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CLIENT'S COPY

Prepared for:	Prepared by:
	HAVERLOCK, ESTEY & CURRAN LLC
DOWNEAST COASTAL CONSERVANCY	CERTIFIED PUBLIC ACCOUNTANTS
PO BOX 760	8 COMMERCE COURT
MACHIAS, ME 04654	HAMPDEN, ME 04444-1538

2023 FORM 990

ELECTRONIC FILING:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-TE TO US BY NOVEMBER 15, 2024.

0070 TE		IRS E-fil	e Signature	Authorization	ר ו	OMB No. 1545-0047
Form 8879-TE			a Tax Exem			
	For calendar year 2			, 2023, and ending	, 20	2023
Department of the Treasury			send to the IRS. Kee	•		
Internal Revenue Service		Go to www.ir	s.gov/Form8879TE fo	or the latest information		
Name of filer					EIN or SSN	+0070
		AL CONSER			^	*0078
Name and title of officer or pe	erson subject to tax					
	Determined f		IVE DIRECTOR	۲. Example 2		
51		Return Inform				
Check the box for the retu Form 5330 filers may enter or 10a below, and the am whichever is applicable, b than one line in Part I.	er dollars and cer ount on that line	its. For all other for the return bei	orms, enter whole doll ng filed with this form	ars only. If you check the was blank, then leave line	box on line 1a, 2a, 3 1b, 2b, 3b, 4b, 5b,	3a, 4a, 5a, 6a, 7a, 8a, 9a, 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check	here X	b Total rev	enue, if any (Form 990), Part VIII, column (A), lin	ie 12)	1b 561,511.
2a Form 990-EZ che		b Total rev	enue, if any (Form 990)-EZ, line 9)	,	2b
3a Form 1120-POL				22)		
4a Form 990-PF che	eck here			ome (Form 990-PF, Part V		4b
5a Form 8868 check				3c)		
6a Form 990-T chec				line 4)		
7a Form 4720 check						7b
8a Form 5227 check				ear (Form 5227, Item D)		
9a Form 5330 check				e 19)		
10a Form 8038-CP cl				uested (Form 8038-CP, I		10b
				r or Person Subject		100
complete. I further declard intermediate service provi acknowledgement of rece of any refund. If applicabl entry to the financial institi financial institution to deb later than 2 business days payment of taxes to recei personal identification num	ider, transmitter, sipt or reason for e, I authorize the cution account ind it the entry to thi s prior to the pay ve confidential in	or electronic retu rejection of the tr U.S. Treasury an dicated in the tax s account. To rev ment (settlement formation necess	rn originator (ERO) to ansmission, (b) the re- d its designated Finar preparation software roke a payment, I mus) date. I also authorize aary to answer inquirie	send the return to the IRS ason for any delay in proc icial Agent to initiate an e for payment of the federa t contact the U.S. Treasu the financial institutions s and resolve issues relat	S and to receive fron cessing the return or lectronic funds with al taxes owed on this ry Financial Agent a' involved in the proce red to the payment.	n the IRS (a) an refund, and (c) the date drawal (direct debit) s return, and the t 1-888-353-4537 no essing of the electronic I have selected a
PIN: check one box only						
X I authorize HA	VERLOCK,	ESTEY &	CURRAN LLC		to enter my Pl	
			ERO firm name			Enter five numbers, but do not enter all zeros
with a state age on the return's o As an officer or return. If I have	ency(ies) regulatir disclosure conse person subject to indicated within	ng charities as pa nt screen. o tax with respec this return that a	t to the entity, I will en	indicated within this retu program, I also authoriz ter my PIN as my signatu eing filed with a state age nsent screen.	e the aforementione re on the tax year 20	d ERO to enter my PIN 023 electronically filed
Signature of officer or person subj	ect to tax				Date	
Part III Certifica	ation and Aut	hentication				
ERO's EFIN/PIN. Enter ye	our six-digit elect	ronic filing identif	ication			
number (EFIN) followed by	y your five-digit s	elf-selected PIN.		0111950 Do not enter a		
I certify that the above nu submitting this return in a Business Returns.			-			
ERO's signature DAN	IIELLE A	GAGNON		Date	11/14/24	
			<u> </u>			
	_			- See Instructions		
				Unless Requested	IO DO SO	
For Privacy Act and Pap	erwork Reduction	on Act Notice, se	e instructions.			Form 8879-TE (2023)

Form 8868

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

Daut I Jalautifia atiau

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Id	entification			
Type or	ype or Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (
Print				
F 1 1 1	DOWNEAST COASTAL CONSERVANCY	**-***0078	3	
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 760			
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MACHIAS, ME 04654			
Enter the I	Return Code for the return that this application is for (file a separate application for each return)		01	

Annliestion la For	Datum	Application la For	Deturn
Application Is For	Return	Application Is For	Return
	Code		Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name

Plan Number		
Plan Year Ending (MM/DD/YYYY)		
Part II - Automatic Extension of Time To File for Exempt Organizations (see ins	structions)	
The books are in the care of COLIN BROWN, EXECUTIVE DI	RECTOR	
PO BOX 760 - MACHIAS, ME	04654	
Telephone No. 207-255-4500 Fax	No	
• If the organization does not have an office or place of business in the United St	ates, check this box	
• If this is for a Group Return, enter the organization's four-digit Group Exemption	Number (GEN) . If this is f	or the whole group, check this
box If it is for part of the group, check this box and attach a lis	t with the names and TINs of all mem	bers the extension is for.
1 I request an automatic 6-month extension of time until NOVEMBER 1	.5 , 20 24 , to file the exe	mpt organization return for
the organization named above. The extension is for the organization's return	ı for:	
X calendar year 20 23 or		
tax year beginning FOR YOUR RE	CURDS	, 20
2 If the tax year entered in line 1 is for less than 12 months, check reason:	Initial return Final retu	Irn
Change in accounting period		
3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tental	ive tax, less	
any nonrefundable credits. See instructions.	JLC 3a	\$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refun	dable credits and	
estimated tax payments made. Include any prior year overpayment allowed	as a credit. 3b	\$ 0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this f	orm, if required, by	
using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Department of the Treasury

Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2024 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



AI	or th	e 2023 calendar year, or tax year beginning and	ending				
Ba	Check if applicab	e: C Name of organization		D Employer identific	cation number		
	Addre						
	Name Chang						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
	Final return	PO BOX 760		207-255-			
	termir ated	, , , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	561,511.		
	Amen	MACHINS, ME 04054		H(a) Is this a group re			
	Applio tion pendi			for subordinates	? Yes X No		
	-	PO BOX /60, MACHIAS, ME 04654		H(b) Are all subordinates in			
-		empt status: $X 501(c)(3) 501(c) () () (insert no.) 4947(a)(1)$	or 🛄 527		list. See instructions		
	Websi		1	H(c) Group exemption			
_	_	f organization: X Corporation Trust Association Other	L Year	of formation: 1987	State of legal domicile: ME		
Pa	art I	Summary					
Governance	1	Briefly describe the organization's mission or most significant activities: NATU.	RAL/CU	ILTORAL RESO	URCE		
rna	2	Check this box if the organization discontinued its operations or dispo	sed of more	e than 25% of its net as	sets.		
ove	3				14		
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		14			
es 6	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			4		
viti		Total number of volunteers (estimate if necessary)			30		
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
-	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.		
				Prior Year	Current Year		
ē	8	Contributions and grants (Part VIII, line 1h)		347,049.	559,178.		
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.		
3eV	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		647.	2,333.		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		347,696.	561,511.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		180,178.	214,085.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
Хр	b	Total fundraising expenses (Part IX, column (D), line 25) 26,6		100 140	175 004		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		198,142.	175,224.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		378,320.	389,309.		
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12		-30,624. ginning of Current Year	172,202.		
Net Assets or Fund Balances				6,481,855.	End of Year 6,965,948.		
Sse Bala	20	Total assets (Part X, line 16)	······	6,009.	16,505.		
let ⊿ ind	21	Total liabilities (Part X, line 26)		6,475,846.	6,949,443.		
		Net assets or fund balances. Subtract line 21 from line 20		0,4/3,040.	0,747,443.		

Part II Signature Block

Т

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Т

Sign	Signature of officer		Date		
•	COLIN BROWN, EXECUTIVE DI	RECTOR			
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date Check	PTIN	
Paid	DANIELLE A GAGNON	DANIELLE A GAGNON		₽01353392	
Preparer	Firm's name HAVERLOCK, ESTEY	& CURRAN LLC	Firm's EIN **-	***1013	
Use Only	Firm's address 8 COMMERCE COURT				
	HAMPDEN, ME 04444-1538 Phone no.207-945-5695				
May the IRS discuss this return with the preparer shown above? See instructions					
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)				

Form	DOWNEAST COASTAL CONSERVANCY	**-***0078 Page 2
	rt 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:	
	NATURAL/CULTURAL RESOURCE CONSERVATION	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	ers, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 288,740. including grants of \$) (Revenue LAND AND CONSERVATION EASEMENT ACQUISITION AND STEWARDS)	
	PERMANENTLY PROTECT LANDS OF SCENIC, NATURAL RESOURCES, ECONOMIC AND OPEN SPACE VALUE IN WASHINGTON COUNTY, MAIN	
	ECONOMIC AND OPEN SPACE VALUE IN WASHINGTON COUNTY, MAIN	NE•
4b	(Code:) (Expenses \$ including grants of \$) (Reven) se
4c	(Code:) (Expenses \$ including grants of \$) (Revenue)) se
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses 288,740.	Earm 990 (2023)

Form	990	(2023)

Form 990 (2023) DOWNEAST COASTAL CONSERVANCY
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	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	5		x
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," <i>complete Schedule C, Part III</i>	5		- 23
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	•		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		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
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	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 approximant on Part IX, column (A), ling 12 If "Yes," complete Schedule I, Parts Land II.	21		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		- 43

Form 990 ((2023)	DOWNEAST	COASTAL	С
Part IV	Checklist o	f Required Scheo	dules (continue	d)

			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			v
	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			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	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			v
	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			x
	Schedule L, Part I	25b		
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%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		- 23
C	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	200	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
0L	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
-	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

_*	0078*	P
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Form		*- *** 0078	P	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?			x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	,		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			x
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
ou	any contributions that were not tax deductible as charitable contributions?			x
b		u		
D		6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to	the payor? 7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
0	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
C	to file Form 8282?			x
А	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
e f				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
g b	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as rec			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form	1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	3 1 1 1			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		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	1	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?
If "Yes," complete Form 6069.

17

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

X

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.

	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 1	4	100	
	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 1	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		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	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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		X
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 $_$ ME $_$			
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 onl	y) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	incial	
	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			
	COLIN BROWN, EXECUTIVE DIRECTOR - 207-255-4500			
	PO BOX 760, MACHIAS, ME 04654			

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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable	Estimated
	hours per week					is bot pr/trus		compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	Individual trustee or director				ted		organization	(W-2/1099-MISC/	from the
	related	ustee (truste		e.	pensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tri	ional		ploye	t com /ee	_	1099-NEC)		and related organizations
	line)	ndivid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) COLIN BROWN	40.00				×	1 0				
EXECUTIVE DIRECTOR		1		x				72,917.	0.	0.
(2) BEN EDWARDS	2.00									
TREASURER		X		Х				0.	0.	0.
(3) ROBIN PINTO	8.00									
PRESIDENT		Х		Х				0.	0.	0.
(4) ANNE BAKER	1.00									
TRUSTEE		X						0.	0.	0.
(5) PARKE RUBLEE	2.00									
SECRETARY		X		X				0.	0.	0.
(6) CAT CANNON	2.00									<u> </u>
VICE PRESIDENT	1 00	X		X				0.	0.	0.
(7) LESLIE PAGE	1.00							0	0	0
TRUSTEE	1 00	X						0.	0.	0.
(8) KAREN BEEFTINK	1.00	x						0.	0.	0.
TRUSTEE (9) LYMAN HOLMES	1.00	<u> </u>						0.	0.	0.
(9) LYMAN HOLMES TRUSTEE	1.00	x						0.	0.	0.
(10) MATT MANDINO	1.00							0.	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(11) KATE JANS	1.00									
TRUSTEE		x						0.	0.	0.
(12) LES COLEMAN	1.00									
TRUSTEE		x						0.	0.	0.
(13) DAVE WIMBERLY	1.00									
TRUSTEE		x						0.	0.	0.
(14) CHRISTOPHER BARTLETT	1.00									
TRUSTEE		X						0.	0.	0.
(15) GRENVILLE BLACKALL	1.00									
TRUSTEE		X						0.	0.	0.

	COASTAI								**_**	*00'	78 F	Page 8
Part VII Section A. Officers, Directors, Tru		ploy	ees			ighe	st C				(5)	
(A) Name and title	(B) Average hours per week	box	not c , unle	ss pe	ition more rson	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimat amount othe	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	/	ompens from th organiza and rela organizat	ne tion ted
		u	lns	Off	Kei	ΞĒ	Ы					
1b Subtotal		L				<u> </u>		72,917.	(.		0.
c Total from continuation sheets to Part								0. 72,917.).		0.
d Total (add lines 1b and 1c)2Total number of individuals (including but								-		•		
compensation from the organization											Yes	0 No
3 Did the organization list any former office			key e	empl	loye	e, o	hig	hest compensated emp	oloyee on		-	v
line 1a? If "Yes," complete Schedule J forFor any individual listed on line 1a, is the								her compensation from			3	X
and related organizations greater than \$1Did any person listed on line 1a receive o			•						idual for sonvicos	-	4	X
rendered to the organization? If "Yes," co	-				-			-			5	X
Section B. Independent Contractors 1 Complete this table for your five highest of	compensated inc	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of comp	ensati	on from	
the organization. Report compensation for								n the organization's tax				
(A) Name and busines	s address	NC	ONE	2				(B) Description of s	services	Con	(C) npensatio	on
							+					
							+					
2 Total number of independent contractors \$100,000 of compensation from the orga		ot lii	mite	d to		se li: 0	sted	l above) who received r	nore than			

Ра	rt '	VII	Check if Schedule O c			160	or note to any lin	e in this Part VIII			
			Oneck in Schedule O C			136 0		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts	1	b c	Federated campaigns Membership dues Fundraising events Related organizations		1b 1c						
ntributions, (I Other Simil		е	Government grants (contr All other contributions, gifts, similar amounts not included	ibutions grants, a above	s) 1e nd 1f		559,178. 36,610.				
Cor and		•			· [·3]+			559,178.			
Program Service Revenue	2	2 a b c d e f	All other program service								
			Total. Add lines 2a-2f								
	3	Ļ	Investment income (includ other similar amounts) Income from investment of Royalties	of tax-ex	empt bor	nd p	roceeds	2,333.			2,333.
			Gross rents Less: rental expenses	6a 6b	(i) Real		(ii) Personal				
	7	d	Rental income or (loss) Net rental income or (loss) Gross amount from sales of) Securitie		(ii) Other				
Revenue				7a 7b 7c							
			Net gain or (loss)								
Other	8	a	Gross income from fundraisir including \$ contributions reported on Part IV, line 18	line 1c)	of . See	8a					
			Less: direct expenses			8b					
	9		Net income or (loss) from Gross income from gamin Part IV, line 19	g activi	ties. See	ts 9a					
		b	Less: direct expenses			9b					
	10) a	Net income or (loss) from Gross sales of inventory, I and allowances	ess reti	urns	10a					
			Less: cost of goods sold Net income or (loss) from a			10b					
sr				5ai65 U	mventor	y	Business Code				
neor	11	a				_					
Miscellaneous Revenue		b c				_					
lisc. Re		d	All other revenue			-					
2			Total. Add lines 11a-11d				······				
	12		Total revenue. See instructio					561,511.	0.	0.	2,333.

DOWNEAST COASTAL CONSERVANCY

Form 990 (2023)

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DOWNEAST COASTAL CONSERVANCY

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		40 105		F 000
	trustees, and key employees	72,917.	48,125.	17,500.	7,292
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				44 588
7	Other salaries and wages	115,768.	76,407.	27,784.	11,577
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	10,752.	7,097.	2,580.	1,075
10	Payroll taxes	14,648.	9,667.	3,516.	1,465
11	Fees for services (nonemployees):				
а	Management				
b	Legal	2,020.		2,020.	
с	Accounting	8,488.	948.	7,540.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	14,479.	14,479. 339.		
12	Advertising and promotion	339.			
13	Office expenses	1,015.	1,015.		
14	Information technology				
15	Royalties				
16	Occupancy	17,376.	7,319.	8,319.	1,738
17	Travel	8,644.	8,644.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,709.	12,328.	381.	
23	Insurance	5,433.	4,550.	883.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а		36,610.	36,610.		
b	REAL ESTATE TAXES	17,715.	17,715.		
с	SUPPLIES	13,147.	12,157.	990.	
d	TRAIL MAINTENANCE	12,142.	12,142.		
е	All other expenses	25,107.	19,198.	2,388.	3,521
25	Total functional expenses. Add lines 1 through 24e	389,309.	288,740.	73,901.	26,668
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Check here

if following SOP 98-2 (ASC 958-720)

DOWNEAST	COASTAL	CONSERVANCY

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		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments		691,915.	2	515,915.	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			5,238.	9	5,042.
-	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,503,172.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	117,295.	3,398,586.	10c	3,385,877.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		2,386,116.	15	3,059,114.	
	16	Total assets. Add lines 1 through 15 (must equ	3)	6,481,855.	16	6,965,948.	
	17	Accounts payable and accrued expenses			6,009.	17	16,505.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV (of Schedule D		21	
es	22	Loans and other payables to any current or forr	ner offic	cer, director,			
i H		trustee, key employee, creator or founder, subs	tantial c	contributor, or 35%			
Liabilities		controlled entity or family member of any of the	ons		22		
	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate	d third p	parties		24	
	25	Other liabilities (including federal income tax, pa	yables ⁻	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D		····· _	<u> </u>	25	
	26	Total liabilities. Add lines 17 through 25			6,009.	26	16,505.
ŷ		Organizations that follow FASB ASC 958, che	eck her	e X			
JCe		and complete lines 27, 28, 32, and 33.			1 510 110		
alaı	27	Net assets without donor restrictions			1,510,118.	27	1,799,776.
d B	28	Net assets with donor restrictions			4,965,728.	28	5,149,667.
n		Organizations that do not follow FASB ASC 9	58, che	eck here			
Net Assets or Fund Balances		and complete lines 29 through 33.					
its (29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ea				30	
μA	31	Retained earnings, endowment, accumulated in				31	
Ň	32	Total net assets or fund balances			6,475,846.	32	6,949,443.
	33	Total liabilities and net assets/fund balances .			6,481,855.	33	6,965,948.

Form **990** (2023)

Form 990 (2023))	DOWNE
Part X	Bal	ance Sheet	

2 Total expenses (must equal Part IX, column (A), line 25)	561 389 172	,5	X
1 Total revenue (must equal Part VIII, column (A), line 12) 1 2 Total expenses (must equal Part IX, column (A), line 25) 2	561 389 172	,5	X
2 Total expenses (must equal Part IX, column (A), line 25)	389 172		
2 Total expenses (must equal Part IX, column (A), line 25)	389 172		
	172	`	
	475	, 8	46.
5 Net unrealized gains (losses) on investments 5			
6 Donated services and use of facilities			
7 Investment expenses 7			
8 Prior period adjustments 8			-
9 Other changes in net assets or fund balances (explain on Schedule O)9	301	, 3	95.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	949	,4	43.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response or note to any line in this Part XII			
)	/es	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 O.			
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	Х	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
consolidated basis, or both:			
X Separate basis Consolidated basis Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule 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?	3a		Х
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2023)

Department of the Treasury

Internal Revenue Service

(Form 990)

Total

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
	2023
	Open to Public Inspection
er	identification number

Name of	the organization	_						r identification number
	DOWN	EAST COAST	AL CONSERVAN	CY			*	*-***0078
Part I	Reason for Public	Charity Status.	(All organizations must o	complete th	his part.) S	See instruction	ns.	
The organ	nization is not a private found	lation because it is: ((For lines 1 through 12, o	check only	one box.)			
1 🛄	A church, convention of ch	urches, or associatio	on of churches describe	d in sectio	on 170(b)(1)(A)(i).		
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forr	n 990).)				
3 🔛	A hospital or a cooperative	hospital service orga	anization described in s	ection 170)(b)(1)(A)(i	ii).		
4	A medical research organiz	ation operated in co	njunction with a hospita	l described	d in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental	unit descrik	oed in
	section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6	A federal, state, or local go	vernment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).		
7 X	An organization that norma	Ily receives a substa	antial part of its support	from a gov	rernmenta	l unit or from	the general	public described in
	section 170(b)(1)(A)(vi). (C							
8	A community trust describe							
9	An agricultural research org	-			-		-	-
	or university or a non-land-	grant college of agric	culture (see instructions)	. Enter the	name, cit	y, and state c	f the colleg	je or
	university:							
10	An organization that norma							
	activities related to its exen							
	income and unrelated busin		e (less section 511 tax) fr	om busine	esses acqu	uired by the o	rganization	after June 30, 1975.
	See section 509(a)(2). (Con	• •	San ha da an da sa da Barra.	(-h. 0		00(-)(4)		
	An organization organized a	-	•	•				
12	An organization organized a	-	•	-			-	
	more publicly supported or							Jneck the box on
- L	lines 12a through 12d that				-		-	
a 🗆	Type I. A supporting orga the supported organizativ	-		•				
	the supported organization			a majonty o	or the dire	clors or trust	ses of the s	supporting
b 🗌	organization. You must c Type II. A supporting org	-		tion with it	te cunnort	od organizati	on(s) by br	wing
0	control or management o	-				-		-
	organization(s). You mus			ame perso			age the sup	oponed
c 🗌				in connec	tion with	and functiona	ally integrat	ed with
	c L Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.					cu with,		
d 🗌	Type III non-functionally						orted organ	ization(s)
u	that is not functionally int						-	
	requirement (see instruct			-		-	a an attorn	
e 🗌	Check this box if the orga						e II. Type III	
	functionally integrated, or						···, · / ···	
f Ent	er the number of supported of			0 0				
g Pro	vide the following informatior	n about the supporte	ed organization(s).					
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)
		1		1	1	1		1

Schedule A (Form 990) 2023

DOWNEAST COASTAL CONSERVANCY

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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	513,049.	1110061.	463,498.	347,049.	559,178.	2992835.
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	513,049.	1110061.	463,498.	347,049.	559,178.	2992835.
	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)						880,783.
6	Public support. Subtract line 5 from line 4.						2112052.
	ction B. Total Support						21120320
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	513,049.	1110061.	463,498.	347,049.	559,178.	2992835.
		515,045.	1110001.	403,490.	517,015.	555,170.	2772055.
ð	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	0,60	2 6 2 7	246	647	2 2 2 2 2	6 7 7 1
	and income from similar sources \dots	868.	2,627.	246.	647.	2,333.	6,721.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	1,643.	732.	80.			2,455.
11	Total support. Add lines 7 through 10						3002011.
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	2,461.
13	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 §	501(c)(3)	
	organization, check this box and stop						
See	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2023 (line 6, column (f), c	livided by line 11,	column (f))		14	70.35 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	65.75 %
	33 1/3% support test - 2023. If the c					nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organizatior	۱			X
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-	in non the organiz	
h	10% -facts-and-circumstances tes	-		• • • •	-		
~	more, and if the organization meets th						
	organization meets the facts-and-circ						
18	Private foundation. If the organization						
-10	i mate roundation. It the organizatio	an aid fiot offeon a		u, 100, 17a, 01 17k			(Eorm 990) 2023

Schedule A (Form 990) 2023

DOWNEAST COASTAL CONSERVANCY

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	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.)						
	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	vear as a section	501(c)(3) organiz	zation,
	check this box and stop here	~			•		
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2023 (line 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
	ction D. Computation of Inve		· · ·				
	Investment income percentage for 20			ne 13. column (f)))	17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box a						
۲	33 1/3% support tests - 2022. If the						
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
-0		and not oneon a	337 011 110 14, 13	a, or rob, or control i			·····

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
-		
2		
3a		
54		
3b		
3c		
30		
4a		
46		
4b		
4c		
5a		
5b		
50 50		
6		
7		
8		
_		
9a		
9b		
50		
9c		
100		
10a		
10b		

DOWNEAST COASTAL CONSERVANCY Schedule A (Form 990) 2023

1

2

3

No

Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A per	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	pelow, the governing body of a supported organization?	11a		
b	A fan	nily 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			
		i 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,
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
~	

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

Section C. Type II Supporting Organizations

Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1

Se	ction D. All Type III Supporting Organizations		
			Yes
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.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). 1
- а The organization satisfied the Activities Test. Complete line 2 below.
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С
- 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.

Yes

Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

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

Schedule A (Form 990) 2023

332027 12-21-23

				iea)	a
	ion D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		-	
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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 the	he organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 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) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
-	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
-	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, <i>explain in</i> Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
-	Excess from 2020				
-	Excess from 2021				
-	Excess from 2022				
-	Excess from 2022				

Schedule A (Form 990) 2023

DOWNEAST COASTAL CONSERVANCY Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 DOWNEAST	COASTAL CONSERVANCY	**-**0078 Page 8
Part VI Supplemental Information. Provide t	he explanations required by Part II, line 10 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV	
line 1; Part IV, Section D, lines 2 and 3; Part I Section D, lines 5, 6, and 8; and Part V, Secti (See instructions.)	V, Section E, lines 1c, 2a, 2b, 3a, and 3b; F	Part V, line 1; Part V, Section B, line 1e; Part V,
SCHEDULE A, PART II, LINE 10,	EXPLANATION FOR OTHE	R INCOME:
OTHER INCOME		
2019 AMOUNT: \$ 1,643.		
2020 AMOUNT: \$ 732.		
2021 AMOUNT: \$ 80.		

Identification of Excess Contributions Included on Part II, Line 5

-*0078

2023

	** Do Not File **	
***	Not Open to Public Inspection	***

Contributor's Name	Total Contributions	Excess Contributions
CHRISTINE NIELSEN	110,000.	49,960.
JOYCE AND LESTER COLEMAN	175,599.	115,559.
JOHN WOOLLAM	236,417.	176,377.
ELMINA B SEWALL FOUNDATION	87,500.	27,460.
CORNELIA GREAVES BATES	75,000.	14,960.
BOB AND ANNE BAKER	97,659.	37,619.
JONATHAN & MELINDA JACQUES	475,000.	414,960.
GILBERT BUTLER	103,928.	43,888.
Total Excess Contributions to Schedule A, Part II, Line 5		880,783.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one)

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

*	*	_	*	*	*	0	0	7	8
						υ.	v		υ.

DOWNEAST	COASTAL	CONSERVANCY
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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.

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.

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* religious is received *nonexclusively* religious.

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).

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

6

\$ 26,730.	Noncash
_	(Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$\$110,000.	Person X Payroll Noncash
-	(Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$37,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
-	Person X Payroll
\$35,000• 	Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
_	Person X
\$20,000.	Payroll Noncash
	(Complete Part II for
	(c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions

DALLAS, TX 75248

ANNE AND BOB BAKER

DOWNEAST COASTAL CONSERVANCY

LESTER AND JOYCE COLEMAN

7111 SPANKY BRANCH DRIVE

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

Schedule B (Form 990) (2023)

Name of organization

Part I

(a)

No.

(a)

No.

(a) No.

(a) No.

(a) No.

(a) No.

5

4

3

2

1

Employer identification number

-*0078

Person Payroll

Noncash

Person Payroll

(Complete Part II for

noncash contributions.)

(d)

Type of contribution

(d)

Type of contribution

X

X

(c)

Total contributions

(c)

Total contributions

\$

27,500.

323452 12-26-23

Name of organization

Employer identification number

-*0078

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 X MAINE COAST HERITAGE TRUST Person Payroll 16,500. 1 BOWDOIN MILL ISLAND, SUITE 201 Noncash \$ (Complete Part II for TOPSHAM, ME 04086 noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 8 X SOUTHERN MAINE CONSERVATION Person Payroll 15,000. 217 COMMERCIAL ST, SUITE 302 Noncash \$ (Complete Part II for PORTLAND, ME 04101 noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 9 X DAVIS CONSERVATION FOUNDATION Person Payroll 30 FOREST FALLS DRIVE, SUITE 5 12,700. Noncash \$ (Complete Part II for YARMOUTH, ME 04096 noncash contributions.) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 10 MAINE COMMUNITY FOUNDATION Х Person Payroll 245 MAIN STREET 11,700. Noncash \$ (Complete Part II for ELLSWORTH, ME 04065 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 11 MARILYN DOWLING Person Payroll X 171 LOOKS POINT ROAD 36,610. Noncash (Complete Part II for JONESBORO, ME 04648 noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Pavroll Noncash \$ (Complete Part II for noncash contributions.)

DOWNEAST COASTAL CONSERVANCY

	rganization	
DOWNE	AST COASTAL CONSERVANCY	
Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I if additional space is nee
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estim (See instructio
11	CONSERVATION EASEMENT - JONESBORO	_
		\$36,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estim (See instructio
		_
		\$
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estim (See instructio
		_
		\$
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estim (See instructio

		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	
a) o. pm rt l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
a) o. om ırt I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

(d)

Date received

10/02/23

(d)

Date received

-*0078

36,610.

Page 3

Schedule	B (Form 990) (2023)		Page 4				
Name of o	organization		Employer identification number				
DOWNE	AST COASTAL CONSERVANC	Y	**-***0078				
Part III	Exclusively religious, charitable, etc., contrib	utions to organizations described in sect (a) through (e) and the following line entry. s, charitable, etc., contributions of \$1,000 or less	ton 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations for the year. (Enter this info. once.) \$				
(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,	and 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				
		(e) Transfer of gift					
	Transferee's name, address,	and 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				
		(e) Transfer of gift					
	Transferee's name, address,		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,	and ZIP + 4	Relationship of transferor to transferee				

SCHEDULE D

(Form 9	3 90)
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Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

3 **Open to Public** Inspection

Employer identification number

-*0078

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

. . 1

Name of the organization

DOWNEAST COASTAL CONSERVANCY

I Total number at end of year (a) Denor advised funds (b) Funds and other accounts 1 Total number at end of year (a) Aggregate value of contributions to (during year) (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (c) Aggregate value of another accounts (c) Funds and other accounts 4 Aggregate value of another base and donor advisors in writing that the assets held in donor advised funds are to erganization accounts, subject to the organization accounts (c) equivalence (c) exclusive legal control? (c) exclusive legal control (c) exclusive legal control? (c) exclusive legal control (c) exclusive legal control? (c) exclusive legal control	Pa	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lir		IS OF ACCOU	Ints. Complete if the
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2 Aggregate value of contributions to (during year) 4 Aggregate value of contributions to (during year) 4 Aggregate value of ansists for (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisor, for any other purpose conferring memorization of purposes (and not for the benefit of the donor of donor advisor, or for any other purpose conferring memorization of and for public use (for example, recreation or education) Preservation of a biotrically important land area Preservation of a confision of a during habitat Preservation of open space C complete in the ax vest. Protection of natural habitat Preservation easements habitaty Preservation easements in advisor, and the advisor advisor, or terminated by the organization easements a total number of conservation easements a total anabitat Preservation dependence as a confit the bard of line 12x Vest A data areage restricted by conservation easements a total anabitat Preservation of conservation easements A under of conservation easements included on line 2a advisor advisor, or terminated by the organization withing the tax Perf A number of conservation easements included on line 2a conquire after July 25, 2006, and nt on a historic structure letted in the Nationaria Preservation easements included on line 2a advisor advisor, or terminated by the organization advisor advisor advisor, or terminated by the organization advisor advisor advisor, or terminate advisor adviso		Tabel south as at an disformer			
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 A Number of states where property subject to conservation easement is located	3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organizatior	n during the tax
 Inductor organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 500 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 10,000. Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization for conservation easements. Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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. 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. If the organization elected as permitted under FASB ASC 958. Is report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public e		year			
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500 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 10,000. 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization is accounting for conservation easements. Part III Organization answerd "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 X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts relating to these items. (i) Revenue included on Form		violations, and enforcement of the conservation easements	it holds?		X Yes No
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(ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a a 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) 2023					¢
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b Assets included in Form 990, Part X \$ LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. \$	~	•	-		¢
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023					
	-				
			5 101 1 0111 330.		

Sche	dule D (Form 990) 2023 DOWNEAS	T COASTAL (CONSERVANC	Y		*	*_**	*007	8 ра	age 2
Par	t III Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or	Other	^r Simila	r Asse	ts (contir	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that r	make sig	gnificant u	ise of its			
	collection items (check all that apply).									
а	Public exhibition	d		hange program	ו					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how they further t	he organizatior	ı's exem	pt purpos	se in Par	t XIII.		
5	During the year, did the organization solicit o						_	-		-
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran		e if the organization	n answered "Ye	es" on Fo	orm 990, I	Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod		•				_	-	37	1
	on Form 990, Part X?						L	Yes	X	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:					•		
								Amount		
	Beginning balance									
	Additions during the year									
	Distributions during the year									
t	Ending balance									1
	Did the organization include an amount on Fe					• • • • • • • • • • • • • • • • • • • •		Yes		J No ∣
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds Complete if									_
1 0		(a) Current year	(b) Prior year	(c) Two years	·	1) Three ye	ars hack	(a) Four	vears	hack
10	Deginning of year belongs	2,386,115.	2,801,102.				7,170.	. ,	,674,	
	Beginning of year balance	466,303.	2,001,102.	, ,			5,500.	1		500.
	Contributions						1,031.			806.
	Net investment earnings, gains, and losses Grants or scholarships	501,555.	505,112.	110,		20	1,001.		219,	
	Other expenditures for facilities									
e		94,700.	49,875.	59	805.	4	3,352.			
f	and programs Administrative expenses	51,700.	19,075.							
	End of year balance	3,059,113.	2,386,115.	2,801,	102	2 36	0,349.	1	907	170.
2	Provide the estimated percentage of the cur					-,	-,		,,	
	Board designated or quasi-endowment	41.4200	%	a)) Hold do.						
	Permanent endowment 1.8000	%	_,.							
	Term endowment 56.7800									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse		ation that are held a	nd administere	d for the	Э				
	organization by:	-						Γ	Yes	No
	(i) Unrelated organizations?							3a(i)	Х	
	(ii) Related organizations?									Х
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the		wment funds.							
Par	t VI Land, Buildings, and Equipm	nent								
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, I	Part X, lii	ne 10.				
	Description of property	(a) Cost or of	ther (b) Cost	or other	(c) Acc	cumulated	k	(d) Bool	< value	Э
		basis (investr	,	(other)	depr	eciation				
1a	Land		3,25	5,676.				3,25	5,6	76.
b	Buildings									
с	Leasehold improvements									
d	Equipment			9,139.		12,24				98.
	Other			8,357.	10	05,05			3,3	
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part .	X, line 10c, column	n (B))				3,38	5,8	77.

Schedule D (Form 990) 2023

	ASTAL CONSERV	ANCY	**-***0078 Page 3
Part VII Investments - Other Securities Complete if the organization answered "Yes"	on Form 000 Dort IV line	11b See Form 000 Dart V line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-vear market value
(1) Financial derivatives	(-)		
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" (a) Description of investment			and of your market yolyo
	(b) Book value	(c) Method of valuation: Cost or	end-or-year market value
<u>(1)</u>			
(2)			
(3)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets		•	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
.,	Description		(b) Book value
	SETS HELD BY	MAINE COMMUNITY	
(2) FOUNDATION			3,059,114.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, line 15, co.			3,059,114.
Part X Other Liabilities	. (Б))] 5,059,114.
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X line	25
I. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, co.	I. (B))		
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote t	o the organization's financial stateme	nts 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...

Sche	dule D (Form 990) 2023 DOWNEAST COASTAL CONSERVAN	ICY		**_	***0078	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	n Revenue per R	eturi	า	0
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ι.				
1	Total revenue, gains, and other support per audited financial statements			1	862	,906.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	_ 2a				
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d	301,395.			
е	Add lines 2a through 2d			2e		<u>,395.</u>
3	Subtract line 2e from line 1			3	561	,511.
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				_
С	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5		,511.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten		h Expenses per	Retu	irn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				200	
1	Total expenses and losses per audited financial statements			1	389	,309.
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					
d	Other (Describe in Part XIII.)					•
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	389	,309.
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					
b	Other (Describe in Part XIII.)	. 4b				•
С	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)			5	389	,309.
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 II, LINE 9:

EASEMENTS ACQUIRED BY THE ORGANIZATION ARE CONSERVATION EASEMENTS AND
REPRESENT NUMEROUS RESTRICTIONS OVER THE USE AND DEVELOPMENT OF LAND NOT
OWNED BY THE ORGANIZATION. THESE EASEMENTS GENERALLY PROVIDE THAT THE LAND
WILL BE MAINTAINED UNIMPAIRED IN ITS CURRENT NATURAL, SCENIC, OR
RECREATIONAL STATE. SINCE THE BENEFITS OF SUCH EASEMENTS ACCRUE TO THE
PUBLIC UPON ACQUISITION, THE FAIR VALUE OF EASEMENTS ACQUIRED IS SHOWN IN
THE YEAR OF ACQUISITION AS AN ADDITION TO NET ASSETS TO RECORD THE DONOR'S
GIFT AND SHOWN AS A REDUCTION IN NET ASSETS TO RECORD THE VALUE OF THE
PUBLIC'S BENEFIT AND TO RECOGNIZE THAT THESE EASEMENTS HAVE NO MARKETABLE
VALUE ONCE SEVERED FROM THE LAND AND HELD BY THE ORGANIZATION.

PART V, LINE 4:

ENDOWMENT FUNDS ARE INTENDED TO BE USED AS STEWARDSHIP FUNDS FOR VARIOUS

CONSERVATION LANDS AND EASEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN BENEFICIAL INTEREST IN ASSETS HELD BY MAINE

COMMUNITY FOUNDATION

301,395.

PART II, LINE 5

THE ORGANIZATION HAS WRITTEN POLICIES REGARDING MONITORING, INSPECTION,

HANDLING OF VIOLATIONS, AND ENFORCING CONSERVATION EASEMENTS IT HOLDS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Dant

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number **-***0078

Name of the organization

T....

DOWNEAST COASTAL CONSERVANCY

Pa	TI Types of Property							
		(a) Check if	(b) Number of contributions or	(c) Noncash contributior amounts reported or		etermir	•	
		applicable		Form 990, Part VIII, line		ution a	mount	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							
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	X	1	36,61	0.FAIR VALUE			
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 organi	zation durin	g the tax year for o	ontributions	I			
	for which the organization completed Form 82						0	
	°						Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rei	oorted in Part I, lines 1 th	rough 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and wh	ich isn't required to be u	sed for			
	exempt purposes for the entire holding period					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard con	tributions?	31	Х	
32a	Does the organization hire or use third parties							
	contributions?		•			32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is	checked,			
	describe in Part II.				·			
For F	Paperwork Reduction Act Notice, see the Inst	tructions fo	r Form 990.		Schedule I	M (Forr	n 990)	2023

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, PART I, COLUMN (B):

Part II

1 CONSERVATION EASEMENT WAS DONATED TO ORGANIZATION.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

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.



Employer identification number **-***0078

DOWNEAST COASTAL CONSERVANCY

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS MEMBERS. EACH MEMBER RECIEVES ONE VOTE. MEMBERS ELECT

THE MEMBERS OF THE GOVERNING BODY.

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

MEMBERS MEET ANNUALLY TO ELECT MEMBERS OF THE GOVERNING BODY.

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

BOTH THE BOARD OF DIRECTORS AND THE EXECUTIVE DIRECTOR REVIEW THE RETURN

PRIOR TO FILING.

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

THE ORGANIZATION REGULARILY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ON A YEARLY BASIS.

FORM 990, PART VI, SECTION C, LINE 18:

FORMS 1023 AND 990 ARE AVAILABLE UPON REQUEST. FORM 990 IS ALSO AVAILABLE

ON WWW.GUIDESTAR.COM AND ON WWW.DOWNEASTCOASTALCONSERVANCY.ORG.

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

GOVERNING DOCUMENTS, FORM 990, AND FINANCIAL STATEMENTS ARE AVAILABLE TO

THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSETS HELD BY

FORM 990 PAGE 10

ona j.	90 PAGE 10					_		990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
201	REFRIGERATOR	01/12/96	SL	5.00		16	158.				158.	158.		0.	158.
202	2 TABLES	01/30/96	SL	5.00		16	147.				147.	147.		0.	147.
203	2 FILE CABINETS	01/30/96	SL	7.00		16	275.				275.	275.		0.	275.
204	2 STORAGE RACKS	01/16/96	SL	5.00		16	106.				106.	106.		0.	106.
205	MAP CABINETS	09/18/97	SL	7.00		16	133.				133.	133.		0.	133.
207	CANOPY	01/01/97	SL	10.00		16	212.				212.	212.		٥.	212.
213	I MAC G5 COMPUTER	06/28/06	SL	5.00		16	1,726.				1,726.	1,726.		0.	1,726.
214	FILING CABINET	06/22/07	SL	7.00		16	756.				756.	756.		0.	756.
609	COMPUTER AND PRINTER	12/15/09	SL	5.00		16	2,350.				2,350.	2,350.		0.	2,350.
615	OFFICE SIGNS	12/08/09	SL	5.00		16	700.				700.	700.		0.	700.
648	HP ENVY LAPTOP - RICH	02/20/14	SL	5.00		16	1,134.				1,134.	1,134.		0.	1,134.
652	DOCK	04/01/16	SL	15.00		16	1,681.				1,681.	756.		112.	868.
659	CAMERA AND LENS SYSTEM	03/31/21	SL	7.00		16	3,123.				3,123.	781.		446.	1,227.
660	VIDEO CONFERENCE CALL SYSTEM	05/25/21	SL	7.00		16	2,636.				2,636.	597.		377.	974.
661	LAPTOP	07/12/21	SL	5.00		16	1,995.				1,995.	599.		399.	998.
671	DRONE (EMCI GRANT)	04/25/22	SL	7.00		16	2,003.				2,003.	191.		286.	477.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						19,135.				19,135.	10,621.		1,620.	12,241.

FORM 990 PAGE 10

990

	90 PAGE IU					_		990		_					
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL -						19,135.				19,135.	10,621.		1,620.	12,241.
	LAND														
298	G-P PROPERTY - CALAIS - 41 ACRES	12/31/91	L				6,450.				6,450.			٥.	
299	MORONG MARSH - LUBEC5 ACRE	12/31/97	L				300.				300.			0.	
300	HUCKINS & GILBERT ISLANDS - LUBEC - 16 ACRES	12/31/97	L				46,800.				46,800.			0.	
301	GARDNER LAKE LOT - MARION TWP - 137 ACRES	12/31/00	L				8,928.				8,928.			0.	
302	DENBOW POINT - LUBEC - 55.5 ACRES	03/22/02	L				30,000.				30,000.			٥.	
303	BAR ISLAND - TRESCOTT TWP - 9.4 ACRES	12/18/02	L				30,900.				30,900.			0.	
304	ORANGE RIVER - WHITING - 8.3 ACRES	02/25/03	L				7,678.				7,678.			0.	
305	GILMAN DAM - COOPER - 103 ACRES	01/14/03	L				13,597.				13,597.			0.	
306	PRESTON/SMALL RIVER- EDMUNDS TWP - 10.5 ACRES	04/14/03	L				7,727.				7,727.			٥.	
308	BEAVER DAM STREAM - WESLEY - 92 ACRES	10/02/03	L				16,378.				16,378.			0.	
310	MOWRY BEACH - LUBEC - 48 ACRES	03/15/04	L				35,659.				35,659.			0.	
313	PIKES LAND - LUBEC - 92 ACRES	03/30/05	L				153,961.				153,961.			0.	
314	RAFT COVE LAND - TRESCOTT TWP - 4.5 ACRES	03/31/04	L				27,682.				27,682.			0.	
315	LONG COVE - PEMBROKE - 194.4 ACRES	03/14/06	L				241,708.				241,708.			0.	
316	BAILEY FIELD - LUBEC - 8.5 ACRES	08/31/07	L				12,104.				12,104.			٥.	
317	BANFIELD LOT - WHITING - 1.4 ACRES	10/01/08	L				11,547.				11,547.			0.	

328111 04-01-23

(D) - Asset disposed

FORM 990 PAGE 10

990	
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	90 PAGE 10							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
318	LUBEC SALT MARSH - LUBEC - 4.4 ACRES	05/27/08	L				32,362.				32,362.			0.	
319	TYNAN LAND - TRESCOTT TWP (GIFT) - 1.5 ACRES	02/14/08	L				17,100.				17,100.			0.	
612	PIGEON HILL	10/30/09	L				41,385.				41,385.			0.	
613	INGERSOL POINT/ADDISON	12/29/09	L				60,960.				60,960.			0.	
614	ADLER (GIFT)	12/29/09	L				189,023.				189,023.			0.	
616	BEAVER MEADOW BROOK	12/31/07	L				25,373.				25,373.			0.	
617	BEAVER MEADOW MARSH	02/13/06	L				39,000.				39,000.			0.	
619	BROWNEY ISLAND	12/24/96	L				6,000.				6,000.			0.	
620	DRISKO FARM/ROWLEY	12/31/07	L				55,457.				55,457.			0.	
621	MARSH ISLAND	12/31/92	L				63,000.				63,000.			0.	
622	MARY'S ISLAND	09/30/02	L				9,000.				9,000.			0.	
623	PARTRIDGE ISLAND	02/13/06	L				12,000.				12,000.			0.	
624	PIGEON HILL	12/31/07	L			_	211,069.				211,069.			0.	
625	SAND & OVER COVE	08/05/05	L				46,500.				46,500.			0.	
626	TIBBETT ISLAND	12/31/07	L				180,715.				180,715.			0.	
627	TIDE MILL CREEK	09/28/00	L				14,700.				14,700.			0.	
628	VIRGIN'S BREAST	11/08/99	L				3,000.				3,000.			0.	
629	WEST CARRYING PLACE COVE	12/21/05	L				57,000.				57,000.			0.	

328111 04-01-23

(D) - Asset disposed

FORM 990 PAGE 10

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0101 9.	90 PAGE 10	-						990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
630	PIGEON HILL	12/31/08	L				12,171.				12,171.			٥.	
631	PIGEON HILL (COPLON)	07/08/10	L				28,218.				28,218.			0.	
632	CURTIS POINT	09/15/10	L				83,334.				83,334.			0.	
633	PLUMMER POINT	12/10/10	L				86,924.				86,924.			0.	
634	GRAIN POINT	12/15/10	L				159,006.				159,006.			0.	
635	PLEASANT RIVER MARSH 1	01/01/10	L				228.				228.			0.	
636	OVER'S POINT - BAIRNBRAE	01/25/11	L				3,600.				3,600.			0.	
637	PLEASANT RIVER MARSH 2	03/29/11	L				255.				255.			0.	
638	INGERSOLL POINT (EHLS PARCEL)	07/21/11	L				56,699.				56,699.			0.	
639	ORANGE RIVER - MAHANA- WHITING	06/27/12	L				70,172.				70,172.			٥.	
640	KLONDIKE MOUNTAIN	06/27/12	L				113,728.				113,728.			0.	
641	MIDDLE RIVER	03/25/13	L				49,156.				49,156.			0.	
642	MACHIAS RIVER - FITZGERALD PROPERTY	02/01/13	L				287,126.				287,126.			٥.	
643	MACHIAS RIVER - RIER	06/27/13	L				34,882.				34,882.			0.	
	ROARING LAKE I - REINHART PROPERTY	10/25/13	L				76,392.				76,392.			0.	
	ROARING LAKE II - THATCHER PROPERTY	10/25/13	L				15,839.				15,839.			0.	
646	SHEEP ISLAND	12/19/14	L				41,217.				41,217.			0.	
647	POVERTY ISLAND	02/18/14	L				16,135.				16,135.			0.	

328111 04-01-23

(D) - Asset disposed

FORM 990 PAGE 10

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0101 9.	JU PAGE 10							330							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
649	BENOIT PROPERTY	02/27/15	L				40,273.				40,273.			٥.	
650	PARKMAN POINT EAST	03/24/15	L				16,713.				16,713.			٥.	
651	PARKMAN POINT WEST	03/24/15	L				15,672.				15,672.			0.	
653	MORRISON COVE	10/04/17	L				43,500.				43,500.			0.	
655	BELL'S BROOKS	03/05/18	L				7,523.				7,523.			0.	
656	CROSBY ISLAND PROPERTY	12/28/18	L				4,052.				4,052.			0.	
657	WEST CARRYING PLACE - LOT 14	10/24/19	L				15,440.				15,440.			0.	
668	VINING LAKE PROPERTY	03/11/20	L				181,483.				181,483.			0.	
669	CURTIS CREEK NORTH LAND	06/15/20	L				16,375.				16,375.			0.	
670	PRWF - HARRINGTON	01/30/20	L				40,500.				40,500.			٥.	
	* 990 PAGE 10 TOTAL LAND						3,231,676.				3,231,676.	٥.		0.	٥.
	* 990 PAGE 10 TOTAL -						3,231,676.				3,231,676.	٥.		٥.	٥.
	LAND														
311	ROSS EASEMENT - DONATED - PEMBROKE - 74 ACRES	06/30/03	L				1.				1.			0.	
312	CREATH FARM EASEMENT - DONATED - LUBEC - 290 ACRES	12/30/04	L				1.				1.			٥.	
320	GRALENSKI EASEMENT – PEMBROKE – 83 ACRES	03/04/08	L				1.				1.			0.	
321	PIKES LAND EASEMENT - LUBEC - 36 ACRES	12/30/04	L				1.				1.			٥.	
607	LONG COVE EASEMENT - PEMBROKE - 2.4 ACRES	03/14/06	L				1.				1.			0.	

328111 04-01-23

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL LAND						5.				5.	0.		٥.	0.
	* 990 PAGE 10 TOTAL -						5.				5.	٥.		0.	0.
	OTHER														
601	MOWRY BEACH LAND IMPROVEMENTS	08/31/07	SL	15.00		16	52,178.				52,178.	52,178.		٥.	52,178.
602	MOWRY BEACH LAND IMPROVEMENTS	05/09/07	SL	15.00		16	6,347.				6,347.	6,063.		٥.	6,063.
610	PARKING LOT - BANFIELD/REYNOLDS	07/17/09	SL	15.00		16	3,341.				3,341.	2,992.		223.	3,215.
611	PARKING AREA - PIKE LANDS	12/21/09	SL	15.00		16	7,104.				7,104.	6,162.		474.	6,636.
654	WHITNEYVILLE PARKING LOT	10/02/17	150DB	15.00	MQ	17	30,875.				30,875.	12,872.		1,823.	14,695.
658	MIDDLE RIVER PARKING LOT IMPROVEMENTS	11/14/19	SL	15.00		16	13,500.				13,500.	2,850.		900.	3,750.
662	DENBOW POINT PARKING LOT	07/27/21	SL	15.00		16	48,090.				48,090.	4,542.		3,206.	7,748.
663	DENBOW POINT - TRAIL WORK	08/31/21	SL	15.00		16	36,385.				36,385.	3,235.		2,426.	5,661.
664	VINING LAKE ROAD RESURFACING & PARKING LOT IMPROVEMENTS	09/17/21	SL	15.00		16	14,000.				14,000.	1,166.		933.	2,099.
665	TRAIL SIGN	11/22/21	SL	15.00		16	1,450.				1,450.	105.		97.	202.
666	KLONDIKE MOUNTAIN PARKING LOT RENOVATION	04/27/20	SL	15.00		16	1,898.				1,898.	338.		127.	465.
667	VINING LAKE - PARKING LOT	08/24/20	SL	15.00		16	8,050.				8,050.	1,253.		537.	1,790.
672	SIGNS - HAYDEN SIGN COMPANY	04/04/22	SL	15.00		16	3,240.				3,240.	162.		216.	378.
673	MOWRY LOT REGRADE	09/12/22	SL	15.00		16	1,900.				1,900.	42.		127.	169.
	* 990 PAGE 10 TOTAL OTHER						228,358.				228,358.	93,960.		11,089.	105,049.

328111 04-01-23

(D) - Asset disposed

FORM 990 PAGE 10

	JU PAGE 10			_				990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL -						228,358.				228,358.	93,960.		11,089.	105,049.
	* GRAND TOTAL 990 PAGE 10 DEPR						3,479,174.				3,479,174.	104,581.		12,709.	117,290.

328111 04-01-23

Form 4562
Department of the Treasury Internal Revenue Service
Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

990

OMB No. 1545-0172

Attachment Sequence No. 179

Identifying number

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Attach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.
Business or activity to which this form relates

DOI	WNEAST COASTAL CONS	ERVANCY	FOI	RM 990 PA	AGE 10		**-***0078
Pa	rt I Election To Expense Certain Prope	erty Under Section 1	79 Note: If you have any li	isted property, c	complete Part	V before y	ou complete Part I.
1 1	Maximum amount (see instructions)					1	1,160,000.
2 1	Total cost of section 179 property place						
	Threshold cost of section 179 property						2,890,000.
4 F	Reduction in limitation. Subtract line 3	from line 2. If zero	o or less, enter -0-			4	
5 D	Oollar limitation for tax year. Subtract line 4 from lin	e 1. If zero or less, enter	-0 If married filing separately, se	e instructions		5	
6	(a) Description of p	roperty	(b) Cost (busi	ness use only)	(c) Elected	cost	
7 L	isted property. Enter the amount fron	n line 29		7			
	Total elected cost of section 179 prop						
	Fentative deduction. Enter the smaller						
	Carryover of disallowed deduction from						
	Business income limitation. Enter the s						
12 S	Section 179 expense deduction. Add I	lines 9 and 10, but	t don't enter more than lin	e 11		12	
	Carryover of disallowed deduction to 2			13			
_	: Don't use Part II or Part III below for						
Pa	opeena 2 opeena en				,,		
14 S	Special depreciation allowance for qua	alified property (otl	her than listed property) p	laced in service	during		
	-						
15 F	Property subject to section 168(f)(1) el	ection				15	10.000
	Other depreciation (including ACRS)					16	10,886.
Pa	rt III MACRS Depreciation (Don'	t include listed pro					
			Section A				1 000
	MACRS deductions for assets placed		e e			17	1,823.
18 If	you are electing to group any assets placed in ser						
	Section B - Assets	(b) Month and	c) Basis for depreciation		eral Deprecia	ation Syste	m
	(a) Classification of property	year placed in service	(business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
	nesidential rental property	/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
	Noniesidential real property	,					
		/			MM	S/L	
	Section C - Assets I	/ Placed in Service	During 2023 Tax Year L	Jsing the Altern			tem
20a	Section C - Assets I Class life	/ Placed in Service	During 2023 Tax Year L	Ising the Altern			tem
20a b		Placed in Service	During 2023 Tax Year L	Jsing the Altern 12 yrs.		iation Sys	tem
	Class life	Placed in Service	During 2023 Tax Year L			siation Sys	tem
b c d	Class life 12-year 30-year 40-year	Placed in Service	During 2023 Tax Year L	12 yrs.	ative Depred	siation Sys S/L S/L	tem
b c d	Class life 12-year 30-year	Placed in Service	During 2023 Tax Year L	12 yrs. 30 yrs.	MM	S/L S/L S/L S/L S/L	tem
b c d Pa	Class life 12-year 30-year 40-year rt IV Summary (See instructions.) Listed property. Enter amount from lin	/ / / / /		12 yrs. 30 yrs. 40 yrs.	MM	S/L S/L S/L S/L	tem
b c d Pa 21 L 22 T	Class life 12-year 30-year 40-year rt IV Summary (See instructions.) Listed property. Enter amount from line Total. Add amounts from line 12, lines	/ / / e 28	es 19 and 20 in column (12 yrs. 30 yrs. 40 yrs.	MM MM	S/L S/L S/L S/L S/L S/L S/L S/L	
b c d Pa 21 L 22 T	Class life 12-year 30-year 40-year rt IV Summary (See instructions.) Listed property. Enter amount from lin Fotal. Add amounts from line 12, lines Enter here and on the appropriate lines	/ / / e 28 14 through 17, lin s of your return. P	nes 19 and 20 in column (artnerships and S corpora	12 yrs. 30 yrs. 40 yrs.	MM MM	S/L S/L S/L S/L S/L S/L S/L S/L	tem 12,709.
b c d Pa 21 L 22 T E 23 F	Class life 12-year 30-year 40-year rt IV Summary (See instructions.) Listed property. Enter amount from line Total. Add amounts from line 12, lines	/ / / e 28 14 through 17, lin s of your return. P o service during th	nes 19 and 20 in column (artnerships and S corpora	12 yrs. 30 yrs. 40 yrs.	MM MM	S/L S/L S/L S/L S/L S/L S/L S/L	

316251 12-20-23 LHA For Paperwork Reduction Act Notice, see separate instructions.

For	m 4562	(2023)	DOW	NEAST C	OASI	AL C	ONSE	ERVAN	ICY				**_	***0	078	Page 2
_	art V	Listed Propert	t y (Include a	utomobiles, ce	ertain ot					nd propert	y used f	or				l ugo L
		entertainment, Note: For any v	vehicle for w	hich vou are u	, sina the	e standa	rd milea	ge rate o	or dedu	ucting leas	se exper	nse, com	nplete or	nly 24a,		
		24b, columns (
	Πο γου			on and Other					_				-			
24a	Do you	have evidence to s	(b)	(c)		aiiiieur		<u>′es ∟</u> (e)		24b If "Y					_l Yes ∟ I	<u> </u>
	Type ((list ve	(a) of property hicles first)	Date placed in service	Business/ investment use percentag		(d) Cost or ther basis	(bu	sis for depr siness/inve use only	estment	(f) Recovery period	Me	(g) ethod/ vention	Depr	(h) eciation uction	Ele sectio	cted on 179 ost
		depreciation allo							0							
-		ore than 50% in					<u></u>		<u></u>		<u></u>	. 25				
26	Propert	y used more that	n 50% in a c 1	i											. <u> </u>	
			: :		6											
			: :		6											
		1500/		,	6											
27	Propert	y used 50% or le	· · ·		_					1			1			
			: :		6						S/L ·				-	
			: :	9	_						S/L ·				-	
				,	6						S/L -				-	
		ounts in column										-		00		
29	Add an	ounts in column	(I), IINE 26. E								<u></u>	<u></u>		. 29		
0		-iti four us						on Use				-l			ما من مام	_
		nis section for ve														S
το γ	our emp	oloyees, first ans	wer the ques	stions in Section	on C to	see it yo	u meet a	an excep	otion to	o complet	ing this s	Section 1	or those	venicies	5.	
						<u></u>		(h)		(0)		d)	· ·	<u></u>		f)
20	Total bu	siness/investment	milae drivan d	uring the		a) icle 1		(b) iicle 2		(c) ehicle 3	-	d) icle 4		e) icle 5		f) cle 6
		n't include commu		-	Ven		Ven		Ve		Ven		Ven		Veili	
													+			
		ommuting miles of											+			
		her personal (no	-	-												
		iles driven during														
	Add line	es 30 through 32														
34	Was th	e vehicle availab	le for person	al use	Yes	No	Yes	No	Yes	i No	Yes	No	Yes	No	Yes	No
	during	off-duty hours?														
35	Was th	e vehicle used pi	rimarily by a	more												
	than 5%	6 owner or relate	ed person?													
		ner vehicle availa	•													
	use:			- Questions f	l or Emp	l Ioyers V	l Vho Pro	l vide Vel	l hicles	for Use b	y Their	L Employ	ees	I		
Ans	wer the	se questions to a	determine if	you meet an e	xceptio	n to com	pleting	Section	B for v	ehicles us	ed by e	mployee	es who a	ren't		
mor	re than 5	5% owners or rel	ated person	S.												
	Do you employ	maintain a writte ees?		tement that pr		-				-	-		ır		Yes	No
		maintain a writte														
	-	ees? See the ins	. ,	•					•			•				
		treat all use of ve													·	
		provide more that														
	-	of the vehicles,		•												
		meet the require													·	
		your answer to														1
_		Amortization		_,	-,											
		(a) Description of			(b)		(c) Amortiza			(d)		(e)			(f) mortization	
		Description of	costs		amortization begins		Amortiza amoun	ble it		Code section		Amortiza period or pe	ation	Ai fo	mortization or this year	
42	Amortiz	ation of costs th	at begins du			ar:					1					
			<u> </u>		: :											
					· · ·											
43	Amortiz	ation of costs th	at began be	fore your 2023	tax ve	ar					1		43			

43	Amortization of costs that began before your 2023 tax year	43	
44	Total. Add amounts in column (f). See the instructions for where to report	44	
0.1.0/			Form 4562 (

- CURRENT YEAR FEDERAL -

- DOWNEAST COASTAL CONSERVANCY

Asset No. Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
MACHINERY & EQUIPMENT											
201REFRIGERATOR	011296	SL	5.00	16	158.			158.	158.		0.
2022 TABLES	013096	SL	5.00	16	147.			147.	147.		0.
2032 FILE CABINETS	013096	SL	7.00	16	275.			275.	275.		0.
2042 STORAGE RACKS	011696	SL	5.00	16	106.			106.	106.		0.
205MAP CABINETS	091897	SL	7.00	16	133.			133.	133.		0.
207CANOPY	010197	SL	10.00	16	212.			212.	212.		0.
213I MAC G5 COMPUTER	062806	SL	5.00	16	1,726.			1,726.	1,726.		0.
214FILING CABINET	062207	SL	7.00	16	756.			756.	756.		0.
COMPUTER AND 609PRINTER	121509	SL	5.00	16	2,350.			2,350.	2,350.		0.
615OFFICE SIGNS	120809	SL	5.00	16	700.			700.	700.		0.
HP ENVY LAPTOP - 648RICH	022014	SL	5.00	16	1,134.			1,134.	1,134.		0.
652DOCK	040116	SL	15.00	16	1,681.			1,681.	756.		112.
CAMERA AND LENS 659SYSTEM	033121	SL	7.00	16	3,123.			3,123.	781.		446.
VIDEO CONFERENCE 660CALL SYSTEM	052521	SL	7.00	16	2,636.			2,636.	597.		377.
661LAPTOP	071221	SL	5.00	16	1,995.			1,995.	599.		399.
671DRONE (EMCI GRANT)		SL	7.00	16	2,003.			2,003.	191.		286.
* 990 PAGE 10 TOTA MACHINERY & EQUIPM					19,135.		0.	19,135.	10,621.		1,620.

(D) - Asset disposed

- CURRENT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL -					19,135.		0.	19,135.	10,621.		1,620.
	LAND											
298		123191	ь			6,450.			6,450.			ο.
299		123197	ь			300.			300.			ο.
300	HUCKINS & GILBERT ISLANDS - LUBEC - 1	123197	L			46,800.			46,800.			0.
301	GARDNER LAKE LOT - MARION TWP - 137 AC	123100	г			8,928.			8,928.			0.
302	DENBOW POINT - LUBEC - 55.5 ACRES	032202	L			30,000.			30,000.			0.
303	BAR ISLAND - TRESCOTT TWP - 9.4	121802	L			30,900.			30,900.			0.
304	ORANGE RIVER - WHITING - 8.3 ACRES		г			7,678.			7,678.			0.
305		011403	L			13,597.			13,597.			0.
306	PRESTON/SMALL RIVER- EDMUNDS TWP	041403	г			7,727.			7,727.			Ο.
308	BEAVER DAM STREAM - WESLEY - 92 ACRES MOWRY BEACH - LUBEC	100203	г			16,378.			16,378.			0.
310		031504	L			35,659.			35,659.			0.
313		033005	L			153,961.			153,961.			0.
314	TRESCOTT TWP - 4.5 LONG COVE -	033104	L			27,682.			27,682.			0.
315	PEMBROKE - 194.4 AC BAILEY FIELD -	031406	L			241,708.			241,708.			0.
316		083107	L			12,104.			12,104.			0.
	WHITING - 1.4 ACRES	100108	L			11,547.			11,547.			0.

328102 04-01-23

(D) - Asset disposed

- CURRENT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	LUBEC SALT MARSH - LUBEC - 4.4 ACRES	052708	ь Г			32,362.			32,362.			0.
	TYNAN LAND - TRESCOTT TWP (GIFT)	021408	Ъ			17,100.			17,100.			0.
		103009	ட			41,385.			41,385.			0.
	INGERSOL POINT/ADDISON	122909	ட			60,960.			60,960.			0.
614	ADLER (GIFT)	122909	ட			189,023.			189,023.			0.
616	BEAVER MEADOW BROOK	123107	<u>'</u> ட			25,373.			25,373.			0.
617	BEAVER MEADOW MARSH	021306	Ъ			39,000.			39,000.			Ο.
619	BROWNEY ISLAND	122496	Ъ			6,000.			6,000.			Ο.
620	DRISKO FARM/ROWLEY	123107	<u>'</u> ь			55,457.			55,457.			0.
621	MARSH ISLAND	123192	Ľ			63,000.			63,000.			0.
622	MARY'S ISLAND	093002	Ľ			9,000.			9,000.			Ο.
623	PARTRIDGE ISLAND	021306	Ъ			12,000.			12,000.			0.
624	PIGEON HILL	123107	<u>'</u> ட			211,069.			211,069.			0.
625	SAND & OVER COVE	080505	Ъ			46,500.			46,500.			0.
626	TIBBETT ISLAND	123107	<u>'</u> Е			180,715.			180,715.			0.
627	TIDE MILL CREEK	092800	Ъ			14,700.			14,700.			0.
628	VIRGIN'S BREAST	110899)Г			3,000.			3,000.			0.
	WEST CARRYING PLACE COVE	122105	Ъ			57,000.			57,000.			0.

328102 04-01-23

(D) - Asset disposed

- CURRENT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
		123108	L			12,171.			12,171.			0.
	PIGEON HILL (COPLON)	070810	L			28,218.			28,218.			0.
6320	CURTIS POINT	091510	L			83,334.			83,334.			0.
633	PLUMMER POINT	121010	ь			86,924.			86,924.			0.
		121510	г			159,006.			159,006.			0.
635		010110	г			228.			228.			0.
636		012511	г			3,600.			3,600.			0.
637		032911	г			255.			255.			0.
638		072111	L			56,699.			56,699.			0.
	DRANGE RIVER - MAHANA- WHITING	062712	L			70,172.			70,172.			0.
640	LONDIKE MOUNTAIN	062712	L			113,728.			113,728.			Ο.
		032513	L			49,156.			49,156.			0.
642	ACHIAS RIVER - FITZGERALD PROPERTY	020113	L			287,126.			287,126.			Ο.
643		062713	L			34,882.			34,882.			0.
644		102513	L			76,392.			76,392.			Ο.
	ROARING LAKE II - THATCHER PROPERTY	102513	L			15,839.			15,839.			0.
646	SHEEP ISLAND	121914	L			41,217.			41,217.			0.
647	OVERTY ISLAND	021814	L			16,135.			16,135.			0.

328102 04-01-23

(D) - Asset disposed

- CURRENT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
649	BENOIT PROPERTY	022715	L			40,273.			40,273.			0.
650	PARKMAN POINT EAST	032415	г			16,713.			16,713.			0.
651	PARKMAN POINT WEST	032415	ь			15,672.			15,672.			0.
653	MORRISON COVE	100417	ь			43,500.			43,500.			0.
	BELL'S BROOKS CROSBY ISLAND	030518	ь			7,523.			7,523.			0.
656		122818	L			4,052.			4,052.			0.
657		102419	г			15,440.			15,440.			0.
668		031120	L			181,483.			181,483.			0.
		061520	ь			16,375.			16,375.			0.
670		013020	L			40,500.			40,500.			0.
	* 990 PAGE 10 TOTAL LAND * 990 PAGE 10 TOTAL					3231676.		0.	3231676.	0.		0.
	* 990 PAGE 10 TOTAL -					3231676.		0.	3231676.	0.		0.
	LAND											
		063003	L			1.			1.			0.
	CREATH FARM EASEMENT - DONATED	123004	г			1.			1.			0.
320	GRALENSKI EASEMENT - PEMBROKE - 83 ACR		L			1.			1.			0.
321	PIKES LAND EASEMENT - LUBEC - 36 ACRES		г			1.			1.			0.
	LONG COVE EASEMENT - PEMBROKE - 2.4 AC	031406	L			1.			1.			0.

328102 04-01-23

(D) - Asset disposed

- CURRENT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL LAND					5.		0.	5.	0.		0.
	* 990 PAGE 10 TOTAL -					5.		0.	5.	0.		0.
	OTHER											
	MOWRY BEACH LAND											
		083107	SL	15.00	16	52,178.			52,178.	52,178.		0.
	MOWRY BEACH LAND IMPROVEMENTS	050907	SL	15.00	16	6,347.			6,347.	6,063.		0.
610		071709	SL	15.00	16	3,341.			3,341.	2,992.		223.
	PARKING AREA - PIKE LANDS	122109	SL	15.00	16	7,104.			7,104.	6,162.		474.
	WHITNEYVILLE											
		100217	150DB	15.00	17	30,875.			30,875.	12,872.		1,823.
658	MIDDLE RIVER PARKING LOT IMPROVE	111419	SL	15.00	16	13,500.			13,500.	2,850.		900.
	DENBOW POINT PARKING LOT	072721	SL	15.00	16	48,090.			48,090.	4,542.		3,206.
	DENBOW POINT - TRAIL WORK	083121	SL	15.00	16	36,385.			36,385.	3,235.		2,426.
	VINING LAKE ROAD RESURFACING & PARKI			15.00	16	14,000.			14,000.	1,166.		933.
001				- 3 . 0 0	Ť	11,000.			11,000.	1/1000		555.
		112221	SL	15.00	16	1,450.			1,450.	105.		97.
666	KLONDIKE MOUNTAIN PARKING LOT RENOVAT	042720	SL	15.00	16	1,898.			1,898.	338.		127.
667		082420	SL	15.00	16	8,050.			8,050.	1,253.		537.
	SIGNS - HAYDEN SIGN COMPANY	040422	SL	15.00	16	3,240.			3,240.	162.		216.
673		091222	SL	15.00	16	1,900.			1,900.	42.		127.
	* 990 PAGE 10 TOTAL OTHER					228,358.		0.	228,358.	93,960.		11,089.

328102 04-01-23

(D) - Asset disposed

- CURRENT YEAR FEDERAL - DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Dat Acqui	te ired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL - * GRAND TOTAL 990						228,358.		0.	228,358.	93,960.		11,089.
	PAGE 10 DEPR						3479174.		0.	3479174.	104,581.		12,709.

328102 04-01-23

- NEXT YEAR FEDERAL - DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	MACHINERY & EQUIPMENT								
	REFRIGERATOR	011296		5.00	158.		158.	158.	0.
-	2 TABLES	013096		5.00	147.		147.	147.	0.
	2 FILE CABINETS	013096		7.00	275.		275.	275.	0.
	2 STORAGE RACKS	011696		5.00	106.		106.	106.	0.
	MAP CABINETS	091897		7.00	133.		133.	133.	0.
	CANOPY	010197		10.00			212.	212.	0.
	I MAC G5 COMPUTER	062806		5.00	1,726.		1,726.		0.
	FILING CABINET	062207		7.00	756.		756.	756.	0.
	COMPUTER AND PRINTER	121509		5.00	2,350.		2,350.		0.
	OFFICE SIGNS	120809		5.00	700.		700.	700.	0.
	HP ENVY LAPTOP - RICH	022014		5.00	1,134.		1,134.		0.
	DOCK	040116		15.00			1,681.	868.	112.
	CAMERA AND LENS SYSTEM	033121	SL	7.00	3,123.		3,123.		446.
	VIDEO CONFERENCE CALL SYSTEM	052521		7.00	2,636.		2,636.		377.
	LAPTOP	071221		5.00	1,995.		1,995.		399.
671	DRONE (EMCI GRANT)	042522	SL	7.00	2,003.		2,003.	477.	286.
	* 990 PAGE 10 TOTAL MACHINERY &								
	EQUIPMENT				19,135.		19,135.		
	* 990 PAGE 10 TOTAL -				19,135.		19,135.	12,241.	1,620.
	LAND								
	G-P PROPERTY - CALAIS - 41 ACRES	123191			6,450.		6,450.		0.
	MORONG MARSH - LUBEC5 ACRE	123197	Г		300.		300.		0.
	HUCKINS & GILBERT ISLANDS - LUBEC -								_
	16 ACRES	123197	Г		46,800.		46,800.		0.
	GARDNER LAKE LOT - MARION TWP - 137								_
	ACRES	123100			8,928.		8,928.		0.
	DENBOW POINT - LUBEC - 55.5 ACRES	032202	Г		30,000.		30,000.		0.
	BAR ISLAND - TRESCOTT TWP - 9.4								
	ACRES	121802			30,900.		30,900.		0.
	ORANGE RIVER - WHITING - 8.3 ACRES	022503			7,678.		7,678.		0.
	GILMAN DAM - COOPER - 103 ACRES	011403	Г		13,597.		13,597.		0.
	PRESTON/SMALL RIVER- EDMUNDS TWP -								
306	10.5 ACRES	041403	L		7,727.		7,727.		0.

(D) - Asset disposed

- NEXT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	BEAVER DAM STREAM - WESLEY - 92								
308	ACRES	100203			16,378.		16,378.		0.
		031504			35,659.		35,659.		0.
		033005	L		153,961.		153,961.		0.
	RAFT COVE LAND - TRESCOTT TWP - 4.5								
314		033104			27,682.		27,682.		0.
		031406			241,708.		241,708.		0.
316		083107			12,104.		12,104.		0.
		100108			11,547.		11,547.		0.
318	LUBEC SALT MARSH - LUBEC - 4.4 ACRES	052708	Ь		32,362.		32,362.		0.
	TYNAN LAND - TRESCOTT TWP (GIFT) -								
319	1.5 ACRES	021408			17,100.		17,100.		0.
612	PIGEON HILL	103009			41,385.		41,385.		0.
613	INGERSOL POINT/ADDISON	122909			60,960.		60,960.		0.
614	ADLER (GIFT)	122909			189,023.		189,023.		0.
616	BEAVER MEADOW BROOK	123107	L		25,373.		25,373.		0.
617	BEAVER MEADOW MARSH	021306			39,000.		39,000.		0.
619	BROWNEY ISLAND	122496	L		6,000.		6,000.		0.
620	DRISKO FARM/ROWLEY	123107			55,457.		55,457.		0.
621	MARSH ISLAND	123192	L		63,000.		63,000.		0.
622	MARY'S ISLAND	093002	L		9,000.		9,000.		0.
623	PARTRIDGE ISLAND	021306	L		12,000.		12,000.		0.
624	PIGEON HILL	123107			211,069.		211,069.		0.
625	SAND & OVER COVE	080505			46,500.		46,500.		0.
626	TIBBETT ISLAND	123107			180,715.		180,715.		0.
627	TIDE MILL CREEK	092800			14,700.		14,700.		0.
628	VIRGIN'S BREAST	110899	L		3,000.		3,000.		0.
629	WEST CARRYING PLACE COVE	122105			57,000.		57,000.		0.
630	PIGEON HILL	123108	L		12,171.		12,171.		0.
631	PIGEON HILL (COPLON)	070810	L		28,218.		28,218.		0.
632	CURTIS POINT	091510			83,334.		83,334.		0.
633	PLUMMER POINT	121010	L		86,924.		86,924.		0.
634	GRAIN POINT	121510			159,006.		159,006.		Ο.
635	PLEASANT RIVER MARSH 1	010110	L		228.		228.		0.

(D) - Asset disposed

- NEXT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
636	OVER'S POINT - BAIRNBRAE	012511	L		3,600.		3,600.		0.
637	PLEASANT RIVER MARSH 2	032911	L		255.		255.		Ο.
638	INGERSOLL POINT (EHLS PARCEL)	072111	L		56,699.		56,699.		0.
639	ORANGE RIVER - MAHANA- WHITING	062712	Г		70,172.		70,172.		0.
640	KLONDIKE MOUNTAIN	062712	L		113,728.		113,728.		0.
	MIDDLE RIVER	032513			49,156.		49,156.		0.
642	MACHIAS RIVER - FITZGERALD PROPERTY	020113	L		287,126.		287,126.		0.
643	MACHIAS RIVER - RIER	062713	L		34,882.		34,882.		Ο.
644		102513			76,392.		76,392.		0.
645	ROARING LAKE II - THATCHER PROPERTY	102513			15,839.		15,839.		0.
646	SHEEP ISLAND	121914			41,217.		41,217.		0.
647	POVERTY ISLAND	021814			16,135.		16,135.		0.
649	BENOIT PROPERTY	022715			40,273.		40,273.		0.
650	PARKMAN POINT EAST	032415			16,713.		16,713.		0.
651	PARKMAN POINT WEST	032415			15,672.		15,672.		0.
653	MORRISON COVE	100417			43,500.		43,500.		0.
655	BELL'S BROOKS	030518			7,523.		7,523.		0.
656	CROSBY ISLAND PROPERTY	122818			4,052.		4,052.		Ο.
657	WEST CARRYING PLACE - LOT 14	102419			15,440.		15,440.		0.
668	VINING LAKE PROPERTY	031120			181,483.		181,483.		0.
	CURTIS CREEK NORTH LAND	061520			16,375.		16,375.		0.
670	PRWF - HARRINGTON	013020	Г		40,500.		40,500.		0.
	* 990 PAGE 10 TOTAL LAND				3231676.		3231676.	0.	0.
	* 990 PAGE 10 TOTAL -				3231676.		3231676.	0.	0.
	LAND								
	ROSS EASEMENT - DONATED - PEMBROKE -								
	74 ACRES	063003	L		1.		1.		0.
	CREATH FARM EASEMENT - DONATED -								
	LUBEC - 290 ACRES	123004	L		1.		1.		0.
	GRALENSKI EASEMENT - PEMBROKE - 83								
		030408	L		1.		1.		0.
	PIKES LAND EASEMENT - LUBEC - 36								
321	ACRES	123004	L		1.		1.		0.

328103 04-01-23

(D) - Asset disposed

- NEXT YEAR FEDERAL -

DOWNEAST COASTAL CONSERVANCY

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	LONG COVE EASEMENT - PEMBROKE - 2.4								
	ACRES	031406	L		1.		1.		0.
	* 990 PAGE 10 TOTAL LAND				5.		5.	0.	0.
	* 990 PAGE 10 TOTAL -				5.		5.	0.	0.
	OTHER								
	MOWRY BEACH LAND IMPROVEMENTS	083107		15.00			52,178.		0.
	MOWRY BEACH LAND IMPROVEMENTS	050907		15.00			6,347.		0.
	PARKING LOT - BANFIELD/REYNOLDS	071709		15.00			3,341.		126.
	PARKING AREA - PIKE LANDS	122109		15.00			7,104.		468.
	WHITNEYVILLE PARKING LOT	100217	150DB	15.00	30,875.		30,875.	14,695.	1,823.
	MIDDLE RIVER PARKING LOT								
	IMPROVEMENTS	111419		15.00			13,500.		900.
	DENBOW POINT PARKING LOT	072721		15.00			48,090.		
663	DENBOW POINT - TRAIL WORK	083121	SL	15.00	36,385.		36,385.	5,661.	2,426.
	VINING LAKE ROAD RESURFACING &								
	PARKING LOT IMPROVEMENTS	091721		15.00	14,000.		14,000.		933.
	TRAIL SIGN	112221	SL	15.00	1,450.		1,450.	202.	97.
	KLONDIKE MOUNTAIN PARKING LOT								
666	RENOVATION	042720		15.00			1,898.	465.	127.
667	VINING LAKE - PARKING LOT	082420	SL	15.00	8,050.		8,050.	1,790.	537.
672	SIGNS - HAYDEN SIGN COMPANY	040422		15.00	3,240.		3,240.	378.	216.
673	MOWRY LOT REGRADE	091222	SL	15.00	1,900.		1,900.	169.	127.
	* 990 PAGE 10 TOTAL OTHER				228,358.		228,358.	105,049.	10,986.
	* 990 PAGE 10 TOTAL -				228,358.		228,358.	105,049.	10,986.
	* GRAND TOTAL 990 PAGE 10 DEPR				3479174.		3479174.	117,290.	12,606.

(D) - Asset disposed