573, 033, 516, 698, 513, 963, 573, 033, 200, 63, 025, contaitive expenses 70, 016, 723, 014, 723, 010, 01, 15, 000, 163, 023, 01, 000, 115, 000, 164, 030, 000, 15, 000, 164, 030, 000, 15, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 164, 000, 000, 100, 000, 000, 100, 000, 00	1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contribution:	s or other assets	not inc	luded				
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e Other expenditures for facilities and programs 34,000. 32,600. 31,000. 15,000. f Administrative expenses 790,187. 729,314. 782,669. 553,963. 573,033. g End of year balance 790,187. 729,314. 782,669. 553,963. 573,033. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 35.7200 % b Permanent endowment 27.3500 % % Term endowment 36.9300.% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations by: (i) Unrelated organizations 3a(i) X 3a(i) X (i) Unrelated organizations image: statistical science in ParX NII the intended uses of the organization's endowment funds. 3a(i) X 3a(ii) X 9 Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value 1a Land 100,000. 100,000. 100,000. 100,000. b Buildings 292,395. 148,6	С	Net investment earnings, gains, and losses	76,076.	152,751. 147,73310,070.						8,	312.
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4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation 1a Land 100,000. b Buildings 292,395. c Leasehold improvements 59,796. d Equipment 14,640. e Other 257,169.											
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b Buildings 292,395. 148,640. 143,755. c Leasehold improvements 59,796. 48,015. 11,781. d Equipment 14,640. 13,007. 1,633. e Other 70tal. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 257,169.		Description of property		ent) basis	(other)	• •			.,		
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d Equipment 14,640. 13,007. 1,633. e Other 70tal. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 257,169.	b	Buildings									
e Other Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 257, 169.	с	Leasehold improvements								-	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X. column (B), line 10c.)				1	4,640.	1	.3,00	7.		1,6	33.
									<u> -</u>		<u> </u>
	Tota	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part X	<u>, column (B), line 1</u>	0c.)					-	b9.

Schedule D (Form 990) 2022

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	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 end of year market value
			or one of your market value
(1)			
(2)	 [
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) BENEFICIAL INTEREST IN ASS	SETS HELD BY A	ADIRONDACK	
(2) FOUNDATION			790,18
(3) SECURITY DEPOSITS			1,77
<u> </u>	ATING LEASES		202,27
(5)			
(6)			
(7)			
(8)			
(9)			
	15)		
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	10.)		
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form QQD Dart V li	ne 25
(a) Description of lightlity			(b) Book value
•			
(1) Federal income taxes			
(2) LEASE LIABILITIES - OPERAT	TING		100.00
(3) LEASES			199,28
(4)			
(5)			
(6)			
(7)			
(8)			

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

Schedule D (Form 990) 2022 THE ADIRONDACK COUNCIL, INC. Part VII Investments - Other Securities.

ADIRONDACK COUNCIL, INC. 14-1594386 Page 3

Sche	dule D (Form 990) 2022 THE ADIRONDACK COUNCIL,	INC.		14-1	1594386	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	tements Wit	h Revenue per Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,042,	,078.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	1,049,223.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	1,049	<u>,223.</u>
3	Subtract line 2e from line 1			3	2,992,	,855 .
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	-26,343.			
с	Add lines 4a and 4b		4c	-26	,343.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.	<u>)</u>		5	2,966	,512.
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	atements Wi	th Expenses per	Returr	า.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.				
1	Total expenses and losses per audited financial statements			1	3,020	<u>,077.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	26,343.			
е	Add lines 2a through 2d			2e	26,	<u>,343.</u>
3	Subtract line 2e from line 1			3	2,993	,734.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		5	2,993	,734.
Pa	t XIII Supplemental Information.					

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

PART V, LINE 4:

THE FOREVER WILD FUND IS A QUASI-ENDOWMENT MANAGED TO PROVIDE SUSTAINABLE
INCOME FOR, AND TO SUPPORT, THE ADIRONDACK COUNCIL'S WORK INCLUDING
RESEARCH, MONITORING, EDUCATION, LEGAL ANALYSIS AND CONSERVATION PROJECTS
TO SECURE THE FUTURE OF THE ADIRONDACKS. WITH APPROVAL BY AT LEAST 3/4 OF
THE BOARD OF DIRECTORS, FUNDS IN ADDITION TO AN ANNUAL OPERATING
WITHDRAWAL OF UP TO 5% CAN BE USED FOR EXTRAORDINARY PURPOSES FOR LEGAL OR
OTHER EMERGENCY ACTION TO PROTECT THE INTEGRITY OF THE ADIRONDACK PARK,
THE "FOREVER WILD" CLAUSE OF THE NYS CONSTITUTION, AND/OR THE ECOLOGICAL
INTEGRITY OF THE ADIRONDACKS.

Schedule D (Form 990) 2022 THE ADIRONDACK COUNCIL, INC.	14-1594386 Page 5
Part XIII Supplemental Information (continued)	
THE COUNCIL IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE
INTERNAL REVENUE CODE. THE COUNCIL HAS ALSO BEEN CLASSIFIED	BY THE
INTERNAL REVENUE SERVICE AS AN ENTITY THAT IS NOT A PRIVATE	FOUNDATION.
UNDER FASB ASC 740, INCOME TAXES, THE TAX STATUS OF TAX-EXE	MPT ENTITIES IS
AN UNCERTAIN TAX POSITION, SINCE EVENTS COULD POTENTIALLY O	CCUR THAT
JEOPARDIZE TAX-EXEMPT STATUS. THE COUNCIL'S MANAGEMENT IS	NOT AWARE OF
ANY EVENTS THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS. TH	EREFORE, NO
LIABILITY OR PROVISION FOR INCOME TAX HAS BEEN REFLECTED IN	THE FINANCIAL
STATEMENTS.	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
EVENT EXPENSES	-10,533.
RENTAL EXPENSES	-15,810.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-26,343.
	<u>.</u>
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
EVENT EXPENSES	10,533.
RENTAL EXPENSES	15,810.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	26,343.

Internal Revenue Service	Go to w	ww.irs.gov/Form	1990 for instructions and the latest i	nformation.	Insp	ection
Name of the organization					Employer identi	fication number
THE ADIRONDACK	COUNCIL,	INC.			14-159438	36
		ctivities Out	side the United States. Compl	ete if the orgar	nization answered "	Yes" on
Form 990, Part IV						
-	-		ds to substantiate the amount of its gra		· · · · · · · · · · · · · · · · · · ·	Yes No
			he selection criteria used to award the			
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance out	side the
			n be duplicated if additional space is r			
(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		ivity listed in (d) gram service,	(f) Total expenditures
	in the region	employees, agents, and independent contractors	gram services, investments, grants to recipients located in the region)	describe	e specific type e(s) in the region	for and investments in the region
CENTRAL AMERICA AND		in the region			-	
THE CARIBBEAN -						
ANTIGUA & BARBUDA,				INVESTMENTS	S IN POOLED	
ARUBA, BAHAMAS,	0	0	INVESTMENTS	INTEREST		0.
i						
3 a Subtotal	0	0				0.
b Total from continuation						
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				0.

Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

Schedule F (Form 990) 2022

OMB No. 1545-0047

Open to Public

SCHEDULE F (Form 990)

Department of the Treasury

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of	recipient organizatior	ns listed above that are r	ecognized as charities by the t	foreign country,	recognized as a tax	1	1	
exempt 501(c)(3) orga	nization by the IRS, o	or for which the grantee of	or counsel has provided a sect	ion 501(c)(3) equ	vivalency letter	►		
3 Enter total number of other organizations or entities								

Schedule F (Form 990) 2022

14-1594386

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE J				OMB No. 1545-0047			47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key			20	22)
		Compensated Employe Complete if the organization answered "Yes" on			2022		-
Depa	tment of the Treasury	Attach to Form 990.	Form 990, Part IV, inte 23.		Open to		
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions ar	nd the latest information.		Inspection		
Nam	e of the organizatior			Employer i			mber
De		THE ADIRONDACK COUNCIL, INC.	•	14 - 1	59438	6	
Ра	rt I Question:	Regarding Compensation					
	<u>.</u>		· · · · -			Yes	No
1a		the box(es) if the organization provided any of the following to c		990,			
		ine 1a. Complete Part III to provide any relevant information re-					
	First-class or c		wance or residence for perso				
	Travel for com		or business use of personal re-				
			cial club dues or initiation fee				
		pending account Personal ser	vices (such as maid, chauffeu	ir, chei)			
h	If any of the bayes	n line 1a are checked, did the organization follow a written pol	iou regarding noumant or				
D	•	rovision of all of the expenses described above? If "No," compl	lata Daut III ta avertain		1b		
2		require substantiation prior to reimbursing or allowing expense					
2		s, including the CEO/Executive Director, regarding the items cl			2		
	trustees, and onice	s, including the CEO/Executive Director, regarding the items of			2		
3	Indicate which if an	v, of the following the organization used to establish the comp	ensation of the organization's				
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
establish compensation of the CEO/Executive Director, but explain in Part III.							
	Compensation		loyment contract				
	·		on survey or study				
	X Form 990 of of		the board or compensation c	ommittee			
				ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, wit	h respect to the filing				
-	organization or a re	•••••••••••••••••••••••••••••••••••••••					
а	-				4a		x
b		eive payment from a supplemental nonqualified retirement plan					X
с	-	eive payment from an equity-based compensation arrangement					X
	-	es 4a-c, list the persons and provide the applicable amounts fo					
	Only section 501(c	(3), 501(c)(4), and 501(c)(29) organizations must complete li	ines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pa	ay or accrue any compensatio	n			
	contingent on the re	venues of:					
а	The organization?				5a		X
b	Any related organiz	ition?			5b		X
		r 5b, describe in Part III.					
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pa	ay or accrue any compensatio	n			
	contingent on the n	•					
а	The organization?				6a		X
	Any related organiz	ition?					X
		r 6b, describe in Part III.					
7	-	n Form 990, Part VII, Section A, line 1a, did the organization pr	• • •				
		es 5 and 6? If "Yes," describe in Part III			7		X
8	Were any amounts	eported on Form 990, Part VII, paid or accrued pursuant to a c	ontract that was subject to th	ie			
		otion described in Regulations section 53.4958-4(a)(3)? If "Yes,			8		X
9		d the organization also follow the rebuttable presumption proc					
		53.4958-6(c)?					
LHA	For Paperwork Re	duction Act Notice, see the Instructions for Form 990.		Sched	ule J (Forn	n 990)) 2022

Schedule J (Form 990) 2022

14-1594386

Page **2**

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

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC		(D) Nontaxable benefits	benefits (B)(i)-(D)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) WILLIAM C. JANEWAY	(i)	171,192.	0.	0.	10,590.	19,277.	201,059.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(ii)							
	(i) (ii)							
	(i)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Schedule J (Form 990) 2022

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

. Inspection

2

20

Employer identification number

14 - 1594386

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

Department of the Treasury Internal Revenue Service

-	Attach to Form 990.	
	Attach to Form 990.	

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

Name of the organization

THE ADIRONDACK COUNCIL, INC.

Pa	rt I Types of Property				•		
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	•	nts
1	Art - Works of art			, , <u>,</u>			
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	X	13	177,772.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
10	trust interests						
12	Securities - Miscellaneous Qualified conservation contribution -						
13							
14	Historic structures Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other ()						
27	Other ()						
28	Other ()						
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions			
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement			
						Ye	s No
30a	During the year, did the organization receive by						
	must hold for at least 3 years from the date of t			•			
	exempt purposes for the entire holding period?						
	b If "Yes," describe the arrangement in Part II.						
31							
32a	Does the organization hire or use third parties of		•	· • ·		32a X	
Ŀ	contributions?					32a X	
	If "Yes," describe in Part II. If the organization didn't report an amount in co	olumn (a) fai	a tupo of property	(for which column (a) is show	skod		
33	describe in Part II.	olumni (C) foi	a type of property	nor which column (a) is che	sneu,		
	ucounde III Fait II.						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

ALL STOCK GIFTS ARE RECEIVED BY CHARLES SCHWAB AND SOLD WITHIN A FEW

DAYS OF RECEIPT AND THE FUNDS DEPOSITED IN THE SCHWAB MONEY MARKET

ACCOUNT.

232142 09-09-22

SCHEDULE O (Form 990)

Name of the organization

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.



14 - 1594386

THE ADIRONDACK COUNCIL, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE ADIRONDACK COUNCIL ENSURES THE ECOLOGICAL INTEGRITY (CLEAN WATER

AND AIR, WILDLIFE HABITAT, ETC.), WILD CHARACTER (SOLITUDE, SCENIC

BEAUTY, ETC.), AND VIBRANT COMMUNITIES OF NEW YORK'S SIX-MILLION-ACRE

ADIRONDACK PARK.

232211 10-28-22

THE ADIRONDACK PARK IS A PATCHWORK OF PUBLIC AND PRIVATE LANDS,

CREATING UNIQUE CHALLENGES AND OPPORTUNITIES TO CREATE EFFECTIVE MODELS

FOR LARGE-LANDSCAPE CONSERVATION.

THE ADIRONDACK COUNCIL ENVISIONS THE PARK WITH LARGE CORE WILDERNESS AREAS, CLEAN WATER AND AIR , SURROUNDED BY WORKING FARMS AND FORESTS, AND AUGMENTED BY VIBRANT COMMUNITIES. TO ACHIEVE OUR VISION, WE EDUCATE THE PUBLIC AND POLICY MAKERS; ADVOCATE FOR REGULATIONS, POLICIES AND FUNDING; MONITOR PROPOSALS, LEGISLATION AND POLICIES IMPACTING THE PARK; AND, TAKE LEGAL ACTION TO UPHOLD CONSTITUTIONAL PROTECTIONS AND AGENCY POLICIES.

TO MEET OUR GOALS AND DEFEND THE ADIRONDACK PARK, THE ADIRONDACK COUNCIL'S ADVOCACY EFFORTS ARE FOCUSED ON DIRECT THREATS TO THE ECOLOGY AND WILD CHARACTER OF THE ADIRONDACKS INCLUDING SHORELINE DEVELOPMENT AND WATER DEGRADATION, THE FRAGMENTATION OF LARGE BLOCKS OF WORKING FOREST LANDS, USE OF MOTOR VEHICLES IN WILD AREAS, ROAD IMPACTS, AND INAPPROPRIATE DEVELOPMENT OF RIDGELINES AND OPEN AGRICULTURAL LANDS. THE COUNCIL WORKS TO STRENGTHEN STAKEHOLDER GROUPS AND COALITIONS WITH COMMON GOALS THAT BENEFIT THE COMMUNITIES, ECONOMY AND ENVIRONMENT OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 Name of the organization

THE ADIRONDACK PARK.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SESSION TO HELP SHAPE THE PROCESS. \$400 MILLION ENVIRONMENTAL PROTECTION FUND (EPF): WORKING WITH THE CLEAN WATER AND JOBS COALITION, THE COUNCIL HELPED SECURE A HISTORIC \$100 MILLION DOLLAR INCREASE IN EPF FUNDING, WITH \$40 MILLION EARMARKED FOR OPEN SPACE ACQUISITIONS OR CONSERVATION EASEMENTS. WILDLIFE FRIENDLY LEGISLATION PASSED: COUNCIL EFFORTS HELPED PASS WILDLIFE FRIENDLY LEGISLATION IN THE SENATE AND ASSEMBLY, INCLUDING A PROHIBITION ON THE KILLING OF WILDLIFE (SUCH AS COYOTES) FOR CASH AND PRIZES. IT AWAITS THE GOVERNOR'S SIGNATURE.

CLEAN WATER AND AIR: FIGHTING FOR CLEAN WATER AND CLEAN AIR, COMBATING INVASIVE SPECIES AND CLIMATE CHANGE. CLEAN AIR: US ENVIRONMENTAL PROTECTION AGENCY UPDATED ITS 2015 NATIONAL AMBIENT AIR QUALITY STANDARDS REDUCING UPWIND AIR POLLUTION CURRENTLY CAUSING ACID RAIN AND SMOG DAMAGE. THE ADIRONDACK COUNCIL STAFF TESTIFIED BEFORE EPA ON THE IMPORTANCE THESE CHANGES WILL HAVE ON REDUCING RATES OF ASTHMA AND PREMATURE DEATHS FROM LUNG AND HEART DISEASE IN THE NORTHEAST. WATERSHED COMMUNICATION: A \$50,000 GREAT LAKES BASIN SMALL GRANT WAS SECURED IN PARTNERSHIP WITH THE NORTHERN FOREST CANOE TRAIL TO HIRE A "HEADWATERS COORDINATOR" TO WORK WITH THE LAKE ASSOCIATIONS IN THE RAQUETTE LAKE WATERSHED. CLEAN WATER INFRASTRUCTURE: OVER THE LAST SEVEN YEARS, THE NYS CLEAN WATER FUND HAS AWARDED \$95M TO PARK COMMUNITIES TO KEEP POLLUTION OUT OF ADIRONDACK WATERS. OVER \$15M OF THESE GRANT AWARDS WERE MADE IN 2022-23 WITH SUPPORT AND ADVOCACY FROM THE COUNCIL. SURVEY OF CLIMATE AND ADIRONDACK LAKE ECOSYSTEMS (SCALE):

Schedule O (Form 990) 2022	Page 2			
Name of the organization THE ADIRONDACK COUNCIL, INC.	Employer identification number 14-1594386			
	11 109 1000			
COUNCIL STAFF HELPED SECURE \$2 MILLION DOLLARS IN FUNDING	TO ASSIST			
THIS MULTI-INSTITUTIONAL PARTNERSHIP FOCUSED ON ASSESSING CLIMATE				
CHANGE IMPACTS ON WATERBODIES ACROSS THE ADIRONDACKS. THIS ANALYSIS				
WILL AUGMENT DATA FROM THE HISTORIC 1984-1987 ADIRONDACK LAKES SURVEY				
EFFORT. AQUATIC INVASIVE SPECIES CONTROL DISTRICTS: THE CO	UNCIL			
SUPPORTED THE PASSAGE OF LEGISLATION THAT WILL EXPAND THE AUTHORITY FOR				
ADIRONDACK COMMUNITIES TO RAISE REVENUES TO CONTROL AQUATIC INVASIVE				
SPECIES LIKE THE ZEBRA MUSSEL. THIS BILL AWAITS THE GOVERN	OR'S			
SIGNATURE.				

FARMS AND FORESTS: PRESERVING OPEN SPACE AND SUPPORTING WORKING FORESTS AND FARMS. ADIRONDACK COUNCIL ESSEX FARM INSTITUTE: THE COUNCIL AWARDED 12 MICRO-GRANTS, TOTALING \$26,000, TO FARMERS AND VALUE-ADDED FOOD PRODUCERS TO SUPPORT CLIMATE-FRIENDLY FARMING PRACTICES AND ENERGY-EFFICIENT INFRASTRUCTURE PROJECTS. NORTHEAST WOLF RECOVERY ALLIANCE: THE COUNCIL JOINED PARTNERS FROM ACROSS THE NORTHEAST TO ASSIST IN POLICY, EDUCATION, AND SCIENTIFIC EFFORTS THAT WILL ENCOURAGE THE NATURAL RECOVERY OF WOLVES IN THE GREATER ADIRONDACK REGION. BIRDS AND BEEDS PROTECTION ACT: THE COUNCIL JOINED PARTNERS IN SECURING SIGNIFICANT LEGISLATIVE APPROVAL TO PROHIBIT THE USE OF A CLASS OF PESTICIDES IN CORN, WHEAT, AND SOY SEEDS, WHICH ARE HARMFUL TO POLLINATORS. BILL AWAITS GOVERNOR'S APPROVAL.

VIBRANT COMMUNITIES: FOSTERING A MORE RESILIENT, SUSTAINABLE ADIRONDACK PARK WITH VIBRANT COMMUNITIES. GREEN JOBS: THE COUNCIL'S FOREVER ADIRONDACKS CAMPAIGN HELPED CREATE AND SECURE \$2.1 MILLION IN FUNDS FOR THE TIMBUCTOO SUMMER CLIMATE AND CAREERS INSTITUTE. THIS PARTNERSHIP WITH CUNY MEDGAR EVERS AND THE SUNY COLLEGE OF ENVIRONMENTAL SCIENCE

Schedule O (Form 990) 2022	Page 2				
Name of the organization THE ADIRONDACK COUNCIL, INC.	Employer identification number $14 - 1594386$				
AND FORESTRY WILL BRING HIGH SCHOOL STUDENTS TO THE ADIRON	DACKS TO				
STUDY AND LEARN ABOUT GREEN JOBS THIS SUMMER. COMMUNITY GRANTS: THE					
COUNCIL PARTNERED WITH THE RAQUETTE LAKE PRESERVATION FOUN	DATION TO				
AWARD \$18,000 IN GRANTS TO THREE LOCAL ORGANIZATIONS TO IMPROVE					
CONNECTIVITY AND SUPPORT COMMUNITY EFFORTS IN THE RAQUETTE LAKE AREA.					
ATV MINIMUM AGE INCREASED: ADVANCING A RECOMMENDATION FROM THE					
ADIRONDACK COUNCIL'S 2019 ATV REPORT, THE COUNCIL HELPED RAISE THE					
LEGAL RIDING AGE FOR UNSUPERVISED ATV RIDERS FROM 10 TO 14	YEARS OF				
AGE.					

LEADERSHIP AND GOVERNMENT: LEADING, EXPANDING, AND DIVERSIFYING THE PARK'S CONSTITUENCY. THE BLACK, PUERTO RICAN, HISPANIC & ASIAN STATE LEGISLATIVE CAUCUS: HELD THEIR ANNUAL CAUCUS RETREAT IN THE ADIRONDACKS FOR THE SECOND YEAR IN A ROW. COUNCIL STAFF WORKED WITH THE CAUCUS TO SHARE MORE STORIES ABOUT THE PARK, INCLUDING THE ABOLITION AND SUFFRAGE MOVEMENTS. THE CAUCUS HAS BEEN A POWERFUL ALLY ON PARK RELATED CLIMATE AND ENVIRONMENTAL JUSTICE ISSUES. CLEAN WATER, CLEAN AIR AND GREEN JOBS BOND ACT: APPROVED IN NOVEMBER 2022, THE \$4.2 BILLION ACT WILL BENEFIT THE PARK'S ECOLOGY, ECONOMY, AND PUBLIC HEALTH THROUGH CAPITAL PROJECTS THAT CURB GREENHOUSE GASES AND COMBAT CLIMATE CHANGE. ADIRONDACK PARK LEADERSHIP: THE COUNCIL CHAMPIONED AND STRONGLY SUPPORTED THE APPOINTMENT OF BENITA LAW-DIAO, THE FIRST PERSON OF COLOR, TO THE ADIRONDACK PARK AGENCY (APA) BOARD. PROTECTING THE PUBLIC'S RIGHT TO COMMENT: COUNCIL MEMBERSHIP RESPONDED IN LARGE NUMBERS TO HELP REVERSE THE APA'S ATTEMPT TO REDUCE THE ABILITY OF THE PUBLIC TO PROVIDE COMMENT ON CRITICAL ISSUES BEFORE THE AGENCY.

Name of the organization

Page 2

THE ADIRONDACK COUNCIL'S BY-LAWS OUTLINE THE ELIGIBILITY, TERMS,

CLASSIFICATIONS AND QUALIFICATIONS OF MEMEBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ADIRONDACK COUNCIL'S BY-LAWS STATE THAT THE BOARD OF DIRECTORS WILL BE ELECTED OR RE-ELECTED AT THE ANNUAL MEMBERS' MEETING IN ACCORDANCE WITH THE PROVISIONS OF THE TERM OF OFFICE.

FORM 990, PART VI, SECTION A, LINE 7B:

THE ADIRONDACK COUNCIL'S BY-LAWS OUTLINE THE MATTERS WHICH SHALL BE DECIDED BY A VOTE OF A MAJORITY OF THE MEMBERS AND CONTAIN PROVISIONS FOR SPECIFIC BY-LAWS THAT MAY BE AMENDED OR REPEALED BY THE MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ADIRONDACK COUNCIL'S AUDIT COMMITTEE MEMBERS REVIEW THE DRAFT 990 AND AUDITED FINANCIAL REPORT PREPARED BY THE CONTRACTED AUDITORS. THE COMMITTEE MEMBERS MEET VIA CONFERENCE CALL WITH THE AUDITORS TO DISCUSS ANY QUESTIONS, COMMENTS OR CONCERNS THEY MAY HAVE. THE COMPLETED 990 AND AUDITED FINANCIAL REPORT ARE MADE AVAILABLE TO ALL BOARD MEMBERS AND THE CHAIR OF THE AUDIT COMMITTEE ASKS FOR BOARD APPROVAL OF THE DOCUMENTS AT THE NEXT SCHEDULED BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

AT THE BEGINNING OF THE FISCAL YEAR, EACH BOARD MEMBER IS REQUIRED TO REVIEW AND SIGN THE ADIRONDACK COUNCIL'S CONFLICT OF INTEREST POLICY WHICH WAS ADOPTED BY THE BOARD OF DIRECTORS ON APRIL 13, 2006. UPON EMPLOYMENT, THE COUNCIL'S STAFF IS GIVEN THE POLICY TO REVIEW AND SIGN AS PART OF THE PERSONNEL MANUAL. THE PERSONNEL MANUAL IS REVIEWED ANNUALLY DURING STAFF 232212 10-28-22 Schedule O (Form 990) 2022 PERFORMANCE EVALUATIONS.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE AND UPDATED AS NECESSARY. THE BOARD CHAIR EVALUATES THE EXECUTIVE DIRECTOR'S ANNUAL PERFORMANCE BASED ON INPUT FROM OTHER BOARD MEMBERS. A NATIONAL SEARCH FIRM WAS USED IN RECRUITING AN EXECUTIVE DIRECTOR AND RECOMMENDED SALARY GUIDELINES AT THAT TIME. A COMPENSATION STUDY IS PERFORMED ANNUALLY BY THE BOARD CHAIR AND PRESENTED TO THE FULL BOARD. RESULTS OF THE STUDY ARE DOCUMENTED AND MAINTAINED IN A CONFIDENTIAL FILE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: NY,AL,AK,AR,CA,CO,CT,FL,GA,IL,HI,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NC,OH,OK OR,PA,RI,SC,TN,NV,UT,VA,WA,WV,WI,DC

FORM 990, PART VI, SECTION C, LINE 19:

COPIES OF THE ADIRONDACK COUNCIL'S THREE MOST RECENT 990S AND AUDITED FINANCIAL REPORTS ARE AVAILABLE ON OUR WEBSITE (WWW.ADIRONDACKCOUNCIL.ORG), BY WRITTEN OR IN-PERSON REQUESTS AT OUR ELIZABETHTOWN OFFICE. THE 990 IS A REQUIRED SUBMISSION AS PART OF THE STATE CHARITY RENEWAL PROCESS. THE ADIRONDACK COUNCIL IS LISTED ON THE GUIDESTAR AND CHARITY NAVIGATOR WEBSITES AND A MEMBER OF EARTH SHARE NEW YORK. WE DIRECT PEOPLE TO GUIDESTAR IN OUR PRINTED PUBLICATIONS AS THE 990 IS AVAILABLE FOR VIEWING AS PART OF OUR PROFILE. THE ADIRONDACK COUNCIL'S BY-LAWS ARE AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C

 THE
 ORGANIZATION
 HAS
 NOT
 CHANGED
 ITS
 OVERSIGHT
 OR
 Selection
 PROCESS
 FOR

 232212
 10-28-22
 Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization THE ADIRONDACK COUNCIL, INC.	Employer identification number 14-1594386
THE AUDIT OF ITS FINANCIAL STATEMENTS.	

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

STATE COPY

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Open to Public Inspection

1.General Informati	ion					
For Fiscal Year Beginning		yyy) 07/01/	2022 and Ending (mm/dd/yyyy) 06/30/	2023	
Check if Applicable:		Drganization:			Employer Identification Number (EIN):	
Address Change		DIRONDACK	COUNCIL, INC.	•	14-1594386	
Name Change	Mailing Ac				NY Registration Number:	
Initial Filing	Ű,	BOX D-2			02-44-28	
Final Filing	City / Stat				Telephone:	
Amended Filing	-	BETHTOWN,	NY 12932		518 873-2240	
Reg ID Pending	Website:					
		ADIRONDACK	COUNCIL.ORG		EBURKE@ADIRONDACKCO	
Check your organization's registration category:		only EPTL	only X DUAL (7A &		Confirm your Registration Category in the Charities Registry at <u>www.CharitiesNYS.com</u> .	
2. Certification						
See instructions for certifi	ication regu	irements. Improper	certification is a violation	of law that may be subject	to penalties. The certification requires	
two signatories.						
				-!! - + + + + - + + - + + + + - + - + + - + + - + + - + + - + + - + + - + + - + - + + + + + + + + + + + + +	hast of surface and halist	
				of the State of New York a	best of our knowledge and belief,	
	<i>c iluc, com</i>			SARAH HATE		
President or Authorized	Officer [.]			BOARD CHAIL		
Thesident of Adthonized	omeer.	Cianatura				
		Signature		DOUGLAS SC		
Chief Financial Officer or	Tracouror			INCOMING T		
Chief Financial Officer of	Treasurer.	Signature			e and Title Date	
		Signature		FIIILINdIII		
3. Annual Reporting	g Exempt	tion				
Check the exemption(s) the	hat apply to	your filing. If your o	organization is claiming an	exemption under one cate	gory (7A or EPTL only filers) or both	
					ed Char500. No fee, schedules, or	
-					e exemption, you must file applicable	
schedules and attachmer	nts and pay	applicable fees.				
🔄 3a. 7A filin	ig exemptio	n: Total contributio	ns from NY State including	g residents, foundations, go	overnment agencies, etc. did not	
		v	l not engage a professiona	I fund raiser (PFR) or fund	raising counsel (FRC) to solicit	
contributio	ons during t	the fiscal year.				
3b. EPTL 1	filing exemp	otion: Gross receipt	s did not exceed \$25,000	and the market value of as	sets did not exceed \$25,000 at any time	
during the	fiscal year.					
A Cohodulas and A	Heekman					
4. Schedules and A	llachme	nts				
See the following page		37				
for a checklist of	Yes				raising counsel or commercial co-venturer	
	schedules and for fund raising activity in NY State? If yes, complete Schedule 4a.					
attachments to		TT				
complete your filing. Yes X No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.						
5. Fee	5. Fee					
See the checklist on the	7A fil	ing fee:	EPTL filing fee:	Total fee:		
next page to calculate you		J			Make a single check or money order	
fee(s). Indicate fee(s) you					payable to:	
are submitting here:	\$	25.	\$ 250.	\$ 275.	"Department of Law"	

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

*The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

THE ADIRONDACK COU	NCIL, INC.
	Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:
CHAR500	- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
Annual Filing Checklist	- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
	- Your organization is registered as DUAL and you marked <u>both</u> the 7A and EPTL filing exemption in Part 3.
Checklist of Schedules and	d Attachments
Chack the schedules you must subr	nit with your CHAR500 as described in Part 4:
	4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
	4b, submit Schedule 4b: Government Grants
Check the financial attachments you	u must submit with your CHAR500:
X IRS Form 990, 990-EZ, or 990	-PF, and 990-T if applicable
X All additional IRS Form 990 So disclosure and will not be available	chedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from ilable for public review.
	for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the an IRS Form 990-EZ for state purposes only.
If vou are a 7A only or DUAL filer. su	Ibmit the applicable independent Certified Public Accountant's Review or Audit Report:
	total revenue and support greater than \$250,000 and up to \$1,000,000
X Audit Report if you received to	otal revenue and support greater than \$1,000,000 and the fiscal year begins on or after July 1, 2021.
If the fiscal year begins before	that date, an Audit Report is required if total revenue and support is greater than \$750,000
No Review Report or Audit Re	port is required because total revenue and support is less than \$250,000
We are a DUAL filer and check	ked box 3a, no Review Report or Audit Report is required
Calculate Your Fee	
	Is my Registration Category 7A, EPTL, DUAL or EXEMPT?
	Operations are excised a Depictuation Option on

For 7A and DUAL filers, calculate the 7A fee:

\$0, if you checked the 7A exemption in Part 3a

X \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

\$0, if you checked the EPTL exemption in Part 3b
\$25, if the NET WORTH is less than \$50,000
\$50, if the NET WORTH is \$50,000 or more but less than \$250,000
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
X \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
50,000,000 or more but less than \$50,000,000 or more but less than \$50,000,000
\$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

Need Assistance?

www.CharitiesNYS.com Visit: Call: (212) 416-8401 Email: Charities.Bureau@ag.ny.gov Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

		PUB	LIC DISCLOSURE COPY - STATE REGISTRATE Return of Organization Exempt Fron		28 OMB No. 1545-0047
For	" g	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		2022
	-		Do not enter social security numbers on this form as it may		Open to Public
Depa Interr	rtment o nal Reve	of the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and the late	st information.	Inspection
AF	or th	e 2022 calend	ar year, or tax year beginning $ { m JUL}1,2022$ and ending	<u>JUN 30, 2023</u>	
B c	Check if pplicab	le: C Name o	forganization	D Employer identifi	cation number
	Addre	ge THE	ADIRONDACK COUNCIL, INC.		
	Name chang Initial	ge Doing b	usiness as	14-15943	86
	return Final return	Number	and street (or P.0. box if mail is not delivered to street address) BOX $D-2$	uite E Telephone numbe 518-873-	
	termii ated	¹⁻ City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	3,080,245.
	Amen		ABETHTOWN, NY 12932	H(a) Is this a group r	eturn
	Applio tion pendi		nd address of principal officer: SARAH HATFIELD	for subordinates	s? Yes X No
		SAME	AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No
<u> 1</u>	Tax-ex	empt status:			list. See instructions
	Nebsi		ADIRONDACKCOUNCIL.ORG	H(c) Group exemption	
			X Corporation Trust Association Other L	Year of formation: 1977	VI State of legal domicile: NY
Pá	art I	Summary			
e	1	Briefly describ	e the organization's mission or most significant activities: SEE PART	III, LINE I	
Governance	2	Check this bo	x if the organization discontinued its operations or disposed of n	nore than 25% of its net as	sots
veri	3			3	26
ĝ	4		lependent voting members of the governing body (Part VI, line 1b)	26	
ళ ల	5		of individuals employed in calendar year 2022 (Part V, line 2a)	27	
Activities &	6		of volunteers (estimate if necessary)		50
cti∕			d business revenue from Part VIII, column (C), line 12		0.
Ā			business taxable income from Form 990-T, Part I, line 11		0.
				Prior Year	Current Year
đ	8	Contributions	and grants (Part VIII, line 1h)	2,503,863.	2,743,277.
ň	9	Program servi	ce revenue (Part VIII, line 2g)	0.	0.
Revenue	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	132,769.	206,121.
œ	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26,492.	17,114.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,663,124.	2,966,512.
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1·3)	0.	0.
	14	•	to or for members (Part IX, column (A), line 4)	0.	0.
es	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	1,816,494.	2,014,275.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
ă	b		ing expenses (Part IX, column (D), line 25) 81,774.	1 11 5 001	0.00 450
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,116,001.	979,459.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,932,495.	2,993,734.
	19	Revenue less	expenses. Subtract line 18 from line 12	-269,371.	-27,222.
Net Assets or				Beginning of Current Year	End of Year
Sset	20	Total assets (8,899,831.	10,135,231.
et A	21		(Part X, line 26)	<u>131,086.</u> 8,768,745.	344,485.
	art II	Net assets or	fund balances. Subtract line 21 from line 20	0,/00,/43.	9,790,746.
		-	I declare that I have examined this return, including accompanying schedules and sta	tements and to the best of m	knowledge and belief it is
			. Declaration of preparer (other than officer) is based on all information of which prep		אווטשופעשר מווע שלוולו, ונ וצ
<u></u>	,				
Sig	n	Signature of or	fficer	Date	

Sign	erginatare er entret						
Here	SARAH HATFIELD, BOARD CHAIR						
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date				
Paid	ALAN W. CLINK, CPA			self-employed P01256785			
Preparer	Firm's name MENGEL, METZGER,	BARR & CO. LLP		Firm's EIN 16-1092347			
Use Only	Only Firm's address 11 BRITISH AMERICAN BLVD.						
LATHAM, NY 12110 Phone no.518-785-0134							
May the IF	May the IRS discuss this return with the preparer shown above? See instructions						
232001 12-1	32001 12-13-22LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2022)						

SEE SCHEDULE O FO	OR ORGANIZATION	MISSION	STATEMENT	CONTINUATION

Form	990 (2022) THE ADIRONDACK COUNCIL, INC. 14-1594386 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
•	
3	3 3 3 3 3 3 3 3
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,473,160. including grants of \$) (Revenue \$) (Revenue \$)
	WITH STRONG PARTNER ORGANIZATIONS, COLLABORATION WITH ELECTED/APPOINTED
	GOVERNMENT OFFICIALS, AND CITIZEN PARTICIPATION, THE COUNCIL
	SUCCESSFULLY ADVOCATED FOR POLICIES AND FUNDING TO BENEFIT THE
	ENVIRONMENT AND COMMUNITIES OF THE ADIRONDACK PARK.
	WILDERNESS: ENSURING THE WILD CHARACTER AND ECOLOGICAL INTEGRITY OF THE
	ADIRONDACK PARK AND FOREST PRESERVE. INAUGURAL VISITOR USE MANAGEMENT
	STUDY UNDERWAY: IN 2022, THE ADIRONDACK COUNCIL HELPED SECURE \$600,000
	IN STATE FUNDING THAT WOULD ALLOW THE DEPARTMENT OF ENVIRONMENTAL
	CONSERVATION (DEC) TO HIRE A LEAD CONSULTING FIRM TO STUDY VISITOR USE
	MANAGEMENT IN THE ADIRONDACK AND CATSKILL PARKS. IN EARLY 2023, THE
	COUNCIL AND OTHER STAKEHOLDERS ATTENDED THE FIRST PUBLIC LISTENING
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 2,473,160.
	Form 990 (2022)

Form	990	(2022)

Form 990 (2022) THE ADIRONDACK COUNCIL, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
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		X X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X X
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		X X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11a</u>	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			- v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	A	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	А	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
h	Schedule D, Parts XI and XII	<u>12a</u>	-11	<u> </u>
D		106		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
	Did the energia tion maintain an efficiency and so and so this is a file of the United Obstan O	14a		X
14а ь		140		- 23
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		x

Form 990 (2022)

Form	990	(2022)
	330	

THE ADIRONDACK COUNCIL, INC. 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X 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		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00		x
00	"Yes," complete Schedule L, Part IV	28c 29	Х	<u> </u>
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	л	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
24	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	- 55		
54		34		x
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	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?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		x
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		x
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	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 19			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
~	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

	990 (2022) THE ADIRONDACK COUNCIL, INC. 14-1594	386	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
-			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 27			
L	, , , , ,	Oh	х	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b 3a	<u>л</u>	x
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" to line 3b, provide an explanation on Schedule O	3b		- 23
	It "Yes," has it filed a Form 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O	55		<u> </u>
Tu	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country	104		
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	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			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		- v
		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		x
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		- 23
g h	If the organization received a contribution of qualified intellectual property, did the organization life rorm 8099 as required?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
Ũ	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 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
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.	- 10		
а	•	13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
U	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		<u> </u>
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		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	_		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

THE ADIRONDACK COUNCIL, INC.

14-1594386 Page **6**

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

Check if Schedule O contains a resp	onse or note to any	/ line in this Part VI	
oncorring a resp	01130 01 11010 10 411		

	Check if Schedule O contains a response or note to any line in this Part VI			X								
Sec	tion A. Governing Body and Management											
			Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26											
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.											
b	Enter the number of voting members included on line 1a, above, who are independent 1b											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other											
	officer, director, trustee, or key employee?	2		Х								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision											
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х								
_	 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 											
6	Did the organization have members or stockholders?	5 6	Х	<u>X</u>								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or											
74	more members of the governing body?	7a	х									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	10										
D		7b	х									
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	70	- 21									
8		0-	Х									
a	The governing body?	8a 0h	X									
a	Each committee with authority to act on behalf of the governing body?	8b										
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	•		x								
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		<u> </u>								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		~	<u> </u>								
10-		40-	Yes	<u>No</u> X								
	Did the organization have local chapters, branches, or affiliates?	10a										
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х									
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>									
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		v									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X X									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b										
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		77									
	on Schedule O how this was done	12c	X									
13	Did the organization have a written whistleblower policy?	13	X									
14	Did the organization have a written document retention and destruction policy?	14	X									
15	Did the process for determining compensation of the following persons include a review and approval by independent											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
	The organization's CEO, Executive Director, or top management official	15a	X									
b	Other officers or key employees of the organization	15b	Х									
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.											
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a											
	taxable entity during the year?	16a		<u> </u>								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation											
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's											
	exempt status with respect to such arrangements?	16b										
Sec	tion C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed NY, AL, AK, AR, CA, CO, CT, FL, GA	,IL,	HI,	KS								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only) a	availat	ole								
	for public inspection. Indicate how you made these available. Check all that apply.											
	X Own website X Another's website X Upon request Other (explain on Schedule O)											

19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflict of interest	policy, and	financial
	statements available to the public during the tax year.			

20	State the name, address, and telephone number of the person who possesses the organization's books and records
	ELAINE BURKE - 518-873-2240

F

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box.	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer an	dad	irecto	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	organizations below	ual tr	tional		n ploye	t com /ee	~	1099-NEC)		organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	ƙey employee	Highest compensated employee	Former			organizations
(1) WILLIAM C. JANEWAY	40.00	_		0	-		4			
EXECUTIVE DIRECTOR				х				171,192.	Ο.	29,867.
(2) RAUL AGUIRRE	40.00									
ACTING EXECUTIVE DIRECTOR				Х				122,883.	0.	26,585.
(3) ELAINE BURKE	40.00									
DIRECTOR OF OPERATIONS				Х				91,137.	0.	25,136.
(4) MARY BIJUR	1.00									
DIRECTOR		Х						0.	0.	0.
(5) KURT ABRAHAMSON	4.00									
DIRECTOR		Х						0.	0.	0.
(6) DAVID E. BRONSTON	1.00									
DIRECTOR		Х						0.	0.	0.
(7) ANN E. CARMEL	6.00									
DIRECTOR		Х						0.	0.	0.
(8) DIANE W. FISH	1.00									
DIRECTOR		Х						0.	0.	0.
(9) DOUG STEWART	1.00									
DIRECTOR		Х						0.	0.	0.
(10) LAUREL SKARBINSKI	1.00									
DIRECTOR		Х						0.	0.	0.
(11) KATE RUSSELL	1.00									
DIRECTOR		Х						0.	0.	0.
(12) GEORGINA CULLMAN, PH.D.	4.00									
DIRECTOR		х						0.	0.	0.
(13) CHARLES D. CANHAM, PH.D.	4.00									
DIRECTOR		Х						0.	0.	0.
(14) ROBERT J. KAFIN	6.00									
DIRECTOR		Х						0.	0.	0.
(15) DANIEL J. RYTERBAND	1.00									
DIRECTOR		Х						0.	0.	0.
(16) BRIAN RUDER	4.00									_
DIRECTOR		Х						0.	0.	0.
(17) JOHN RESCHOVSKY	4.00									_
DIRECTOR		Х						0.	0.	0.

Form 990 (2022) THE ADIRC	NDACK C	<u>'OU</u>	NC	IL	· /	IN	с.	1	14-1594	1386	Pa	age 8
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloye	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated		d
	hours per	(do not check more than one box, unless person is both an						compensation	compensation		ount	
	week					or/trust		from	from related	c	other	
	(list any	ctor						the	organizations	comp	ensat	tion
	hours for	r dire				ed		organization	(W-2/1099-MISC/	fro	m the	Э
	related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	orga	nizati	on
	organizations	al trus	nal tr		loyee	e e		1099-NEC)			relate	
	below	ndividual trustee or director	n stit utio nal trustee	Officer	emp	Highest compensated employee	Former			orgar	nizatio	ons
	line)	Ind	Ins	Offi	Key	Hig em	For			_		
(18) PHILIP R. FORLENZA	4.00								_			
DIRECTOR		Х						0.	0.	<u> </u>		0.
(19) JEROME PAGE	1.00											
DIRECTOR		Х						0.	0.	<u> </u>		0.
(20) JUSTIN POTTER	1.00											
DIRECTOR		Х						0.	0.			0.
(21) NOAH SHAW	1.00											
DIRECTOR		Х						0.	0.			0.
(22) RUSH HOLT, PH.D.	1.00											
DIRECTOR		Х						0.	0.			0.
(23) MICHALE GLENNON, PH.D.	1.00									T		
DIRECTOR		Х						0.	0.			Ο.
(24) ERIC W. LAWSON	2.00											
DIRECTOR		Х						0.	0.			Ο.
(25) DOUGLAS SCHULTZ	1.00											
INCOMING TREASURER		х						0.	0.			Ο.
(26) SARAH C. HATFIELD	20.00									1		
CHAIR		х		х				0.	0.			Ο.
1b Subtotal								385,212.	0.		.,58	
c Total from continuation sheets to Part VI							•	0.	0.		,	0.
d Total (add lines 1b and 1c)								385,212.	0.	_	.,58	38.
2 Total number of individuals (including but no								· · ·			1	
compensation from the organization		000		u un		,	010					2
compendation nom the organization											Yes	No
3 Did the organization list any former officer,	director trust	oo k		mnl		e or	hia	hest compensated empl				
										3		Х
line 1a? If "Yes," complete Schedule J for stFor any individual listed on line 1a, is the su												
										4	x	
and related organizations greater than \$1505 Did any person listed on line 1a receive or a										-4		
	•							•	iual ior services	5		х
rendered to the organization? <i>If</i> "Yes," <i>com</i> Section B. Independent Contractors	blete Schedule	e J fo	or su	ich į	oers	on .				5		<u></u>
•	nnoncotod ind	000	adar	-+	t.v	ootor		at received more than f	100 000 of company		~~	
1 Complete this table for your five highest con the experimentary papert componential for t	•	•							•	ation from	TI	
the organization. Report compensation for t	ne calendar ye	ear e	nair	ig w		or wi	<u>tnin</u>		ear.	(0)		
(A) Name and business	address	NC	ONE	7				(B) Description of s	ervices	(C) Compen		h
		110		-			-	2000.10.000				<u> </u>
							-					
							_					
							\dashv					
• Tabalasanaka (1.1. 1.1. 1.1. 1.1.	al al color							- k				
2 Total number of independent contractors (ir	icluding but no	ot lin	nitec	to to	tnos	se lis	τed	above) who received mo	ore than			

Form 990 THE ADIRC	NDACK C	:0U	NC	IL	·,	IN	c.		14-159	4386
Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est (
(A) Name and title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) ETHAN WINTER SECRETARY	4.00	x		x				0.	0.	0.
(28) CURTIS R. WELLING TREASURER	5.00	x		x				0.	0.	0.
(29) LIZA COWAN	4.00									
VICE CHAIR		X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

	<u>1 990 (</u>				CK COUNCI	L, INC.		14-1594	386 Page 9
Pa	rt VII								
		Check if Schedule O	contains	a response	e or note to any lir			(0)	
						(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue	function revenue	business revenue	from tax under
									sections 512 - 514
nts nts	1 a	Federated campaigns				4			
àrai our	b					4			
Contributions, Gifts, Grants and Other Similar Amounts	С	• • • • • • • • • • • • • • • • • • • •			5,850.	-			
Gift lar	d	Related organizations		. 1d		4			
imi	е	Government grants (contr				4			
tior Sr S	f	All other contributions, gifts,							
ibu		similar amounts not included			<u>,737,427.</u>	-			
ontr of O	g	Noncash contributions included in			177,772.				
<u>a Ö</u>	h	Total. Add lines 1a-1f				2,743,277.			
					Business Code				
ce	2 a								
ervi	b								
n Si	С								
Program Service Revenue	d								
rog	е								
Ъ	f	All other program service							
	g	Total. Add lines 2a-2f							
	3	Investment income (inclue				166 600			166 600
						166,608.			166,608.
	4	Income from investment of		-	-				
	5	Royalties	· · · · · · · · · · · · · · · · · · ·	() D I					
		_		(i) Real	(ii) Personal	-			
		Gross rents		21,300		-			
	b	Less: rental expenses		5,810		4			
	c	Rental income or (loss)	6c	5,490		E 400			E 400
	d		s)) Securities	(ii) Oth er	5,490.			5,490.
	7 a	Gross amount from sales of		26,903		-			
		assets other than inventory	7a ± 2	10,903	•	-			
•	b	Less: cost or other basis		00 2 2 0 0					
venue		and sales expenses		87,390 89,513	•	-			
		Gain or (loss)				39,513.			20 512
r B		Net gain or (loss)				59,515.			39,513.
Other Re	8 a	Gross income from fundraisi including \$5	-						
0									
		contributions reported on	-		3,028.				
	h	Part IV, line 18							
		Net income or (loss) from				-7,505.			-7,505.
		Gross income from gamir				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	5 a	Part IV, line 19	-						
	h	Less: direct expenses							
		Net income or (loss) from			5				
		Gross sales of inventory,							
	10 4	and allowances			a 19,070.				
	b	Less: cost of goods sold							
		Net income or (loss) from		····· <u> </u>		19,070.	19,070.		
			20,00 01		Business Code	,			
sno	11 a	MISCELLANEOUS	S INC	OME	900099	59.	59.		
Miscellaneous Revenue	b								
ella ver	c								
lsci Be	d	All other revenue							
Σ	e	Total. Add lines 11a-11d				59.			
	12	Total revenue. See instruction				2,966,512.	19,129.	0.	204,106.

THE ADIRONDACK COUNCIL, Part IX Statement of Functional Expenses

1		Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	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	466,800.	396,780.	56,016.	14,004
	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	1,166,933.	991,892.	140,032.	35,009
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	45,570.	38,735.	5,468.	1,367 6,552 3,497
9	Other employee benefits	218,410.	185,649.	26,209.	6,552
0	Payroll taxes	116,562.	99,076.	13,989.	3,497
	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
	Advertising and promotion	168,481.	149,161.	16,015.	3,305
	Office expenses	151,520.	128,792.	18,183.	4,545
	Information technology			,	•
	Royalties				
	Occupancy	60,797.	50,168.	8,503.	2,126
	Travel	84,475.	71,804.	10,137.	2,534
	Payments of travel or entertainment expenses	01/1/01	, 1,0010		2,331
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	· · · · · · · · · · · · · · · · · · ·				
	Payments to affiliates	7,093.	5,323.	1 / 20	332
	Depreciation, depletion, and amortization	2,491.	5,343.	1,438. 2,491.	334
		2,491.		2,491.	
	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.)	220 656	150 012	00 (42	
	PROFESSIONAL FEES	239,656.	159,013.	80,643.	2 402
	PRINTING AND PUBLICATIO	113,428.	96,414.	13,611.	3,403
	EQUIPMENT RENTAL	71,117.	60,449.	8,534.	2,134
	DUES, FEES AND LICENSES	31,522.	6,565.	22,420.	2,537
	All other expenses	48,879.	33,339.	15,111.	429
5	Total functional expenses. Add lines 1 through 24e	2,993,734.	2,473,160.	438,800.	81,774
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

INC.

THE ADIRONDACK COUNCIL, INC	•
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		Dalance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	4	Cash pap interact bearing			1,046,889.	1	1,095,369.
	1			103,562.	2	3,147.	
	2	Savings and temporary cash investments			46,608.		19,000.
	3	Pledges and grants receivable, net			442.	3 4	0.
	4	Accounts receivable, net		112.	4	0•	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst		5			
	6	controlled entity or family member of any of thes				5	
	0	Loans and other receivables from other disqualit under section 4958(f)(1)), and persons described				6	
	7					7	
Assets		Notes and loans receivable, net			29,063.	8	36,626.
Ass	8	Inventories for sale or use Prepaid expenses and deferred charges			2,799.	9	6,899.
		Land, buildings, and equipment: cost or other			4,755.	9	0,055.
	IUa	basis. Complete Part VI of Schedule D	102	466,831.			
	h	Less: accumulated depreciation		209,662.	250,892.	10c	257,169.
	11	Investments - publicly traded securities			6,685,458.	11	7,719,753.
	12	Investments - other securities. See Part IV, line 1			3,028.	12	3,028.
	12	Investments - program-related. See Part IV, line		5,020.	13	5,020.	
	14				14		
	15	Intangible assets Other assets. See Part IV, line 11	731,090.	15	994,240.		
	16	Total assets. Add lines 1 through 15 (must equ			8,899,831.	16	10,135,231.
	17	Accounts payable and accrued expenses	123,336.	17	126,679.		
	18	Grants payable				18	
	19	Deferred revenue			7,750.	19	18,525.
	20	Tax-exempt bond liabilities			.,	20	
	21	Escrow or custodial account liability. Complete I				21	
	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
bili		controlled entity or family member of any of the				22	
Lia	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		of Schedule D	,		0.	25	199,281.
	26				131,086.	26	344,485.
		Organizations that follow FASB ASC 958, che					
sec		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			8,265,711.	27	9,263,787.
Bal	28	Net assets with donor restrictions			503,034.	28	526,959.
pu		Organizations that do not follow FASB ASC 9					
Ъ		and complete lines 29 through 33.					
ر م	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or ec				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in	come, o	r other funds		31	
Net	32	Total net assets or fund balances			8,768,745.	32	9,790,746.
	33				8,899,831.	33	10,135,231.

Form **990** (2022)

Part X | Balance Sheet

Form	000	(ว∩วว
FOIIII	990	2022

Form	1990 (2022) THE ADIRONDACK COUNCIL, INC.	14-15	94386	Pag	_{ge} 12
	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	2,966	5,51	12.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,993	3,73	34.
3	Revenue less expenses. Subtract line 2 from line 1	3	-27	7,22	22.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,768	3,74	45.
5	Net unrealized gains (losses) on investments	5	1,049),22	23.
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	9,790),74	46.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				1
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. <u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the	organization
-------------	--------------

Nan	ne of t	the organization							identification number		
				COUNCIL, INC					4-1594386		
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	i.			
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, cl	heck only o	one box.)					
1		A church, convention of ch					1)(A)(i).				
2	\square	A school described in sect									
3	\square	A hospital or a cooperative		-		(h)(1)(A)(ii	ii)				
4	H	A medical research organiz					•	iii) Entor	the hospital's name		
4		-	ation operated in col	ijunction with a nospital	uescribeu	III Sectio		III). LIILEI	the hospital s hame,		
_		city, and state:									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)(iv). (C									
6		A federal, state, or local gov	-								
7	X	An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from the	e general p	oublic described in		
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Part	t II.)						
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a la	and-grant	college		
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of t	he college	or		
		university:									
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership	o fees, and	d gross receipts from		
		activities related to its exem					•		•		
		income and unrelated busir							-		
		See section 509(a)(2). (Con				looo doqui	iou by the erge	anzation a			
11		An organization organized a		vely to test for public sat	fotu Soo u	section 50	10(2)(4)				
12	\square	An organization organized a		•	•			avout tha	purposes of one or		
12		more publicly supported or	•	•	•		-	•			
			-								
_		lines 12a through 12d that	• •					-	nii iin n		
а		Type I. A supporting orga		-	•	-					
		the supported organization			majority o	of the direc	ctors or trustees	s of the su	ipporting		
		organization. You must o									
b		Type II. A supporting org	-				•		-		
		control or management o			ame perso	ns that co	ntrol or manage	e the supp	ported		
		organization(s). You mus	-								
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally	/ integrate	d with,		
	_	its supported organization	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.				
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	vith its support	ed organiz	ation(s)		
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and a	an attentiv	reness		
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	v .				
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II	, Type III			
		functionally integrated, or	Type III non-function	nally integrated supportin	ng organiz	ation.					
f	Ente	er the number of supported o	organizations								
g		vide the following informatior	about the supporte								
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of r		(vi) Amount of other		
		organization		above (see instructions))	Yes	No	support (see ins	structions)	support (see instructions)		
_											
Tota	al										

THE ADIRONDACK COUNCIL, INC.

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.")	1859833.	2288254.	3147459.	2503863.	2743277.	12542686.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	1859833.	2288254.	3147459.	2503863.	2743277.	12542686.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						887,715.	
6	Public support. Subtract line 5 from line 4.						11654971.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
7	Amounts from line 4	1859833.	2288254.	3147459.	2503863.	2743277.	12542686.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	94,156.	142,010.	109,255.	142,276.	172,098.	659,795.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on	-7,672.					-7,672.	
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)	324.	513.	267,316.	19.	59.	268,231.	
11	Total support. Add lines 7 through 10						13463040.	
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	162,972.	
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	ear as a section 5	01(c)(3)		
	organization, check this box and stop	ohere						
Sec	ction C. Computation of Publi	c Support Per	centage					
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	86.57 %	
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	93.64 %	
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo		
	$\ensuremath{ \text{stop} here.}$ The organization qualifies	as a publicly supp	orted organization				X	
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box	
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation				
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,	
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation	
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization			
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or	
	more, and if the organization meets the	ne facts-and-circum	nstances test, cheo	ck this box and st	t op here. Explain i	n Part VI how the		
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation		
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s	
	Schedule A (Form 990) 2022							

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Schedule A (Form 990) 2022 Part III Support Schedule for Organizations Described in Section 509(a)(2)

THE ADIRONDACK COUNCIL, INC.

(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.) Section 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	o							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and					+		
<i>i</i> a	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that							
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
с	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support							I
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	6	e) 2022	(f) Total
	Amounts from line 6			(-,	(-,		-,	(,, , , , , , , , , , , , , , , , , , ,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b							
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3	3) organizatio	on,
	check this box and stop here				•			
Sec	tion C. Computation of Publ							
	Public support percentage for 2022 (column (f))		15		%
	Public support percentage from 2021					16		%
	tion D. Computation of Invest							70
	• • • • • • • • • • • • • • • • • • •			no 10 octumn (f)		47		0/
	Investment income percentage for 20					17		%
	Investment income percentage from					18	/	%
19a	33 1/3% support tests - 2022. If the						%, and line 1	
_	more than 33 1/3%, check this box a	-	-					
b	33 1/3% support tests - 2021. If the							
	line 18 is not more than 33 1/3%, che	eck this box and st	t op here. The orga	nization qualifies a	as a publicly supp	orted o	rganization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check tł	his box and see ins	structic	ons	

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.)	
All Supporting Organizations	
of the organization's supported organizations listed by name in the organization's governing	
nents? If "No," describe in Part VI how the supported organizations are designated. If designated by	
or purpose, describe the designation. If historic and continuing relationship, explain.	1
e organization have any supported organization that does not have an IRS determination of status	
section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	
zation was described in section 509(a)(1) or (2).	2
e organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	
b and 3c below.	3a
e organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	
ed the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	
zation made the determination.	36
e organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	
ses? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	30
ny supported organization not organized in the United States ("foreign supported organization")? If	
and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a
e organization have ultimate control and discretion in deciding whether to make grants to the foreign	
rted organization? If "Yes," describe in Part VI how the organization had such control and discretion	
e being controlled or supervised by or in connection with its supported organizations.	46
e organization support any foreign supported organization that does not have an IRS determination	
sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	
ure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	
	40
e organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	
r lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN	
ers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	
authority under the organization's organizing document authorizing such action; and (iv) how the action	5a
ccomplished (such as by amendment to the organizing document). or Type II only. Was any added or substituted supported organization part of a class already	50
nated in the organization's organizing document?	5b
itutions only. Was the substitution the result of an event beyond the organization's control?	50
e organization provide support (whether in the form of grants or the provision of services or facilities) to	- 50
e other than (i) its supported organizations, (ii) individuals that are part of the charitable class	
ted by one or more of its supported organizations, or (iii) other supporting organizations that also	
rt or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	
	6
e organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	
fined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	
to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7
e organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?	
," complete Part I of Schedule L (Form 990).	8
ne organization controlled directly or indirectly at any time during the tax year by one or more	
lified persons, as defined in section 4946 (other than foundation managers and organizations described	
tion 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a
e or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	
pporting organization had an interest? If "Yes," provide detail in Part VI.	9b
disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	
assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	90
ne organization subject to the excess business holdings rules of section 4943 because of section	
(recording contain Type II connecting experimentians, and all Type III per functionally integrated	

Yes

No

10a

- 10a Was th 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated
 - 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.)

THE ADIRONDACK COUNCIL, INC.

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

Section A

Schedule A (Form 990) 2022

- 1 Are all docum class o
- 2 Did the under organi
- 3a Did the lines 3
- b Did the satisfie organi
- c Did the purpos
- 4a Was a "Yes,"
- b Did the suppo despit
- c Did the under to ens purpos
- 5a Did the answe numbe (iii) the was ac
- b Type I desigr
- c Substi
- 6 Did the anyone benefit suppo Part V
- Did the 7 (as de regard
- Did the 8 If "Yes
- 9a Was th disqua in sect
- b Did on the su
- c Did a d from, a
- supporting organizations)? If "Yes," answer line 10b below.

Part IV		
Schedule A (F	orm 990) 2022	THE

THE ADIRONDACK COUNCIL, INC.

2

			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		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization.	
Section C. Type II Supporting Organizations	

 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

 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 managed

 1
 1

Section D	. All Type III	Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- a ____ The organization satisfied the Activities Test. *Complete* line 2 *below.*
- **b** The organization is the parent of each of its supported organizations. *Complete* line 3 *below.*

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instruction <u>s).</u>
---	--	---	-------------------------	-----------------	---------------------	-----------------------------

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

No

Yes

2 Enter 0.85 of line 1.

4

6

7

Enter greater of line 2 or line 3.

5 Income tax imposed in prior year

instructions).

3 Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

hec ar	Jule A (Form 990) 2022 THE ADIRONDACK COUNCIL t V Type III Non-Functionally Integrated 509(a)(3) Supporti		zations	14-1594386 Pag
	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI) See instruction
	All other Type III non-functionally integrated supporting organizations mu			
ectio	on 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		
1	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
5	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		
3	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ectio	on 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		
ł	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		
,	Recoveries of prior-year distributions	7		
3	Minimum Asset Amount (add line 7 to line 6)	8		

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

2

3

4

5

6

Schedule A (Form 990) 2022

and 4c.

Sche	dule A (Form 990) 2022 THE ADIRONDAC	CK COUNCIL, INC	•	14	4-1594386 Pag
Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	the 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	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
а	Applied to direct distributions of prior years				
	Applied to 2022 distributable amount				
b					
b	Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4.				
b c	Applied to 2022 distributable amountRemainder. Subtract lines 4a and 4b from line 4.Remaining underdistributions for years prior to 2022, if				
b c	Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4.				

and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022

6 Page 7 THE ADIRONDACK COUNCIL, INC.

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME	
2018 AMOUNT: \$	324.
2019 AMOUNT: \$	513.
2020 AMOUNT: \$	267,316.
2021 AMOUNT: \$	19.
2022 AMOUNT: \$	59.

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

INC.

OMB No. 1545-0047

2022

Employer identification number

14-1594386

Schedule B	
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):			
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		

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

THE ADIRONDACK COUNCIL,

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2022)



THE A	DIRONDACK COUNCIL, INC.	1	4-1594386
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$90,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 127,251.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>100,000.</u>	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$ <u>500,000.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>106,950.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
223452 11-15	5-22		Schedule B (Form 990) (2022)

Name of organization

Employer identification number

no. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
2	300 SHARES FACTSET RESEARCH SYSTMES, INC.		
		\$127,251.	02/01/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
3453 11-1	5-22	Ψ	Schedule B (Form 990) (2022)

THE ADIRONDACK COUNCIL, INC.

Schedule B (Form 990) (2022) Name of organization

(a)

No.

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

(b)

(c)

Employer identification number

(d)

14-1594386

Page 3

Schedule	B (Form 990) (2022)		Page 4
Name of c	organization		Employer identification number
THE A	DIRONDACK COUNCIL, INC.		14-1594386
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, o Use duplicate copies of Part III if additionals	through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	t
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
		(e) Transfer of git	
	Transferee's name, address, a		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(_) Tu	
	Transferee's name, address, a	(e) Transfer of gif nd ZIP + 4	Relationship of transferor to transferee

SCHEDULE C	DULE C Political Campaign and Lobbying Activities							OMB No. 1545-0047	
(Form 990)									
		if the organization is described b					LUL	L	
Department of the Treasury Internal Revenue Service	-	to www.irs.gov/Form990 for ins			0-22.		Open to Pu Inspectio		
							•		
•		Form 990, Part IV, line 3, or Form plete Parts I-A and B. Do not com		ie 46 (Political Camp	baign Ac	tivities	s), then		
		11(c)(3)) organizations: Complete P		Do not complete Par	+ I.B				
 Section 501(c) (other Section 527 organization 			ants I-A and C below.	Do not complete Par	ι I-D.				
U U	•	Form 990, Part IV, line 4, or For	m 990-E7 Part VI lii	ne 47 (Lobbying Act	ivitios) t	hen			
		nave filed Form 5768 (election und					art II-R		
		nave NOT filed Form 5768 (election		-	-				
		Form 990, Part IV, line 5 (Proxy							
Tax) (See separate inst		······································		,		.,	.,	(,	
 Section 501(c)(4), (5) 	, or (6) organizat	ions: Complete Part III.							
Name of organization					Employ	/er ide	ntification I	number	
	THE ADI	RONDACK COUNCIL, I	INC.			14-	159438	6	
Part I-A Comple	ete if the org	anization is exempt under	section 501(c) o	or is a section 52	27 orga	iniza	tion.		
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities ir	n Part IV.					
		ures			\$				
		gn activities							
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3	3).					
1 Enter the amount o	f any excise tax	incurred by the organization under	section 4955		\$ _				
2 Enter the amount o	f any excise tax	incurred by organization managers	under section 4955		\$ _				
3 If the organization i	ncurred a section	n 4955 tax, did it file Form 4720 fo	r this year?			. 🗆	Yes	No	
4a Was a correction m	ade?						Yes	No	
b If "Yes," describe ir	n Part IV.								
Part I-C Comple	ete if the org	anization is exempt under	section 501(c),	except section &	501(c)(3).			
1 Enter the amount d	irectly expended	l by the filing organization for secti	on 527 exempt functi	ion activities	\$_				
2 Enter the amount o	f the filing organ	ization's funds contributed to othe	r organizations for se	ction 527					
exempt function ac					\$ _				
3 Total exempt functi	on expenditures	. Add lines 1 and 2. Enter here and	on Form 1120-POL,						
		1120-POL for this year?					Yes	No	
		ployer identification number (EIN)						on	
		tion listed, enter the amount paid f							
		omptly and directly delivered to a s additional space is needed, provid			eparate s	segreg	ated fund or	a	
		• • •	1	1					
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid filing organizatio		• •	mount of po utions recei		
				funds. If none, ent			nptly and di		
							ered to a ser		
							ical organiza none, enter		
								<u> </u>	

Schedule C (Form 990) 2022 Part II-A Complete if the org	THE ADIRC)ND	ACK COUNCIL	, INC. $501(c)(3)$ and file	<u>14-1</u> d Form 5768 (ele	594386 Page 2
section 501(h)).						
A Check if the filing organiza	tion belongs to a	n affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and shar			. ,			
B Check if the filing organiza	tion checked box	(A ar	nd "limited control" pro	visions apply.	() =···	
	ts on Lobbying E ditures" means a		nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opin	ion (g	grassroots lobbying)			
b Total lobbying expenditures to influ	uence a legislative	e bod	y (direct lobbying)		27,759.	
c Total lobbying expenditures (add lii	nes 1a and 1b)				27,759.	
d Other exempt purpose expenditure	2,965,975.					
e Total exempt purpose expenditures	2,993,734.					
f Lobbying nontaxable amount. Ente	299,687.					
If the amount on line 1e, column (a) o	ount is:					
Not over \$500,000	20	% of t	the amount on line 1e.			
Over \$500,000 but not over \$1,000	Over \$500,000 \$1,000,000 \$100,000 \$100,000 \$100,000					
Over \$1,000,000 but not over \$1,5	00,000 \$1	75,00	0 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$2	25,00	0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1	,000,0	000.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)			74,922.	
h Subtract line 1g from line 1a. If zero	o or less, enter -0				0.	
i Subtract line 1f from line 1c. If zero	o or less, enter -0-				0.	
j If there is an amount other than zer	ro on either line 1	h or l	ine 1i, did the organiza	tion file Form 4720		
reporting section 4911 tax for this	year?					Yes No
	4-Yea	r Ave	eraging Period Under	Section 501(h)		
(Some organizations the second s			D1(h) election do not l ate instructions for lir	•	of the five columns be	low.
	Lobbying E	xper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2019		(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	263,01	.0.	277,962.	297,214.	299,687.	1,137,873.
b Lobbying ceiling amount (150% of line 2a, column(e))						1,706,810.
c Total lobbying expenditures	8,84	<u>1</u> 7.	3,792.	11,011.	27,759.	51,409.
d Grassroots nontaxable amount	65,75	53.	69,491.	74,304.	74,922.	284,470.
e Grassroots ceiling amount						
(150% of line 2d, column (e))						426,705.
f Grassroots lobbying expenditures						

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 THE ADIRONDACK COUNCIL, INC. 14-15943 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a) (b)))	
of the lobbying activity.	Yes	No	Amo	ount
 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? 				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
 h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? 				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), or sec	tion	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	'No" OR	(b) Part I	II-A, line	3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
expenses for which the section 527(f) tax was paid).				
a Current year				
b Carryover from last year		2 b		
c Total		2c		
		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (See	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
STATE OF NEW YORK PARTIES LOBBIED: THE NYS SENATE AND	ASSEM	BLY, G	OVERNC	R'S
OFFICE, NYS DEPARTMENT OF ENVIRONMENTAL CONSERVATION,	ADIRON	IDACK	PARK	
AGENCY, ENVIRONMENTAL FACILITIES CORPORATION, LAKE GEO	RGE PZ	ARK CO	MMISSI	ON;
FEDERAL (WASHINGTON, DC) PARTIES LOBBIED: US REP PAUL	TONKO	, US S	ENATE	
MAJORITY LEADER CHARLES SCHUMER, US SENATOR KIRSTEN GI	LLIBRA	AND, U	S	

Schedule C (Form 990) 20		ADIROND	ACK CC	DUNCIL,	INC.		-	L4-159	94386	Page 4
Part IV Suppleme	ntal Information	(continued)								
ENVIRONMENTAL	PROTECTION	AGENCY	(EPA)	, PRESI	DENT	JOSEPH	BIDEN	WERE	LOBBI	ED

ON THE FOLLOWING TOPICS IN REGARDS TO BILLS AND ISSUES PERTAINING TO

ADIRONDACK ENVIRONMENTAL CONSERVATION AND PRESERVATION FROM JULY 2022 TO

JUNE 2023:

ADIRONDACK CLEAN WATER INFRASTRUCTURE AND FUNDING

ENVIRONMENTAL PROTECTION FUND (EPF)

WILDLIFE KILLING CONTEST

WILDLIFE CROSSINGS ACT

BIRDS AND BEES PROTECTION ACT

DEBAR LODGE

MT. VAN HOEVENBERG

ALL-TERRAIN VEHICLES (ATV) MINIMUM AGE

TIMBUCTOO SUMMER CLIMATE AND CAREER INSTITUTE

SURVEY OF CLIMATE CHANGE AND ADIRONDACK LAKES ECOSYSTEMS (SCALE)

VISITOR USE MANAGEMENT FRAMEWORK

SEPTIC SYSTEM REPLACEMENT FUNDING

ADIRONDACK ROAD SALT REDUCTION TASK FORCE FUNDING

SAVE MORIAH SHOCK INCARCERATION FACILITY

NATIONAL AMBIENT AIR QUALITY STANDARDS

US EPA SCIENCE & TECHNOLOGY BUDGET

CLEAN AIR STATUS AND TRENDS NETWORK OPERATIONS & FUNDING

MILITARY TRAINING INSIDE THE ADIRONDACK PARK

	HEDULE D n 990)		Complete if the	ental Financial Statemen organization answered "Yes" on Form 99 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or	0,			20	1 545-0047 22
	ment of the Treasury I Revenue Service		Go to www.irs.gov/Fo	Attach to Form 990. m990 for instructions and the latest inform	mation.			Open to Public Inspection	
	e of the organizati					Emp	ployer i	dentificati	
	-			COUNCIL, INC.				-1594	
Par			ntaining Donor Ad Yes" on Form 990, Part	vised Funds or Other Similar Fund IV, line 6.	ds or Acc	coun	n ts. c	omplete if	the
				(a) Donor advised funds	(b) Fun	ids and	other acco	ounts
1	Total number at er	d of year							
2			s to (during year)						
3	Aggregate value o	grants from	(during year)						
		-	· ········						
4	Aggregate value a	•							
4 5		end of year			lvised funds	6			
•	Did the organization	end of year n inform all d	onors and donor adviso				[Yes	N
•	Did the organization are the organization	end of year n inform all d n's property,	onors and donor adviso subject to the organizat	rs in writing that the assets held in donor ad			[Yes	N
5	Did the organization are the organization Did the organization	end of year n inform all d n's property, n inform all g	onors and donor adviso subject to the organizat rantees, donors, and do	rs in writing that the assets held in donor ad ion's exclusive legal control?	be used on	ly	[Yes	N
5	Did the organization are the organization Did the organization for charitable purp impermissible priv	end of year n inform all d n's property, n inform all g oses and not ate benefit?	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do	rs in writing that the assets held in donor ad- ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos	be used on se conferrin	ly ng	[Yes	
5	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv	end of year n inform all d n's property, n inform all g oses and not ate benefit?	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 99	be used on se conferrin	ly ng	[
5 6	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserver Purpose(s) of conserver	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply).	be used on se conferrin 0, Part IV, li	ly ng ine 7.	[Yes	N
5 6 Par	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease of land for pu	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply). ecreation or education)	be used on se conferrin 10, Part IV, li n of a histor	ly ng ine 7. rically	importa	Yes	N
5 6 Par	Did the organization are the organization Did the organization for charitable purp impermissible privi- t II Conserv Purpose(s) of conservation Preservation Protection of	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease of land for pu f natural habit	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re tat	rs in writing that the assets held in donor ad ion's exclusive legal control? nor advisors in writing that grant funds can b nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 990 nization (check all that apply).	be used on se conferrin 10, Part IV, li n of a histor	ly ng ine 7. rically	importa	Yes	N
5 6 Par 1	Did the organization are the organization Did the organization for charitable purp impermissible prive t II Conserv Purpose(s) of conservation Protection on Preservation	end of year n inform all d n's property, n inform all g oses and not ate benefit? ation Ease ervation ease of land for pu f natural habit of open space	onors and donor adviso subject to the organizat rantees, donors, and do for the benefit of the do ments. Complete if the ments held by the organ ublic use (for example, re tat	rs in writing that the assets held in donor ad- ion's exclusive legal control? nor advisors in writing that grant funds can be nor or donor advisor, or for any other purpos ne organization answered "Yes" on Form 99 nization (check all that apply). ecreation or education) Preservation Preservation	be used on se conferrin 0, Part IV, li n of a histor n of a certifi	ly ng ine 7. ically ed his	importa	Yes	N
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4 Number of states where property subject to conservation easement is located

5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of
	violations, and enforcement of the conservation easements it holds?
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the	e year
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8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	🗌 No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and	

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of	
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,	,
	provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1 \$	

		Ψ
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provid	e
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	\$

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

Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets <i>(continued)</i> a Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its a — Pable orbitation d Lean or exchange program b Bit orbitation e Other c Provide a description of the organization solections and explain how they further the organization's occurred to receive donations of art, historical treasures, or other similar assets to be sold to receive donations of art, historical treasures, or other similar assets to be sold to registration is acquired as part of the organization's collection? Yes No. Part III Escrow and Custodial Arrangements. Complete the following table: Yes No. d Ist the organization and using the organization's acquired to a mount on form 900, Part X ist 21. Yes No. d Interval explain the arrangement in Part XIII and complete the following table: Yes No. d Interval explain the arrangement in Part XIII. Chack here if the arganization and the organization and the site asset in the organization and the organization and the arrangement in Part XIII. Chack here if the arganization and the organization and the organization. Yes No.	_	chedule D (Form 990) 2022 THE ADIRONDACK COUNCIL, INC. 14-1594386 Page 2									
collection terms (check all that apply): 	Par	t III Organizations Maintaining Co	ollections of Art,	, Historical Tre	asures, or O	ther S	Similar	Assets	contin	nued)	
a Public exhibition d □ can or exchange program b Scholary research e □ Other	3	Using the organization's acquisition, accessio	n, and other records	, check any of the f	following that ma	ike sign	ificant us	se of its			
b Scholarly research e Other c Preservation for future generations Provide a description of the organization scolections and explain how they further the organization's exempt purpose in Part XIII. 5 Uning the year, dd the organization scolection? Yes No Part V Escrow and Cutstodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Yes No b if "Yes," explain the arrangement in Part XIII and complete the following table: Amount Amount c Beginning balance 1e Amount 1e d Distributions during the year 1e 1e 1e 1e d Distributions during the year 1e		collection items (check all that apply):									
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funder funders on the manifamed as part of the organization answered "Yes" on Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization and or form 990, Part X, line 21. The second of the assets and induced on Form 990, Part X, line 21. 1a Is the organization and or form 990, Part X, line 21. The organization and organization and organization and organization assets not included on Form 990, Part X The organization and organization and organization assets not included on Form 990, Part X, line 21. 1a Is the organization and organization include an amount on Form 990, Part X, line 21, for secrow or custofial account liabity? Yes No Part V Endowment Funds. Complete if the organization answered Yes' on Form 990, Part X, line 21, for secrow or custofial account liabity? Yes No Part V Endowment Funds. Complete if the organization answered Yes' on Form 990, Part X, line 21. Yes No b If Yes, vapian the arrangement in Part XIII. Check here if the explanation thas been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered Yes' on F	а	Public exhibition	d	Loan or exc	hange program						
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be add to raise funds rather than to be maintained as part of the organization's collection? Part W ESCOW and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 980, Part X, line 9, or reported an amount on Form 980, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Is a list organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Is a list organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X? Beginning balance Amount tel Amount tel Additions during the year Itel Id Id	b	Scholarly research	е	Other							
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Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 729, 314, 782, 669, 553, 963, 573, 033, 516, 696, 53, 025, 00, 63, 025, 00, 63, 025, 00, 00, 00, 00, 00, 00, 00, 00, 00, 0	2a						?		Yes] No
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b Contributions 18,797. 131,996. 80,973. 22,000. 63,025. c Net investment earnings, gains, and losses 76,076. -152,751. 147,733. -10,070. 8,312. d Grants or scholarships 9 34,000. 32,600. 31,000. 15,000. f Administrative expenditures for facilities 34,000. 32,600. 31,000. 15,000. g End of year balance 790,187. 729,314. 782,669. 553,963. 573,033. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a a 563,963. 573,033. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a 36.9300 % b Permanent endowment 27.3500		_			., ,				(e) Fou		
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d Grants or scholarships	b	Contributions		,	,			,		,	
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b Permanent endowment 27.3500 % c Term endowment 36.9300 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (ii) Related organizations (ii) Related organizations (ii) Related organizations (iii) Related line 3a(ii), are the related organization's endowment funds. Pert VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value b Buildings 292, 395. 148, 640. 143, 755. c Leasehold improvements 59, 796. 48, 015. 11, 781. c Other c Other c Other c Other c Other	2			(line 1g, column (a))) held as:						
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4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation 1a Land 100,000. b Buildings 292,395. c Leasehold improvements 59,796. d Equipment 14,640. e Other 257,169.											
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other Description of property (a) Cost or other (b) Cost or other (c) Accumulated 1a Land 100,000. 100,000. b Buildings 292,395. 148,640. 143,755. c Leasehold improvements 59,796. 48,015. 11,781. d Equipment 14,640. 13,007. 1,633. e Other 257,169.	D								30		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.Description of property(a) Cost or other basis (investment)(c) Accumulated depreciation(d) Book value1a Land100,000.100,000.b Buildings292,395.148,640.143,755.c Leasehold improvements59,796.48,015.11,781.d Equipment14,640.13,007.1,633.e OtherTotal. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)257,169.	Par			ment tunds.							
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land100,000.100,000.100,000.b Buildings292,395.148,640.143,755.c Leasehold improvements59,796.48,015.11,781.d Equipment14,640.13,007.1,633.e Other70tal. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.)257,169.				Part IV line 11a S	ee Form 990 Pa	art X lina	e 10				
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b Buildings 292,395. 148,640. 143,755. c Leasehold improvements 59,796. 48,015. 11,781. d Equipment 14,640. 13,007. 1,633. e Other 70tal. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 257,169.		Description of property		ent) basis	(other)	• •			.,		
c Leasehold improvements 59,796. 48,015. 11,781. d Equipment 14,640. 13,007. 1,633. e Other 70tal. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 257,169.	1a	Land									
d Equipment 14,640. 13,007. 1,633. e Other 70tal. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 257,169.	b	Buildings									
e Other Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 257, 169.	с	Leasehold improvements								-	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X. column (B), line 10c.)				1	4,640.	1	.3,00	7.		1,6	33.
									<u> -</u>		<u> </u>
	Tota	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part X	<u>, column (B), line 1</u>	0c.)					-	b9.

Schedule D (Form 990) 2022

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
iotal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	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	
(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"	on Form 990 Part IV line	11d See Form 990 Part X line 15	
	Description		(b) Book value
(1) BENEFICIAL INTEREST IN ASS		ADTRONDACK	
		ADIRONDACK	790,18
			1,776
	ATING LEASES		202,27
	AIING DEASES		
(5)			
(6)			
(7)			
(8)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	9 15.)		994,240
	on Form 000 Dout IV line	110 or 11f Soo Form 000 Doct V	line 05
Complete if the organization answered "Yes"	on Form 990, Part IV, line	THE OF THE SEE FORM 990, Part X,	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) LEASE LIABILITIES - OPERAT	LING		100.00
(3) LEASES			199,28
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			199,28

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

Schedule D (Form 990) 2022 THE ADIRONDACK COUNCIL, INC. Part VII Investments - Other Securities.

ADIRONDACK COUNCIL, INC. 14-1594386 Page 3

Sche	dule D (Form 990) 2022 THE ADIRONDACK COUNCIL,	INC.		14-1	1594386	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	tements Wit	h Revenue per Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,042,	,078.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	1,049,223.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	1,049	<u>,223.</u>
3	Subtract line 2e from line 1			3	2,992,	,855 .
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	-26,343.			
с	Add lines 4a and 4b			4c	-26	,343.
5					2,966	,512.
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	atements Wi	th Expenses per	Returr	า.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.				
1	Total expenses and losses per audited financial statements			1	3,020	<u>,077.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	26,343.			
е	Add lines 2a through 2d			2e	26,	<u>,343.</u>
3	Subtract line 2e from line 1			3	2,993	,734.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		5	2,993	,734.
Pa	t XIII Supplemental Information.					

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

PART V, LINE 4:

THE FOREVER WILD FUND IS A QUASI-ENDOWMENT MANAGED TO PROVIDE SUSTAINABLE
INCOME FOR, AND TO SUPPORT, THE ADIRONDACK COUNCIL'S WORK INCLUDING
RESEARCH, MONITORING, EDUCATION, LEGAL ANALYSIS AND CONSERVATION PROJECTS
TO SECURE THE FUTURE OF THE ADIRONDACKS. WITH APPROVAL BY AT LEAST 3/4 OF
THE BOARD OF DIRECTORS, FUNDS IN ADDITION TO AN ANNUAL OPERATING
WITHDRAWAL OF UP TO 5% CAN BE USED FOR EXTRAORDINARY PURPOSES FOR LEGAL OR
OTHER EMERGENCY ACTION TO PROTECT THE INTEGRITY OF THE ADIRONDACK PARK,
THE "FOREVER WILD" CLAUSE OF THE NYS CONSTITUTION, AND/OR THE ECOLOGICAL
INTEGRITY OF THE ADIRONDACKS.

Schedule D (Form 990) 2022 THE ADIRONDACK COUNCIL, INC.	14-1594386 Page 5
Part XIII Supplemental Information (continued)	
THE COUNCIL IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE
INTERNAL REVENUE CODE. THE COUNCIL HAS ALSO BEEN CLASSIFIED	BY THE
INTERNAL REVENUE SERVICE AS AN ENTITY THAT IS NOT A PRIVATE	FOUNDATION.
UNDER FASB ASC 740, INCOME TAXES, THE TAX STATUS OF TAX-EXE	MPT ENTITIES IS
AN UNCERTAIN TAX POSITION, SINCE EVENTS COULD POTENTIALLY O	CCUR THAT
JEOPARDIZE TAX-EXEMPT STATUS. THE COUNCIL'S MANAGEMENT IS	NOT AWARE OF
ANY EVENTS THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS. TH	EREFORE, NO
LIABILITY OR PROVISION FOR INCOME TAX HAS BEEN REFLECTED IN	THE FINANCIAL
STATEMENTS.	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
EVENT EXPENSES	-10,533.
RENTAL EXPENSES	-15,810.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-26,343.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
EVENT EXPENSES	10,533.
RENTAL EXPENSES	15,810.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	26,343.

Name of the organization Employer identification number THE ADIRONDACK COUNCIL, INC. 14–1594386 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)	No
 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 	tal tures nd ients
 Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 	tal tures nd ients
 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 	tal tures nd ients
 the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 	tal tures nd ients
 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 	tal tures nd ients
United States.	tures nd ients
3 Activities per Region (The following Part L line 3 table can be duplicated if additional space is needed)	tures nd ients
	tures nd ients
(a) Region(b) Number of offices in the region(c) Number of employees, agents, and in the region(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to(e) If activity listed in (d) is a program service, describe specific type(f) To expend for a investments	
contractors recipients located in the region) of service(s) in the region in the region	gion
CENTRAL AMERICA AND	
THE CARIBBEAN -	
ANTIGUA & BARBUDA, INVESTMENTS IN POOLED	
ARUBA, BAHAMAS, 0 0 INVESTMENTS INTEREST	٥.
	0.
b Total from continuation sheets to Part I 0 0	٥.
sheets to Part I 0 0 c Totals (add lines 3a 0 0	υ.
and 3b)	

Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

Schedule F (Form 990) 2022

OMB No. 1545-0047

Open to Public

SCHEDULE F (Form 990)

Department of the Treasury

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
2 Enter total number of	recipient organizatior	ns listed above that are r	ecognized as charities by the t	foreign country,	recognized as a tax	1	1		
exempt 501(c)(3) orga	nization by the IRS, o	or for which the grantee of	or counsel has provided a sect	ion 501(c)(3) equ	vivalency letter	►			
3 Enter total number of other organizations or entities									

Schedule F (Form 990) 2022

14-1594386

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE J		Compensation Information		OMB No.	1545-00	147
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highes	t	20	22)
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line	0 2	20	22	-
Depar	Department of the Treasury Attach to Form 990.				o Publ	
Intern	Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.					
Nam	e of the organizatior			er identificatio		mber
Do	rt I Question	THE ADIRONDACK COUNCIL, INC.	14	-159438	6	
Pa		s Regarding Compensation				T
			000		Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on F	orm 990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.	araanalwaa			
	First-class or c					
	Travel for com	panions Payments for business use of persor ation and gross-up payments I Health or social club dues or initiatio				
		spending account Personal services (such as maid, cha				
			uneur, cherj			
h	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment o				
	•			1b		
2		require substantiation prior to reimbursing or allowing expenses incurred by all directo				
_		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if ar	ny, of the following the organization used to establish the compensation of the organizat	ion's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to					
	establish compensa	ation of the CEO/Executive Director, but explain in Part III.				
	Compensation	committee Written employment contract				
	Independent of	ompensation consultant X Compensation survey or study				
	X Form 990 of o	ther organizations I Approval by the board or compensat	on committee	;		
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	lated organization:				
а	Receive a severanc	e payment or change-of-control payment?		4a	<u> </u>	X
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b	 	X
с	-	eive payment from an equity-based compensation arrangement?		<u>4c</u>		X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
_	• •)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any comper	sation			
_	contingent on the re			50		x
a b	Any related organiz	ation?		<u>5a</u> 5b	<u> </u>	X
b		ation? r 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any comper	sation			
U	contingent on the n		Sation			
а	•			6a		x
	a The organization?b Any related organization?					x
-		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payn	ents			
	-	ies 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject				
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III				X	
9						
		53.4958-6(c)?	<u></u>			
LHA		eduction Act Notice, see the Instructions for Form 990.		nedule J (Forr	n 990) 2022

Schedule J (Form 990) 2022

14-1594386

Page **2**

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) WILLIAM C. JANEWAY	(i)	171,192.	0.	0.	10,590.	19,277.	201,059.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Schedule J (Form 990) 2022

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

Employer identification number

14 - 1594386

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30	0.
Attach to Form 990.	

Department of the Treasury Internal Revenue Service

Attach to Form 990. Open to Public Inspection Inspection

Name of the organization

THE ADIRONDACK COUNCIL, INC.

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribut		•	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	13	177,772.	FM7			
		21		111,1120	1 11 V			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution - Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
23 24	Archeological artifacts							
2 4 25								
	Other ()							
26	Other ()							
27	Other ()							
28	Other ()	a tha an al an tao						
29	Number of Forms 8283 received by the organiz	-						
	for which the organization completed Form 828	33, Part V, L	onee Acknowledg	ement 29				
					1		Yes	No
30a	During the year, did the organization receive by				I			
	must hold for at least 3 years from the date of t		,					37
	exempt purposes for the entire holding period?					30a		X
b	, , , , , , , , , , , , , , , , , , ,							
31	Does the organization have a gift acceptance p	olicy that re	quires the review of	of any nonstandard contribut	ions?	31	X	
32a	a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?					x		
b						JEa		
	If the organization didn't report an amount in co	olumn (o) for	a type of property	(for which column (a) is about	ked			
33			a type of property	nor which column (a) is chec	neu,			
	describe in Part II.	the leature	iono for Form 000)	Cabadula M	/Ferre	000	2000
LHA	For Paperwork Reduction Act Notice, see	me instruct	Ions for Form 990	<i>)</i> .	Schedule M	(Form	i aan)	2022

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

ALL STOCK GIFTS ARE RECEIVED BY CHARLES SCHWAB AND SOLD WITHIN A FEW

DAYS OF RECEIPT AND THE FUNDS DEPOSITED IN THE SCHWAB MONEY MARKET

ACCOUNT.

232142 09-09-22

SCHEDULE O (Form 990)

Name of the organization

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.



14 - 1594386

THE ADIRONDACK COUNCIL, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE ADIRONDACK COUNCIL ENSURES THE ECOLOGICAL INTEGRITY (CLEAN WATER

AND AIR, WILDLIFE HABITAT, ETC.), WILD CHARACTER (SOLITUDE, SCENIC

BEAUTY, ETC.), AND VIBRANT COMMUNITIES OF NEW YORK'S SIX-MILLION-ACRE

ADIRONDACK PARK.

232211 10-28-22

THE ADIRONDACK PARK IS A PATCHWORK OF PUBLIC AND PRIVATE LANDS,

CREATING UNIQUE CHALLENGES AND OPPORTUNITIES TO CREATE EFFECTIVE MODELS

FOR LARGE-LANDSCAPE CONSERVATION.

THE ADIRONDACK COUNCIL ENVISIONS THE PARK WITH LARGE CORE WILDERNESS AREAS, CLEAN WATER AND AIR , SURROUNDED BY WORKING FARMS AND FORESTS, AND AUGMENTED BY VIBRANT COMMUNITIES. TO ACHIEVE OUR VISION, WE EDUCATE THE PUBLIC AND POLICY MAKERS; ADVOCATE FOR REGULATIONS, POLICIES AND FUNDING; MONITOR PROPOSALS, LEGISLATION AND POLICIES IMPACTING THE PARK; AND, TAKE LEGAL ACTION TO UPHOLD CONSTITUTIONAL PROTECTIONS AND AGENCY POLICIES.

TO MEET OUR GOALS AND DEFEND THE ADIRONDACK PARK, THE ADIRONDACK COUNCIL'S ADVOCACY EFFORTS ARE FOCUSED ON DIRECT THREATS TO THE ECOLOGY AND WILD CHARACTER OF THE ADIRONDACKS INCLUDING SHORELINE DEVELOPMENT AND WATER DEGRADATION, THE FRAGMENTATION OF LARGE BLOCKS OF WORKING FOREST LANDS, USE OF MOTOR VEHICLES IN WILD AREAS, ROAD IMPACTS, AND INAPPROPRIATE DEVELOPMENT OF RIDGELINES AND OPEN AGRICULTURAL LANDS. THE COUNCIL WORKS TO STRENGTHEN STAKEHOLDER GROUPS AND COALITIONS WITH COMMON GOALS THAT BENEFIT THE COMMUNITIES, ECONOMY AND ENVIRONMENT OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 Name of the organization

THE ADIRONDACK PARK.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SESSION TO HELP SHAPE THE PROCESS. \$400 MILLION ENVIRONMENTAL PROTECTION FUND (EPF): WORKING WITH THE CLEAN WATER AND JOBS COALITION, THE COUNCIL HELPED SECURE A HISTORIC \$100 MILLION DOLLAR INCREASE IN EPF FUNDING, WITH \$40 MILLION EARMARKED FOR OPEN SPACE ACQUISITIONS OR CONSERVATION EASEMENTS. WILDLIFE FRIENDLY LEGISLATION PASSED: COUNCIL EFFORTS HELPED PASS WILDLIFE FRIENDLY LEGISLATION IN THE SENATE AND ASSEMBLY, INCLUDING A PROHIBITION ON THE KILLING OF WILDLIFE (SUCH AS COYOTES) FOR CASH AND PRIZES. IT AWAITS THE GOVERNOR'S SIGNATURE.

CLEAN WATER AND AIR: FIGHTING FOR CLEAN WATER AND CLEAN AIR, COMBATING INVASIVE SPECIES AND CLIMATE CHANGE. CLEAN AIR: US ENVIRONMENTAL PROTECTION AGENCY UPDATED ITS 2015 NATIONAL AMBIENT AIR QUALITY STANDARDS REDUCING UPWIND AIR POLLUTION CURRENTLY CAUSING ACID RAIN AND SMOG DAMAGE. THE ADIRONDACK COUNCIL STAFF TESTIFIED BEFORE EPA ON THE IMPORTANCE THESE CHANGES WILL HAVE ON REDUCING RATES OF ASTHMA AND PREMATURE DEATHS FROM LUNG AND HEART DISEASE IN THE NORTHEAST. WATERSHED COMMUNICATION: A \$50,000 GREAT LAKES BASIN SMALL GRANT WAS SECURED IN PARTNERSHIP WITH THE NORTHERN FOREST CANOE TRAIL TO HIRE A "HEADWATERS COORDINATOR" TO WORK WITH THE LAKE ASSOCIATIONS IN THE RAQUETTE LAKE WATERSHED. CLEAN WATER INFRASTRUCTURE: OVER THE LAST SEVEN YEARS, THE NYS CLEAN WATER FUND HAS AWARDED \$95M TO PARK COMMUNITIES TO KEEP POLLUTION OUT OF ADIRONDACK WATERS. OVER \$15M OF THESE GRANT AWARDS WERE MADE IN 2022-23 WITH SUPPORT AND ADVOCACY FROM THE COUNCIL. SURVEY OF CLIMATE AND ADIRONDACK LAKE ECOSYSTEMS (SCALE): Schedule O (Form 990) 2022 232212 10-28-22

Schedule O (Form 990) 2022	Page 2			
Name of the organization THE ADIRONDACK COUNCIL, INC.	Employer identification number 14-1594386			
	11 109 1000			
COUNCIL STAFF HELPED SECURE \$2 MILLION DOLLARS IN FUNDING	TO ASSIST			
THIS MULTI-INSTITUTIONAL PARTNERSHIP FOCUSED ON ASSESSING	CLIMATE			
CHANGE IMPACTS ON WATERBODIES ACROSS THE ADIRONDACKS. THIS	ANALYSIS			
WILL AUGMENT DATA FROM THE HISTORIC 1984-1987 ADIRONDACK LAKES SURVEY				
EFFORT, AOUATIC INVASIVE SPECIES CONTROL DISTRICTS: THE COUNCIL				
SUPPORTED THE PASSAGE OF LEGISLATION THAT WILL EXPAND THE AUTHORITY FOR				
ADIRONDACK COMMUNITIES TO RAISE REVENUES TO CONTROL AQUATI	C INVASIVE			
SPECIES LIKE THE ZEBRA MUSSEL. THIS BILL AWAITS THE GOVERN	OR'S			
SIGNATURE.				

FARMS AND FORESTS: PRESERVING OPEN SPACE AND SUPPORTING WORKING FORESTS AND FARMS. ADIRONDACK COUNCIL ESSEX FARM INSTITUTE: THE COUNCIL AWARDED 12 MICRO-GRANTS, TOTALING \$26,000, TO FARMERS AND VALUE-ADDED FOOD PRODUCERS TO SUPPORT CLIMATE-FRIENDLY FARMING PRACTICES AND ENERGY-EFFICIENT INFRASTRUCTURE PROJECTS. NORTHEAST WOLF RECOVERY ALLIANCE: THE COUNCIL JOINED PARTNERS FROM ACROSS THE NORTHEAST TO ASSIST IN POLICY, EDUCATION, AND SCIENTIFIC EFFORTS THAT WILL ENCOURAGE THE NATURAL RECOVERY OF WOLVES IN THE GREATER ADIRONDACK REGION. BIRDS AND BEEDS PROTECTION ACT: THE COUNCIL JOINED PARTNERS IN SECURING SIGNIFICANT LEGISLATIVE APPROVAL TO PROHIBIT THE USE OF A CLASS OF PESTICIDES IN CORN, WHEAT, AND SOY SEEDS, WHICH ARE HARMFUL TO POLLINATORS. BILL AWAITS GOVERNOR'S APPROVAL.

VIBRANT COMMUNITIES: FOSTERING A MORE RESILIENT, SUSTAINABLE ADIRONDACK
PARK WITH VIBRANT COMMUNITIES. GREEN JOBS: THE COUNCIL'S FOREVER
ADIRONDACKS CAMPAIGN HELPED CREATE AND SECURE \$2.1 MILLION IN FUNDS FOR
THE TIMBUCTOO SUMMER CLIMATE AND CAREERS INSTITUTE. THIS PARTNERSHIP
WITH CUNY MEDGAR EVERS AND THE SUNY COLLEGE OF ENVIRONMENTAL SCIENCE
232212 10-28-22
Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2				
Name of the organization THE ADIRONDACK COUNCIL, INC.	Employer identification number $14 - 1594386$				
AND FORESTRY WILL BRING HIGH SCHOOL STUDENTS TO THE ADIRON	DACKS TO				
STUDY AND LEARN ABOUT GREEN JOBS THIS SUMMER. COMMUNITY GR	ANTS: THE				
COUNCIL PARTNERED WITH THE RAQUETTE LAKE PRESERVATION FOUN	DATION TO				
AWARD \$18,000 IN GRANTS TO THREE LOCAL ORGANIZATIONS TO IM	PROVE				
CONNECTIVITY AND SUPPORT COMMUNITY EFFORTS IN THE RAQUETTE LAKE AREA.					
ATV MINIMUM AGE INCREASED: ADVANCING A RECOMMENDATION FROM THE					
ADIRONDACK COUNCIL'S 2019 ATV REPORT, THE COUNCIL HELPED RAISE THE					
LEGAL RIDING AGE FOR UNSUPERVISED ATV RIDERS FROM 10 TO 14	YEARS OF				
AGE.					

LEADERSHIP AND GOVERNMENT: LEADING, EXPANDING, AND DIVERSIFYING THE PARK'S CONSTITUENCY. THE BLACK, PUERTO RICAN, HISPANIC & ASIAN STATE LEGISLATIVE CAUCUS: HELD THEIR ANNUAL CAUCUS RETREAT IN THE ADIRONDACKS FOR THE SECOND YEAR IN A ROW. COUNCIL STAFF WORKED WITH THE CAUCUS TO SHARE MORE STORIES ABOUT THE PARK, INCLUDING THE ABOLITION AND SUFFRAGE MOVEMENTS. THE CAUCUS HAS BEEN A POWERFUL ALLY ON PARK RELATED CLIMATE AND ENVIRONMENTAL JUSTICE ISSUES. CLEAN WATER, CLEAN AIR AND GREEN JOBS BOND ACT: APPROVED IN NOVEMBER 2022, THE \$4.2 BILLION ACT WILL BENEFIT THE PARK'S ECOLOGY, ECONOMY, AND PUBLIC HEALTH THROUGH CAPITAL PROJECTS THAT CURB GREENHOUSE GASES AND COMBAT CLIMATE CHANGE. ADIRONDACK PARK LEADERSHIP: THE COUNCIL CHAMPIONED AND STRONGLY SUPPORTED THE APPOINTMENT OF BENITA LAW-DIAO, THE FIRST PERSON OF COLOR, TO THE ADIRONDACK PARK AGENCY (APA) BOARD. PROTECTING THE PUBLIC'S RIGHT TO COMMENT: COUNCIL MEMBERSHIP RESPONDED IN LARGE NUMBERS TO HELP REVERSE THE APA'S ATTEMPT TO REDUCE THE ABILITY OF THE PUBLIC TO PROVIDE COMMENT ON CRITICAL ISSUES BEFORE THE AGENCY.

Name of the organization

THE ADIRONDACK COUNCIL'S BY-LAWS OUTLINE THE ELIGIBILITY, TERMS,

CLASSIFICATIONS AND QUALIFICATIONS OF MEMEBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ADIRONDACK COUNCIL'S BY-LAWS STATE THAT THE BOARD OF DIRECTORS WILL BE ELECTED OR RE-ELECTED AT THE ANNUAL MEMBERS' MEETING IN ACCORDANCE WITH THE PROVISIONS OF THE TERM OF OFFICE.

FORM 990, PART VI, SECTION A, LINE 7B:

THE ADIRONDACK COUNCIL'S BY-LAWS OUTLINE THE MATTERS WHICH SHALL BE DECIDED BY A VOTE OF A MAJORITY OF THE MEMBERS AND CONTAIN PROVISIONS FOR SPECIFIC BY-LAWS THAT MAY BE AMENDED OR REPEALED BY THE MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ADIRONDACK COUNCIL'S AUDIT COMMITTEE MEMBERS REVIEW THE DRAFT 990 AND AUDITED FINANCIAL REPORT PREPARED BY THE CONTRACTED AUDITORS. THE COMMITTEE MEMBERS MEET VIA CONFERENCE CALL WITH THE AUDITORS TO DISCUSS ANY QUESTIONS, COMMENTS OR CONCERNS THEY MAY HAVE. THE COMPLETED 990 AND AUDITED FINANCIAL REPORT ARE MADE AVAILABLE TO ALL BOARD MEMBERS AND THE CHAIR OF THE AUDIT COMMITTEE ASKS FOR BOARD APPROVAL OF THE DOCUMENTS AT THE NEXT SCHEDULED BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

AT THE BEGINNING OF THE FISCAL YEAR, EACH BOARD MEMBER IS REQUIRED TO REVIEW AND SIGN THE ADIRONDACK COUNCIL'S CONFLICT OF INTEREST POLICY WHICH WAS ADOPTED BY THE BOARD OF DIRECTORS ON APRIL 13, 2006. UPON EMPLOYMENT, THE COUNCIL'S STAFF IS GIVEN THE POLICY TO REVIEW AND SIGN AS PART OF THE PERSONNEL MANUAL. THE PERSONNEL MANUAL IS REVIEWED ANNUALLY DURING STAFF 232212 10-28-22 Schedule O (Form 990) 2022 PERFORMANCE EVALUATIONS.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE AND UPDATED AS NECESSARY. THE BOARD CHAIR EVALUATES THE EXECUTIVE DIRECTOR'S ANNUAL PERFORMANCE BASED ON INPUT FROM OTHER BOARD MEMBERS. A NATIONAL SEARCH FIRM WAS USED IN RECRUITING AN EXECUTIVE DIRECTOR AND RECOMMENDED SALARY GUIDELINES AT THAT TIME. A COMPENSATION STUDY IS PERFORMED ANNUALLY BY THE BOARD CHAIR AND PRESENTED TO THE FULL BOARD. RESULTS OF THE STUDY ARE DOCUMENTED AND MAINTAINED IN A CONFIDENTIAL FILE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: NY,AL,AK,AR,CA,CO,CT,FL,GA,IL,HI,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NC,OH,OK OR,PA,RI,SC,TN,NV,UT,VA,WA,WV,WI,DC

FORM 990, PART VI, SECTION C, LINE 19:

COPIES OF THE ADIRONDACK COUNCIL'S THREE MOST RECENT 990S AND AUDITED FINANCIAL REPORTS ARE AVAILABLE ON OUR WEBSITE (WWW.ADIRONDACKCOUNCIL.ORG), BY WRITTEN OR IN-PERSON REQUESTS AT OUR ELIZABETHTOWN OFFICE. THE 990 IS A REQUIRED SUBMISSION AS PART OF THE STATE CHARITY RENEWAL PROCESS. THE ADIRONDACK COUNCIL IS LISTED ON THE GUIDESTAR AND CHARITY NAVIGATOR WEBSITES AND A MEMBER OF EARTH SHARE NEW YORK. WE DIRECT PEOPLE TO GUIDESTAR IN OUR PRINTED PUBLICATIONS AS THE 990 IS AVAILABLE FOR VIEWING AS PART OF OUR PROFILE. THE ADIRONDACK COUNCIL'S BY-LAWS ARE AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C

 THE
 ORGANIZATION
 HAS
 NOT
 CHANGED
 ITS
 OVERSIGHT
 OR
 Selection
 PROCESS
 FOR

 232212
 10-28-22
 Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page			
Name of the organization THE ADIRONDACK COUNCIL, INC.	Employer identification number 14-1594386		
THE AUDIT OF ITS FINANCIAL STATEMENTS.			