Form 8879-TE

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning , 2022, and ending

EIN or SSN

20-1678932

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information. ROSE FITZGERALD KENNEDY GREENWAY

CONSERVANCY, INC. Name and title of officer or person subject to tax

CHRIS COOK

EXECUTIVE DIRECTOR

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, 10a, 10a, 10a, 10a, 10a, 10a, 10a, 10
and the balance and the amount and that line for the matrix he find with this forms was blank them become the 4h. Oh. Oh. 4h. Eh. Ch. 7h. Oh. Oh. and 40h.
or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b,
whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more
than one line in Part I.

1a	Form	990 check here	<u>X</u>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 5,314,600
2a	Form	990-EZ check here		b	Total revenue, if any (Form 990-EZ, line 9)	2b
3a	Form	1120-POL check here		b	Total tax (Form 1120-POL, line 22)	3b
4a	Form	990-PF check here		b	Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a	Form	8868 check here		b	Balance due (Form 8868, line 3c)	. 5b
6a	Form	990-T check here			Total tax (Form 990-T, Part III, line 4)	
7a	Form	4720 check here			Total tax (Form 4720, Part III, line 1)	
8a	Form	5227 check here		b	FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form	5330 check here		b	Tax due (Form 5330, Part II, line 19)	9b
10a	Form	8038-CP check here			Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b
Part	II	Declaration and S	ignatı	ıre	Authorization of Officer or Person Subject to Tax	
Inder _I	oenalti	es of perjury, I declare tha	at X	l an	n an officer of the above entity or $igsqcup$ I am a person subject to tax with re	spect to (name
f entit	y)				, (EIN) and that I hav	e examined a copy of the
022 e	ectron	ic return and accompany	ing sch	edu	lles and statements, and, to the best of my knowledge and belief, they are	true, correct, and

complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) on the federal types even and the federal types even and the federal types even and the entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

ΡI	N	l: c	che	eck	one	b	οх	only	
----	---	------	-----	-----	-----	---	----	------	--

X authorize AAFCPAS, INC.	to enter my PIN	02114
ERO firm name		Enter five numbers, bu do not enter all zeros

as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

🛘 As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. DocuSigned by: 5/11/2023

Signature of officer or person subject to tax

Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

04198955555 Do not enter all zeros

9D7756D2DRE9/17

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

AAFCPAS, INC.

05/10/23 Date

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form **8879-TE** (2022)

EXTENDED TO NOVEMBER 15, 2023

Return of Organization Exempt From Income Tax

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

ΑI	For the	2022 calendar year, or tax year beginning and en	nding		
B	Check if applicable	C Name of organization ROSE FITZGERALD KENNEDY GREENWAY		D Employer identific	cation number
Г	Addres	S CONCEDUANCY INC			
Ē	Name change			20-16789	32
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 185 KNEELAND STREET	oom/suite	E Telephone number (617) 29	2-0020
	termin- ated			G Gross receipts \$	24,304,801.
	Amend	BOSTON, MA 02111		H(a) Is this a group re	
	Application	F Name and address of principal officer: CHRIS COOK		for subordinates	
	pendin	9 185 KNEELAND STREET, BOSTON, MA 02111		H(b) Are all subordinates in	cluded? Yes No
1	Гах-ехе	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions
	Websit			H(c) Group exemption	n number
K	orm of	organization: X Corporation Trust Association Other	L Year o	of formation: 2004 N	State of legal domicile: MA
Pa		Summary			
Ð	1 1	Briefly describe the organization's mission or most significant activities: ${ t SEE \ \ AT}$	TTACH	ED SCHEDULE	0
Governance	l .				
ern	1	Check this box if the organization discontinued its operations or disposed		1 1	
Š		Number of voting members of the governing body (Part VI, line 1a)			21
<u>«</u>		Number of independent voting members of the governing body (Part VI, line 1b) \dots			21
ies		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			52
Activities &	6	Total number of volunteers (estimate if necessary)		6	659
Act		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	······		0.
				Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)		5,492,797. 906,169.	6,022,020.
Revenue		Program service revenue (Part VIII, line 2g)		2,348,412.	1,101,848.
Be		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		-14,767.	-52,084.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,732,611.	5,314,600.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0,732,011.	0.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,057,913.	
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		25,950.	19,980.
ben		Fotal fundraising expenses (Part IX, column (A), line 17e) 672,592	2	2373301	23/3001
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	_	2,688,742.	3,414,233.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,772,605.	6,797,148.
	1	Revenue less expenses. Subtract line 18 from line 12		2,960,006.	
or		torondo todo experiodo. Cabarade inte 10 non inte 12		ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		31,444,070.	28,506,429.
Ass J Ba	21	Fotal liabilities (Part X, line 26)		818,227.	760,394.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		30,625,843.	27,746,035.
Pá	art II	Signature Block	•		
Und	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedules a	ınd stateme	ents, and to the best of my	/ knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	
Sig	n [Signature of officer		Date	
Her	e	CHRIS COOK, EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai		DAVID KELLEHER, CPA DAVID KELLEHER,	CPA0	5/10/23 if self-employe	P01059560
	parer	Firm's name AAFCPAS, INC.		Firm's EIN 0	4-2571780
Use	Only	Firm's address 50 WASHINGTON STREET			0 066 0100
		WESTBOROUGH, MA 01581		Phone no. 50	8-366-9100
Ma	y the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

	Check if Schedule O contains a response or		III		X
1	Briefly describe the organization's mission: SEE PART I, LINE 1				
2	Did the organization undertake any significant proprior Form 990 or 990-EZ?	gram services during the yea			Yes X No
	If "Yes," describe these new services on Schedule	e O.			
3	Did the organization cease conducting, or make si If "Yes," describe these changes on Schedule O.	gnificant changes in how it o	conducts, any program se	ervices?	Yes X No
4	Describe the organization's program service according Section 501(c)(3) and 501(c)(4) organizations are re-	equired to report the amoun			
4a	revenue, if any, for each program service reported (Code:) (Expenses \$ 3,803,7	79 • including grants of \$) (Revenue \$	206,348.)
	SEE ATTACHED SCH O-MAINTE	NANCE, HORTICU			,
4b	(Code:) (Expenses \$ 710,4	01 • including grants of \$) (Revenue \$	1,030,589.)
	SEE ATTACHED SCHEDULE O -	PROGRAMS			
4c	(Code:) (Expenses \$ 783,9	66 • including grants of \$) (Revenue \$	1
70	SEE ATTACHED SCHEDULE O -	PUBLIC ART) (Nevenue ψ	,
4d	Other program services (Describe on Schedule O.) (Expenses \$ 227, 100 • including gr	ants of \$) (Revenue \$	1,07	75.)
4e	Total program service expenses 5	,525,246.) (nevenue \$	±,07	
					Form 990 (2022)

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			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	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?			l
	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, 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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	١		l 🕶
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	21	
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	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- "		\vdash
120	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

232003 12-13-22

ROSE FITZGERALD KENNEDY GREENWAY

Form 990 (2022)

CONSERVANCY, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
•	Schedule J	23	X	
24 a	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	04-		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		-
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			₩
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			3,7
	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	34		x
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	- 33a		
~	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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				
	Check if Schedule O contains a response or note to any line in this Part V		 I	
	E		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 61 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
b	Enter the number of forms with an additional forms and appropriate the forms with a form of the form of the forms with a form of the form of the form of the forms with a form of the form of th			
С	(gambling) winnings to prize winners?	1c	х	
	(garrianing) withings to prize withers:	10		—

232004 12-13-22

O22) CONSERVANCY, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				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 52								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2 b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X					
b	o If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
	a 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)?									
b	b If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the									
	any contributions that were not tax deductible as charitable contributions?		6a		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts								
	were not tax deductible?		6b							
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•								
	to file Form 8282?	l I	7с		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7 f 7g		Х					
g										
h	, , , , , , , , , , , , , , , , , , , ,									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained									
0	sponsoring organization have excess business holdings at any time during the year?		8							
9	Sponsoring organizations maintaining donor advised funds.		9a							
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b							
10	Section 501(c)(7) organizations. Enter:		ЭIJ							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:	100								
	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.)	11b								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?		13a							
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
С	Enter the amount of reserves on hand	13c								
14a			14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				77					
	excess parachute payment(s) during the year?		15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.				37					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		Х					
4-	If "Yes," complete Form 4720, Schedule O.	41. (41								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

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

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year										
	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	, , ,										
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?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		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	Х								
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:										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
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		Х							
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							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	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	Х								
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	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
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	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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 MA										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only) 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, an	d fina	ncial								
	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										
	CHRIS COOK - 617-292-0020										
	185 KNEELAND STREET, BOSTON, MA 02111										

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

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

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

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

Check this box if neither the organization n	or any related	orga	aniza	ation	cor	mpei	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)			((2)			(D)	(E)	(F)
Name and title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week	- -	Ler an	lu a u	recio	Ji/ii us	lee)	from	from related	other
	(list any	or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		ee/	mpen		1099-NEC)	1099-1120)	and related
	below	Individual trustee	Institutional trustee	_	oldm	st co	ər	10001120,		organizations
	line)	Indivi	Institi	Officer	Key employee	Highest compensated employee	Former			
(1) CHRIS COOK	46.00									
EXECUTIVE DIRECTOR				Х				219,519.	0.	2,082.
(2) ALEX ROGERS PITTMAN	45.00									
DIRECTOR OF DEVELOPMENT						X		140,340.	0.	29,310.
(3) DAVID DALENA	43.00									
SENIOR DEVELOPMENT OFFICER						X		147,982.	0.	16,131.
(4) ROBERT STIGBERG	43.00									
DIRECTOR OF MAINTENANCE AND CAPITAL						Х		118,998.	0.	4,270.
(5) TRACEY COOKE	47.00									
DIRECTOR OF FINANCE AND ADMINISTRATI						Х		108,798.	0.	13,424.
(6) KEELIN CALDWELL	42.00								_	
DIRECTOR OF PROGRAMS AND COMMUNITY E						Х		107,904.	0.	14,192.
(7) DOUG HUSID	5.00									_
CHAIR		Х		Х				0.	0.	0.
(8) JOHN SHEA	5.00									
VICE CHAIR		Х		Х				0.	0.	0.
(9) KAREN JOHNSON	6.00								_	_
TREASURER (UNTIL 12/31/2022)		Х		Х				0.	0.	0.
(10) REBECCA LEE	3.00									
CLERK		Х						0.	0.	0.
(11) SUSANNE LAVOIE	3.00			l						
CLERK (UNTIL 12/31/2022)		Х		Х				0.	0.	0.
(12) ALLI ACHTMEYER	2.00								•	
DIRECTOR		Х						0.	0.	0.
(13) CONOR FINLEY	2.00								•	•
DIRECTOR	0 00	Х						0.	0.	0.
(14) ROSALIND GORIN	2.00							_	•	•
DIRECTOR	2 00	Х						0.	0.	0.
(15) CARMINE GUARINO	2.00	٠,,						_	0	•
DIRECTOR	1.00	Х						0.	0.	0.
(16) KIRSTEN HOFFMAN	1.00	\ \ -						0.	0.	0
DIRECTOR	2.00	Х			_			0.	0.	0.
(17) LINDA SEE	4.00	Х						0.	0.	0.
DIRECTOR		Δ						<u> </u>	0.	U •

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Form 990 (2022) CONSERVANCY, INC. 20-1678932 Page 8											
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(C)					(D)	(E)	(F)			
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an officer and a director/trustee)				h an	compensation	compensation	amount of	
	week (list any	_	JCI all		1 0010	n/ a de	1	from	from related	other 	
	hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the	
	related	e or c	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations	Individual trustee or director	Institutional trustee		yee	mper		1099-NEC)		and related	
	below	idual	tution	La la	Key employee	est co loyee	Jer	,		organizations	
	line)	Indiv	Insti	Officer	Key e	Highest compensated employee	Former				
(18) BRADLEY W. SNYDER	4.00							_	_	_	
DIRECTOR		Х						0.	0.	0.	
(19) MATT CONTI	3.00								_		
DIRECTOR		Х						0.	0.	0.	
(20) JENNY MORSE	3.00										
DIRECTOR		Х						0.	0.	0.	
(21) YVONNE GARCIA	1.00	l									
DIRECTOR		Х						0.	0.	0.	
(22) HILINA AJAKAIYE	2.00	l									
DIRECTOR		Х						0.	0.	0.	
(23) DENIZ JOHNSON	5.00	l									
DIRECTOR	1 00	Х						0.	0.	0.	
(24) SAYED SALEH	1.00	,,						0	_	_	
DIRECTOR	2 00	Х						0.	0.	0.	
(25) ROBERTSTONE GOODRIDGE	3.00	,,						_	_	_	
DIRECTOR (UNTIL 12/31/2022)	2 00	Х						0.	0.	0.	
(26) THOMAS O'BRIEN	2.00	\ _{3,7}						_	_	_	
DIRECTOR (UNTIL 12/31/2022)		Х						0.	0.	70 400	
1b Subtotal								843,541.	0.	79,409.	
c Total from continuation sheets to Part								843,541.	0.	79,409.	
d Total (add lines 1b and 1c)					····.			043,341.	0.	/9,409.	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual Х 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NELM CORP	GENERAL CONTRACTOR,	
135 INDUSTRIAL WAY, ROCKLAND, MA 02370	₽2	1,324,095.
BLOCK BY BLOCK		
PO BOX 643873, CINCINNATI, OH 45264	PARK MANAGEMENT	961,608.
ADIRONDACK SCENIC, INC.		
439 COUNTY ROAD 45, ARGYLE, NY 12809	RESTORATION SERVICES	187,051.
ROSS MILLER STUDIO, INC.	LIGHTING DESIGN AND	
107 FRANKLIN STREET, BOSTON, MA 02134	FABRICATION	135,000.
J.A.J COMPANY, INC.	GENERAL CONTRACTOR -	
21 PRESCOTT STREET, MEDFORD, MA 02155	MASONRY WORK	132,266.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization 5		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2022)

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Form 990

(28) KATHERINE FICHTER 2.00	other compensation
Name and title Average hours per week (list any hours for related organizations below line) (27) KIM SHERMAN STAMLER DIRECTOR (UNTIL 12/31/2022) (28) KATHERINE FICHTER Average hours (check all that apply) (compensation from the organizations (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC)	Estimated amount of other compensation
week (list any hours for related organizations below line) (27) KIM SHERMAN STAMLER DIRECTOR (UNTIL 12/31/2022) (28) KATHERINE FICHTER DIRECTOR (UNTIL 50 April 12 April 1	compensation
DIRECTOR (UNTIL 12/31/2022) X 0. (28) KATHERINE FICHTER 2.00	organization and related organizations
(28) KATHERINE FICHTER 2.00	0.
	0.
	0. 0.
Total to Part VII, Section A, line 1c	

Form 990 (2022)

Part VIII Statement of Revenue

			Check if Schedule O	cont	ains a	response	or note to any lin	ne in this Part VIII			
							,	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
									function revenue	business revenue	sections 512 - 514
ts ts	1	<u>а</u>	Federated campaigns			1a					
un.			Membership dues			1b					
اع ق			Fundraising events			1c	716,996.				
ifts ar A			Related organizations			1d	,				
aj,			Government grants (conti			1e	1,912,005.				
Sig			All other contributions, gifts,		,		_,=_,==				
P L		•	similar amounts not included			1f	3,393,019.				
를		a	Noncash contributions included in			1g \$	24,953.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Total. Add lines 1a-1f				-	6,022,020.			
<u> </u>		<u></u>	Totali / tad iii lee Ta Ti				Business Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
o l	2	а	CAROUSEL REVENUE, N	ET			722100	499,130.	499,130.		
Ş			BEER GARDENS				722440	161,384.	161,384.		
Ser		-	PROMOTIONAL FEES				541800	149,106.	149,106.		
Z S		_	FOOD VENDING INCOME				713110	132,163.	132,163.		
Program Service Revenue			MAINTENANCE REVENUE				900099	84,760.	84,760.		
Pr		-	All other program service		nue		900099	75,305.	75,305.		
			Total. Add lines 2a-2f					1,101,848.	, , , , , , , , , , , , , , , , , , , ,		
	3	9	Investment income (include								
	•			_				167,940.			167,940.
	4		Income from investment of					, -			, -
	5		Royalties			•					
	•		1107411100	Г) Real	(ii) Personal				
	6	а	Gross rents	6a	├	,	.,				
			Less: rental expenses	6b	+						
			Rental income or (loss)	6c	+						
			Net rental income or (loss	_	1						
			Gross amount from sales of	<u> </u>		ecurities	(ii) Other				
	•	_	assets other than inventory	7a		748,649.	``'				
		b	Less: cost or other basis	1.5		,					
e		_	and sales expenses	7b	18,	673,773.					
Revenue		С	Gain or (loss)								
Re			Net gain or (loss)					-1,925,124.			-1,925,124.
ther			Gross income from fundraisi								, ,
₹	_		including \$		`						
			contributions reported on			-					
			Part IV, line 18		•		128,180.				
		b	Less: direct expenses				316,428.				
			Net income or (loss) from					-188,248.			-188,248.
			Gross income from gamin								
			Part IV, line 19			I					
		b	Less: direct expenses								
			Net income or (loss) from								
			Gross sales of inventory,	•	•						
			and allowances				1				
		b	Less: cost of goods sold								
			Net income or (loss) from								
S							Business Code				
Miscellaneous Revenue	11	а	OTHER INCOME				900099	136,164.	136,164.		
ane		b									
e Sel		С									
Mis		d	All other revenue								
		е	Total. Add lines 11a-11d					136,164.			
	12		Total revenue. See instruction					5,314,600.	1,238,012.	0.	-1,945,432.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon	·		. , ,	
Do	not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	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,	226 222	67.006	70.000	F0 000
	trustees, and key employees	226,290.	67,886.	79,202.	79,202
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,558,837.	1,833,957.	312,597.	412,283
8	Pension plan accruals and contributions (include		25 22		
	section 401(k) and 403(b) employer contributions)	34,986.	25,864.	4,617.	4,505 43,466
9	Other employee benefits	316,680.	241,514.	31,700.	43,466
10	Payroll taxes	226,142.	155,007.	30,832.	40,303
11	Fees for services (nonemployees):				
а	Management				
b	Legal	23,337.	20,257.	3,080.	
С	Accounting	48,493.		48,493.	
d	Lobbying	4.0.00			
е	,	19,980.		1.5.510	19,980
f	Investment management fees	16,612.		16,612.	
g	` -				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	45 104	15 000	0.4.000	- 166
13	Office expenses	45,184.	15,020.	24,998.	5,166
14	Information technology	76,584.	54,021.	16,063.	6,500
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	744 020	704 510	C C00	12 020
22	Depreciation, depletion, and amortization	744,238.	724,519.	6,689.	13,030 196
23	Insurance	150,191.	134,881.	15,114.	196
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.)	1 107 401	1 120 520		47 061
a		1,187,491.	1,139,530.	0 212	47,961
b	CONTRACTED SERVICES	1,122,103.	1,112,790.	9,313.	
С.					
d	<u></u>				
е	· —	6 707 140	E E 2 E 24 C	E00 210	670 500
<u>25</u>	Total functional expenses. Add lines 1 through 24e	6,797,148.	5,525,246.	599,310.	672,592
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)				Form 990 (2022

Part X Balance Sheet

	IL A	balance Sneet							
		Check if Schedule O contains a response or note	to an	y line in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash - non-interest-bearing			2,196,698.	1	1,714,592.		
	2	Savings and temporary cash investments			1,541,210.	2	1,344,918.		
	3	Pledges and grants receivable, net			983,953.	3	459,003.		
	4	Accounts receivable, net			15,997.	4	36,868.		
	5	Loans and other receivables from any current or							
		trustee, key employee, creator or founder, substa							
		controlled entity or family member of any of these				5			
	6	Loans and other receivables from other disqualifi							
		under section 4958(f)(1)), and persons described				6			
<u>s</u>	7	Notes and loans receivable, net				7	6 7 8 9 170,059 100 6,978,748 11 17,802,241 12 13 14 15 16 28,506,429 17 677,894 18 19 20 21		
Assets	8	Inventories for sale or use				8			
Ä	9	Prepaid expenses and deferred charges			184,161.	9	170,059.		
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D	10a	10,958,754.					
	b	Less: accumulated depreciation	10b	3,980,006.	5,565,366.	10c	6,978,748.		
	11	Investments - publicly traded securities			10,267,901.	11	17,802,241.		
	12	Investments - other securities. See Part IV, line 1			10,688,784.	12			
	13	Investments - program-related. See Part IV, line 1			-	13			
	14	Intangible assets	_		14				
	15	Other assets. See Part IV, line 11		15					
	16	Total assets. Add lines 1 through 15 (must equa	31,444,070.	16	28,506,429.				
	17	Accounts payable and accrued expenses	632,727.	17	677,894.				
	18	Grants payable				18			
	19	Deferred revenue				19			
	20	Tax-exempt bond liabilities				20			
	21	Escrow or custodial account liability. Complete P				21			
S	22	Loans and other payables to any current or form							
Liabilities		trustee, key employee, creator or founder, substa							
abi		controlled entity or family member of any of these				22			
	23	Secured mortgages and notes payable to unrelate	ted thi	rd parties		23			
	24	Unsecured notes and loans payable to unrelated	third	oarties		24			
	25	Other liabilities (including federal income tax, pay	ables	to related third					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X					
		of Schedule D			185,500.		82,500.		
	26	Total liabilities. Add lines 17 through 25			818,227.	26	760,394.		
"		Organizations that follow FASB ASC 958, chec		77					
ĕ		and complete lines 27, 28, 32, and 33.							
lan	27	Net assets without donor restrictions			9,063,310.	27	9,639,096.		
Ba	28	Net assets with donor restrictions			21,562,533.	28	18,106,939.		
our l		Organizations that do not follow FASB ASC 95							
Ē		and complete lines 29 through 33.							
o s	29	Capital stock or trust principal, or current funds				29			
se.	30	Paid-in or capital surplus, or land, building, or equ	uipmer	nt fund		30			
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc	ome,	or other funds		31			
Ne.	32	Total net assets or fund balances		[30,625,843.	32	27,746,035.		
	33	Total liabilities and net assets/fund balances			31,444,070.	33	28,506,429.		

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,31				
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,79	-			
3	3 Revenue less expenses. Subtract line 2 from line 1 3 -						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	30,62				
5	Net unrealized gains (losses) on investments	5	-1,39	<u>7,2</u>	<u>60.</u>		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	27,74	6,0	35.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e 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	d 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 separat	e basis,					
	consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	(2022)		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	See instructions.		
The	orgar	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 churches, or association of churches described in section 170(b)(1)(A)(i).							
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
		city, and state:							
5		An organization operated for	or the benefit of a co	llege or university owner	d or opera	ted by a d	overnmental unit describ	ned in	
3	ш	section 170(b)(1)(A)(iv). (C		nlege of drilversity owner	u or opera	led by a g	overimental unit descrit	Ded III	
			•			70/1-\/4\/A\	4.4		
6	$\overline{\mathbf{v}}$	A federal, state, or local gov						1.8 1 2 12	
7	X	An organization that norma		intial part of its support f	rom a gov	ernmental	unit or from the general	public described in	
		section 170(b)(1)(A)(vi). (C							
8	Н	A community trust describe							
9	Ш	An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a land-grant	college	
		or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of the colleg	je or	
		university:							
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, membership fees, a	nd gross receipts from	
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of its support	from gross investment	
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.	
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to carry out the	e purposes of one or	
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on	
		lines 12a through 12d that	•						
а		Type I. A supporting orga				•	•	, aivina	
		the supported organization	· · · · · · · · · · · · · · · · · · ·	•	•				
		organization. You must o			- · · · · · · · · · · · · · · · · · · ·				
b		Type II. A supporting org			tion with it	e eunnort	ed organization(s) by ha	avina	
~		control or management o						-	
		-			arrie perso	nis triat co	of that age the sup	ported	
_		organization(s). You mus			in connoc	tion with	and functionally integrat	ad with	
С			-					ea with,	
		its supported organization		•					
d								• •	
		that is not functionally int	-	· ·	•		•	iveness	
	_	requirement (see instruct	•	•					
е		☐ Check this box if the organical contents in the contents of the con					a Type I, Type II, Type III		
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi:	zation.			
f	Ente	er the number of supported o	organizations						
<u>g</u>		vide the following information		` ` ` `	(iv) Is the orga	nization lieted	1732	1 (0)	
	((i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
Tota	nl								

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

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

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	3,618,130.	4,376,922.	4,881,790.	5,380,579.	6,022,020.	24,279,441.		
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	262,878.	252,727.	265,561.	236,893.	280,942.	1,299,001.		
4	Total. Add lines 1 through 3	3,881,008.	4,629,649.	5,147,351.	5,617,472.	6,302,962.	25,578,442.		
	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)						6,817,118.		
6	Public support. Subtract line 5 from line 4.						18,761,324.		
Sec	tion B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
7	Amounts from line 4	3,881,008.	4,629,649.	5,147,351.	5,617,472.	6,302,962.	25,578,442.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	1,250,314.	282,236.	77,828.	2,231,724.	167,940.	4,010,042.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)	49,006.	123,126.	165,597.	14,673.	136,164.	488,566.		
11	Total support. Add lines 7 through 10						30,077,050.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 5	<u>,477,536.</u>		
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 5	501(c)(3)			
	organization, check this box and stop	here							
	ction C. Computation of Publ								
14	11 1 5 1					14	62.38 %		
15	Public support percentage from 2021					15	60.02 %		
16a	33 1/3% support test - 2022. If the o								
	stop here. The organization qualifies as a publicly supported organization								
b	33 1/3% support test - 2021. If the c								
	and stop here. The organization qualifies as a publicly supported organization								
17a	10% -facts-and-circumstances tes								
	and if the organization meets the fact			=	•	_			
_	meets the facts-and-circumstances to	-	· · · · · · · · · · · · · · · · · · ·	* * * * * * * * * * * * * * * * * * * *	-				
b	10% -facts-and-circumstances tes	-					10% or		
	more, and if the organization meets the		•		•				
	organization meets the facts-and-circle								
<u>18</u>	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

Schedule A (Form 990) 2022

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

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

Se	ction A. Public Support	, 1	,				
Cal	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ı	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		•	•			
Cal	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	. ,	, ,	` '	, ,		,,
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital			1			
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	tion.
	check this box and stop here	•		,	•	. , . ,	
Se	ction C. Computation of Publ						
	Public support percentage for 2022 (column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inve					•	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a						
ı	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	За		
	Ja		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	0-		
	9a		
	9b		
	0-		
	9c		
	10a		
	10b		
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Pa	rt IV Supporting Organizations (continued)			.gc C
	continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			110
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
-	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	\		
' a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2022

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	nizations				
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust or	Nov. 20, 1970 (explain in I	Part VI). See instructions.			
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional	ally integra	ted Type III supporting org	anization (see			
	instructions).						

Schedule A (Form 990) 2022

Par	t v Type III Non-Functionally integrated 509	(a)(3) Supporting Orga	anizations _{(contint}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	าร	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 to				
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Inspection

ROSE FITZGERALD KENNEDY GREENWAY Name of the organization CONSERVANCY, INC.

Employer identification number 20-1678932

Schedule D (Form 990) 2022

Pai	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		s or Accounts. Complete if the
	organization answered Tes on Chinoso, Fartiv, in	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	· · ·	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	ised funds
	are the organization's property, subject to the organization's	•	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ition or education)	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by th	ne organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
-	,g,g,g,g,		anon cassinomo aaning and year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial staten	nents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections o	-	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for public		-
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these ite	ms.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	I balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		\$

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

	t III Organizations Maintaining C	ollections of Ar	t. Historical Tr	easures, or Oth	er Simila	r Asse	ts/continue	ed)
3	Using the organization's acquisition, accession		-	-			•	/
Ū	collection items (check all that apply):	ori, aria otrior rocorac	s, or core any or the	Tonowing that make	oigi iiiodiric c	00 01 110		
а	Public exhibition	d	Loan or exc	hange program				
b	Scholarly research	e	Other	nango program				
c	Preservation for future generations	Ü						
4	Provide a description of the organization's co	allections and explain	how they further t	he organization's ex	emnt nurnos	se in Par	t XIII	
5	During the year, did the organization solicit o					,0 IIII ai		
Ū	to be sold to raise funds rather than to be ma						Yes	☐ No
Pai	t IV Escrow and Custodial Arran							
	reported an amount on Form 990, Par		on the organization	Transversa res s		, a,,,,		
	Is the organization an agent, trustee, custodi		arv for contribution	ns or other assets no	ot included			
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:					
-	ree, explain the arrangement in a crimin	arra compress are re-					Amount	
С	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
	Ending balance							
	Did the organization include an amount on Fo						Yes	☐ No
	If "Yes," explain the arrangement in Part XIII.				•			
	t V Endowment Funds. Complete it							
		(a) Current year	(b) Prior year			ars back	(e) Four ye	ears back
1a	Beginning of year balance	19,534,849.	17,876,345.	15,886,641.	13,88	88,846.	15,9	79,688.
	Contributions	, ,	· , ,	, ,			,	
	Net investment earnings, gains, and losses	-2,844,048.	2,398,594.	2,690,580.	2,69	5,116.	-1,4	37,820.
	Grants or scholarships	, ,	· · · · ·	, ,			,	
	Other expenditures for facilities							
•	and programs	776,594.	740,090.	700,876.	69	7,321.	6	53,022.
f	Administrative expenses		,	,				
	End of year balance	15,914,207.	19,534,849.	17,876,345.	15,88	86,641.	13,8	88,846.
2	Provide the estimated percentage of the curr						,	
	Board designated or quasi-endowment		%	.,,				
	Permanent endowment 88.9400	%						
	Term endowment 11.0600 g							
•	The percentages on lines 2a, 2b, and 2c sho	· =						
За	Are there endowment funds not in the posse	•	tion that are held a	nd administered for	the			
	organization by:	3					Y	es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						·	X
b	If "Yes" on line 3a(ii), are the related organiza							
4	Describe in Part XIII the intended uses of the							-
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Part	K, line 10.			
	Description of property	(a) Cost or ot	1	- I	Accumulated	<u> </u>	(d) Book v	/alue
		basis (investm	, ,		epreciation		(-,	
	Land	,	•					
	Buildings							
	Leasehold improvements		10,24	0,756. 3,	598,45	7.	6,642	,299.
	Equipment			8,987.	180,25			, 733.
	Other			9,011.	201,29			,716.
	. Add lines 1a through 1e. (Column (d) must e		<u> </u>		-		6,978	

001100011111111	RALD KENNEDY		0-1678932 _{Page}
Schedule D (Form 990) 2022 CONSERVANCY Part VII Investments - Other Securities.	, INC.		U-1070932 Page
Complete if the organization answered "Yes"	on Form 990 Part IV line	a 11h See Form 990 Part Y line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
	(b) DOOK Value	(c) Method of Valuation. Cost of e	nu-or-year 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, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)	<u> </u>		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin	0.15		
Part X Other Liabilities.	e 13.)		
	on Form 000 Port IV line	a 11a ar 11f Saa Farm 000 Dart V lina (25
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e Tie or Tii. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			00 500
(2) CONDITIONAL GRANT ADVANCE	ם		82,500
(3)			
(4)			
(5)			
(6)			
(7)			1

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.... X

Schedule D (Form 990) 2022

82,500.

(8)

CONSERVANCY, INC.

Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents Wit	n Revenue per R	eturr	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,391,192.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
	Net unrealized gains (losses) on investments	2a	-1,397,260. 490,464.		
	Donated services and use of facilities		490,464.		
	Recoveries of prior year grants				
	Other (Describe in Part XIII.)	2d			006 506
	Add lines 2a through 2d			2e	-906,796.
	Subtract line 2e from line 1			3	5,297,988.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	16 610		
	Investment expenses not included on Form 990, Part VIII, line 7b		16,612.		
	Other (Describe in Part XIII.)			_	16 610
	Add lines 4a and 4b			4c	16,612. 5,314,600.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem			5 Potu	
Pai			iii Expenses per	netu	111.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				7,271,000.
	Total expenses and losses per audited financial statements			1	7,271,000.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ء ا	490,464.		
	Donated services and use of facilities		470,404.		
	Prior year adjustments	1 _ 1			
	Other losses	-			
	Other (Describe in Part XIII.) Add lines 2a through 2d			2e	490,464.
	Add lines 2a through 2d Subtract line 2e from line 1			3	6,780,536.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	16,612.		
	Other (Describe in Part XIII.)		. , .		
	Add lines 4a and 4b			4c	16,612.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,797,148.
	t XIII Supplemental Information.				
Provid	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1	and 2b; Part V, line	4; Part	X, line 2; Part XI,
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add				
PAR	T V, LINE 4:				
THE	CONSERVANCY ADHERES TO THE UNIFORM PRUDE	NT MA	NAGEMENT OF	IN	STITUTIONAL
FUN	DS ACT (UPMIFA). THE ASSETS IN ITS PERMAN	ENTLY	RESTRICTED	EN:	DOWMENT
FUN	D ARE DONOR-RESTRICTED ASSETS UNTIL APPRO	PRIAT.	ED ACCORDIN	G T	O THE DONOR
~==	DIV. 1 M TON	a			
STI	PULATION FOR EXPENDITURE BY THE CONSERVAN	CY. T	HE CONSERVA	NCY	HAS
3.00		D TM6		3 0 0	
ADO	PTED AN INVESTMENT AND SPENDING POLICY FO	R ITS	ENDOWMENT	ASS.	ETS AND
ΠOD	ANY DOADD DEGTONAMED NEW AGGEMG MUAM TO	חחמדמו	ATED MO DDEG	ED 7.7	п ((3 D T П 3 T
FOR	ANY BOARD DESIGNATED NET-ASSETS THAT IS	DESIG	NED TO PRES	EKV.	E CAPITAL
шпр	OHOU DICK MANACEMENT WHILE DOOMINING A LE	77ET 0.	ם שמטממונט בי	OB I	mur
TUK	OUGH RISK MANAGEMENT WHILE PROVIDING A LE	ven O.	- SUPPURT F	OK .	TUE
CON	SERVANCY AND ITS PROGRAMS.				
<u> </u>	DERVIEWOT THE THOUSAND.				

PART X, LINE 2:

Part XIII Supplemental Information (continued)
WITH ASC TOPIC, INCOME TAXES. THIS STANDARD CLARIFIES THE ACCOUNTING FOR
UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION THRESHOLD AND
MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENTS REGARDING A TAX
POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CONSERVANCY
HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WHICH QUALIFY FOR
RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AT DECEMBER 31,
2022. THE CONSERVANCY'S INFORMATION RETURNS ARE SUBJECT TO EXAMINATION BY
THE FEDERAL AND STATE JURISDICTIONS.

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

ROSE FITZGERALD KENNEDY GREENWAY Employer identification number Name of the organization CONSERVANCY, INC. 20-1678932 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations f X Solicitation of government grants X Phone solicitations X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) LISA MYKYTA - 114 PRESCOTT Yes No STREET, READING, MA 01867 Х 19,980 GRANT WRITING 906,432 886,452. 906,432, 19 980 886 452 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. MA

232081 10-27-22

Schedule G (Form 990) 2022

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

20-1678932 Page 2

		of fundraising event contributions and gr	oss income on Form 990	-EZ, lines 1 and 6b. List	events with gross receip	
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
				GLOW 2022		col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	779,844.	65,332.		845,176.
	2	Less: Contributions	681,064.	35,932.		716,996.
	3	Gross income (line 1 minus line 2)	98,780.	29,400.		128,180.
	4	Cash prizes				
S	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	88,456.	27,862.		116,318.
	8	Entertainment				48,108. 152,002.
	9 10	Other direct expenses				316,428.
	11					-188,248.
Pa	ırt					
		\$15,000 on Form 990-EZ, line 6a.	1	1 5 11 1 1 1 1 1		_
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)			
•	Г					
а	ls t	ter the state(s) in which the organization condu the organization licensed to conduct gaming a No," explain:	-	states?		Yes No
		ere any of the organization's gaming licenses re	evoked, suspended, or to	erminated during the tax	year?	Yes No
0000		0.07.00			Caha	edule G (Form 990) 2022
2320	52 11	0-27-22			Sche	:uuie G (FUIIII 990) 2027

ROSE FITZGERALD KENNEDY GREENWAY

Sch	nedule G (Form 990) 2022	CONSERVANCY,	INC.		20-16	57893	32 Page 3
		gaming activities with nonme	embers?			Ye	s No
12		•		er of a partnership or other entity formed			
						Ye	s L No
	Indicate the percentage of gam				ı		•
						13a 13b	<u>%</u> %
14	Find the name and address of	the person who prepares the	e organization	n's gaming/special events books and re	L cords:	IOD	70
			: 9	99			
	Name						
	Address						
15:	a Does the organization have a c	ontract with a third party from	n whom the c	organization receives gaming revenue?	,	Ye	s 🗌 No
	a Bood the organization have a o	ontidot with a time party nor	ii wiloiii alo c	ngamzation received garming revenue.			
ŀ	If "Yes," enter the amount of ga			n \$ and the a	amount		
	of gaming revenue retained by						
(If "Yes," enter name and addre	ss of the third party:					
	Name						
	Address						
	_						
16	Gaming manager information:						
	Name						
	Gaming manager compensation	n \$					
	Description of services provide	d					
	Director/officer	Employee	Indep	endent contractor			
	Mandatory distributions:						
á				ons from the gaming proceeds to		Ye	s 🗆 No
ŀ	retain the state gaming license' Fnter the amount of distribution			ed to other exempt organizations or spe		1 <i>C</i> .	5 <u> </u>
	organization's own exempt acti	•	\$				
Pa	art IV Supplemental Info	ormation. Provide the exp	lanations req	uired by Part I, line 2b, columns (iii) and	(v); and Part	III, lines	9, 9b, 10b,
	15b, 15c, 16, and 17b,	as applicable. Also provide a	any additional	information. See instructions.			
					,		

ROSE FITZGERALD KENNEDY GREENWAY

Schedule G (Form 990)	CONSERVANCY,	INC.	20-1678932 Page 4
Schedule G (Form 990) Part IV Supplemental Info	rmation (continued)		

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

	·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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Schedule J (Form 990) 2022

20-1678932

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) CHRIS COOK	(i)	219,519.	0.	0.	0.	2,082.		0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.		0.
(2) ALEX ROGERS PITTMAN	(i)	140,340.	0.	0.	4,331.	24,979.		0.
DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.		0.
(3) DAVID DALENA	(i)	147,982.	0.	0.	0.	16,131.		0.
SENIOR DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						1	<u> </u>

Part III Supplemental Information								
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.								
PART I	, LINE	4:						
SEE ATT	TACHED	SCHEDULE	O FOR	DESCRIPTION	OF	COMPENSATION	REVIEW	PROCEDURES.

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

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.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE CONSERVANCY HAS SOLE RESPONSIBILITY FOR MANAGING ALL ASPECTS OF THE
ROSE KENNEDY GREENWAY, INCLUDING HORTICULTURE, PROGRAMMING, PUBLIC ART,
MAINTENANCE, AND CAPITAL IMPROVEMENTS.
WE ENVISION A VIBRANT, INCLUSIVE, AND EVOLVING GATHERING PLACE THAT
OFFERS
-HEALTHY GREEN SPACE,
-FUN, ENGAGING, AND THOUGHT-PROVOKING EXPERIENCES, AND
-A TESTING GROUND FOR NEW IDEAS.
WE PURSUE OUR MISSION THROUGH
-PARK CARE THAT SUSTAINS YEAR-ROUND BEAUTY, ENSURES SAFETY, AND MODELS
ENVIRONMENTAL STEWARDSHIP;
-ROBUST PROGRAMMING THAT SHOWCASES AND SUPPORTS THE INGENUITY AND
BREADTH OF OUR COMMUNITY; AND
-TEMPORARY EXHIBITIONS OF CONTEMPORARY PUBLIC ART THAT FACILITATE
ARTISTIC EXPERIMENTATION AND SPEAK TO OUR CURRENT MOMENT;
RAISING THE STANDARD OF EXCELLENCE FOR URBAN PARK MANAGEMENT.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
THE GREENWAY IS THE CONTEMPORARY PUBLIC PARK IN THE HEART OF BOSTON,
WELCOMING VISITORS TO GATHER, PLAY, UNWIND, AND EXPLORE. THE GREENWAY
CONSERVANCY IS THE NON-PROFIT RESPONSIBLE FOR THE MANAGEMENT AND CARE
OF THE GREENWAY. THE MAJORITY OF THE PUBLIC PARK'S ANNUAL BUDGET IS
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY Employer identification number CONSERVANCY, INC. Employer identification number 20-1678932

GENEROUSLY PROVIDED BY PRIVATE SOURCES.

IN 2022, THE CONSERVANCY CONTINUED ITS EXCEPTIONAL CARE AND IMPROVEMENT OF THE GREENWAY:

-CONSTRUCTION OF THE NEW NORTH MEADOW ON THE GREENWAY WAS COMPLETED IN
THE SPRING, OPENING UP A BRAND NEW SPACE THAT IS BOTH A GATEWAY TO THE
GREENWAY AND A POCKET OF OPEN SPACE FOR RESIDENTS AND VISITORS TO THE
SURROUNDING NEIGHBORHOODS IN THE WEST END AND NORTH END. CHIN PARK
LIGHTING IMPROVEMENTS BROKE GROUND IN THE FALL AND WILL BRING MUCH
NEEDED ADDITIONAL AND UPGRADED LIGHTNING TO THE CHINATOWN NEIGHBORHOOD.
PLANNING ADVANCED FOR A REDESIGN OF PARTS OF MARY SOO HOO PARK,
INCLUDING A ROBUST COMMUNITY ENGAGEMENT PROCESS TO GATHER FEEDBACK.

THE CONSERVANCY PRESENTED A ROBUST SEASON OF PUBLIC ART FEATURING 8

PROJECTS THAT ENGAGED RESTORATIVE HISTORIES AND CHARTED NEW COSMOLOGIES

THAT CENTERED JOY, INTERDEPENDENCE, ABUNDANCE, AND WONDER, ASKING

BOSTON TO RECONSIDER AND REIMAGINE ITS SENSE OF SELF AS A CITY.

TOGETHER, THESE WORKS SPOKE TO THE POWER OF COLLECTIVE IMAGINATION TO

ENVISION AND CREATE MORE JUST AND INCLUSIVE WORLDS, BEGINNING WITH OUR

PUBLIC SPACES.

THE GREENWAY WAS ONCE AGAIN FULL OF PROGRAMMING AND FESTIVALS, WITH

320 EVENTS THAT WERE FREE AND OPEN TO THE PUBLIC. WHILE THE FOOD TRUCK

PROGRAM CONTINUES TO BE CHALLENGED BY THE SLOW RETURN OF DOWNTOWN

WORKERS, THE GREENWAY CAROUSEL, OUR BEER GARDEN, OUR FREE FITNESS

PROGRAM, AND OUR SLATE OF SPECIAL EVENTS, MOVIES, MUSIC AND MORE

ATTRACTED AUDIENCES THAT WERE EAGER TO RETURN TO GATHERING IN A

ATTRACTED AUDIENCES THAT WERE EAGER TO RETURN TO GATHERING IN A
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Schedule O (Form 990) 2022 Page 2

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY Employer identification number CONSERVANCY, INC. Employer identification number 20-1678932

BEAUTIFUL, WELCOMING SPACE.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

HORTICULTURE

THE CONSERVANCY CONTINUES TO IMPROVE THE GREENWAY'S PHYSICAL APPEARANCE
THROUGH SKILLED, ATTENTIVE ECOLOGICAL HORTICULTURE AND THOUGHTFUL

DESIGN IMPROVEMENTS. AS ONE OF THE FIRST ORGANICALLY-MAINTAINED PUBLIC

PARKS IN THE UNITED STATES, THE CONSERVANCY USES ECOLOGICAL AND ORGANIC

LANDSCAPE PRACTICES THAT ARE INNOVATIVE, AWARD-WINNING, AND FISCALLY

SOUND; OUR PLANTS ARE HEALTHIER, MORE RESILIENT, AND BETTER ABLE TO

WITHSTAND THE STRESSES OF PUBLIC USE AND THE DEMANDS OF AN URBAN

SETTING.

OUR LANDSCAPE MANAGEMENT PROGRAM IS GUIDED BY THE ECOLOGY OF OUR PARK.

OVER THE PAST 10 YEARS, THE HORTICULTURE TEAM HAS BUILT THE PARK'S SOIL

ECOLOGY BY BREWING AND APPLYING ORGANIC COMPOST TEA. OUR HORTICULTURE

IS INCREASINGLY ROBUST AND RESILIENT THROUGH OUR ADDITIONS OF MORE

NATIVE SPECIES AND WORK ADAPTING TO CHANGING SUN/SHADE PATTERNS. NOW

THAT THE PARK IS ESTABLISHED, WE ARE SHIFTING OUR FOCUS TO

UNDERSTANDING THE COMPLEXITY OF OUR PARK'S ECOLOGY, TAILORING OUR

MAINTENANCE EFFORTS TO ITS NEEDS, REDUCING INPUTS AND CONSERVING WATER

WHEREVER POSSIBLE. WE ARE DEDICATED TO THE PRACTICE OF ECOLOGICAL

HORTICULTURE TO CREATE AND MAINTAIN RESILIENT LANDSCAPES THAT PROVIDE

VITAL ECOLOGICAL SERVICES TO OUR COMMUNITY.

IN 2022 WE RELOCATED OUR COMPOST TEA OPERATION FROM THE NORTH STREET

GARAGE TO A BREWING FACILITY LOCATED BEHIND MASSDOT'S BUILDING. WE USED

OUR COMPOST TEA TO ADMINISTER DEEP ROOT INJECTIONS TO THE GREENWAY'S

Schedule O (Form 990) 2022 Page 2

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

TREES. BY INFUSING MICROBIOLOGICAL ORGANISMS INTO THE SOIL FROM WHICH
THE TREES DRAW THEIR NUTRIENTS, WE WERE ABLE TO BUILD A HEALTHY SOIL
ECOLOGY IN ADDITION TO FEEDING THE PLANTS THEMSELVES. WE SWITCHED FROM
USING GRANULAR FERTILIZER TO EXCLUSIVELY USING COMPOST TEA FERTILIZER,
AKA FOLIAR FEEDING, FOR THE LAWNS. BY SPRAYING THE GRASS WITH LIQUID
FERTILIZER, THE PLANT ABSORBS MORE NUTRIENTS THROUGH ITS LEAVES, AND
THE EXCESS PERMEATES THE SOIL, RESULTING IN A MORE EFFICIENT
FERTILIZING METHOD.

THE CONSERVANCY PARTICIPATED IN AND PUBLICIZED PLANTLIFE'S NO MOW MAY,

AN INTERNATIONAL INITIATIVE TO SUPPORT POLLINATORS, REDUCE LAWN INPUTS,

AND GROW HEALTHIER LAWNS. NO MOW MAY, FIRST POPULARIZED IN EUROPE,

CHALLENGES LANDSCAPERS AND HOMEOWNERS TO LET THEIR LAWNS GROW FOR THE

ENTIRE MONTH OF MAY WITHOUT MOWING. IN AREAS OF THE GREENWAY THAT DON'T

SEE MUCH TRAFFIC, WE EXPERIMENTED BY ALLOWING GRASSES TO GO TO SEED TO

SUPPORT NATIVE POLLINATORS. THE RESULTS WERE AESTHETICALLY VARIED LAWN

AREAS THAT PROVIDE A FRIENDLY ENVIRONMENT FOR OUR POLLINATORS.

OUR HORTICULTURE TEAM INSTALLED THE PLANT BEDS OF THE NEW NORTH MEADOW

ON THE GREENWAY, WHICH OPENED IN THE SUMMER. THE PARK'S NATIVE MEADOW

PLANTINGS ARE A TRIBUTE TO THE CHARLES RIVER'S ESTUARINE ECOLOGY.

THE CONSERVANCY'S URBAN ORCHARD AND EDIBLE GARDENS IN DEWEY SQUARE

PRODUCE APPROXIMATELY 200 LBS. OF FRUIT AND VEGETABLES EVERY YEAR. IN

2022, WE DONATED THIS PRODUCE TO ST. FRANCIS HOUSE, A NEARBY NON-PROFIT

ORGANIZATION THAT SERVES 500 INDIVIDUALS EXPERIENCING HOMELESSNESS EACH

DAY.

OUR VOLUNTEER PROGRAM OFFERS OPPORTUNITIES FOR BOTH INDIVIDUALS AND

CORPORATE, NON-PROFIT, ACADEMIC, AND OTHER COMMUNITY GROUPS TO

EXPERIENCE HANDS-ON LEARNING WHILE THEY ASSIST US WITH PARK

STEWARDSHIP. IN 2022, WE SAW A STRONG RETURN OF CORPORATE GROUPS AND

BEGAN WORKING WITH VOLUNTEER TOUR GUIDES AND OFFICE ASSISTANTS AGAIN,

ENGAGING 584 INDIVIDUAL VOLUNTEERS WHO CONTRIBUTED 3,310 HOURS TO

PROVIDE ESSENTIAL ASSISTANCE. ON THE STRENGTH OF REVIEWS FROM

VOLUNTEERS, THE CONSERVANCY HAS WON THE "TOP RATED AWARD" FROM

GREATNONPROFITS.ORG TWELVE YEARS RUNNING.

MAINTENANCE AND CAPITAL PROJECTS

OUR MAINTENANCE TEAM CARES FOR SIX FOUNTAINS, ACRES OF GRANITE PAVING

AND PRECAST UNIT PAVERS, COMPLEX LIGHTING SYSTEMS, THE CAROUSEL AT

TIFFANY GROVE AND MORE, AND SUPPORTS INFRASTRUCTURE FOR PROGRAMS AND

PUBLIC ART AND COLLABORATES WITH THE HORTICULTURE TEAM FREQUENTLY. THIS

TEAM ALSO OVERSEES OUR CONTRACTED BASIC MAINTENANCE INCLUDING LAWN

MOWING, LITTER AND TRASH REMOVAL, POWER WASHING, AND SNOW REMOVAL.

IN 2022, MAINTENANCE PERFORMED AND SUPERVISED REPAIRS AND IMPROVEMENTS

THROUGHOUT THE GREENWAY, WORKING WITH PANDEMIC SAFETY PROTOCOLS AS

REQUIRED.

IN THE NORTH END, WE BEGAN MAINTENANCE OF NEWLY COMPLETED NORTH MEADOW

ON THE GREENWAY (PARCEL 2), SUPERVISED THE REPOINTING OR RESEALING OF

JOINTS IN PAVERS IN SEVERAL AREAS IN THE FOUNTAINS AND PATHS. THE SAND

MEDIA IN THE FOUNTAIN FILTERS WAS REPLACED WITH GLASS BEAD MEDIA WHICH

REMOVES SMALLER PARTICLES AND INHIBITS BACTERIAL GROWTH MORE

IN THE CENTRAL PORTION OF THE GREENWAY, THE MAINTENANCE TEAM OVERSAW

THE REPAIR AND RESURFACING OF ALL THE CAROUSEL CHARACTERS WHICH

EMPLOYED A MORE DURABLE PAINT. THE OPENINGS IN THE PAVEMENT AROUND ALL

THE TREES IN THE TIFFANY GROVE WERE ENLARGED TO ACCOMMODATE EXPANDING

TREE ROOTS. THE MAHOGANY BENCHES, RAILING AND TICKET BOOTH TRIM WERE

GIVEN THEIR ANNUAL SANDING AND OILING. IN RINGS FOUNTAIN, ALL

PENETRATIONS IN THE EQUIPMENT VAULT WALLS WERE SEALED AS PART OF

ONGOING CLIMATE RESILIENCE MEASURES. FOR THE SAME REASON, THE HARBOR

FOG EQUIPMENT VAULT HATCH WAS REPLACED WITH ONE THAT IS WATER TIGHT.

MASONRY REPAIRS SUCH AS RESETTING OF LOOSE PAVERS AND RE-MORTARING AND

RE-CAULKING OF PAVER JOINTS OCCURRED WHERE NEEDED. FAILING BIKE RACKS

WERE REPLACED ADJACENT TO THE CAROUSEL AND ACROSS FROM ROWES WHARF,

CONTINUING OUR STANDARDIZATION OF BIKE RACKS THROUGHOUT THE GREENWAY.

FURTHER SOUTH, SOME OF THE BENCHES IN THE FORT POINT AREA WERE
REPLACED. THE GRAVEL ACCESS ROAD ON DEWEY WAS REGRADED AND NEW GRAVEL

ADDED. 8 NEW BENCHES WERE INSTALLED IN DEWEY PLAZA. A NEW CONTEMPORARY

PICNIC TABLE AND BENCHES, WITH A SEPARATE HANDICAP ACCESSIBLE TABLE AND

BENCHES WERE FABRICATED IN-HOUSE AND INSTALLED IN THE DEMONSTRATION

GARDEN AREA OF THE DEWEY PARCEL. IN CHIN PARK, THE MAINTENANCE TEAM

DESIGNED, FABRICATED AND INSTALLED A WATER MISTING STATION AND

INSTALLED A WATER BUBBLER.

THE MAINTENANCE TEAM HOSTED THREE GROUP VOLUNTEER EVENTS THAT INCLUDED STONE DUST PATH REJUVENATION. IT ALSO ASSISTED THE HORTICULTURE DEPARTMENT BY BUILDING 8 POLLINATOR HOUSES AND 3 ELM BARK BEETLE TRAPS.

IN 2022, THE MAINTENANCE AND CAPITAL PROJECTS STAFF WORKED TOGETHER TO

CONTINUE THE PROCESS OF INTEGRATING CMMS SOFTWARE INTO DAILY

OPERATIONS. CAPITAL PROJECTS OVERSAW THE SUCCESSFUL COMPLETION OF THE

NORTH MEADOW ON THE GREENWAY AND GROUNDBREAKING OF THE CHIN PARK

LIGHTING PROJECT TO BE COMPLETED EARLY IN 2023.

OUR PRIVATELY FUNDED PARK RANGERS PROVIDE SECURITY AND AMBASSADORSHIP

ON THE GREENWAY THROUGHOUT THE YEAR. TWO NEW PARK RANGERS WERE HIRED IN

EARLY 2022 AND REMAINED WITH THE CONSERVANCY THROUGHOUT 2022.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PROGRAMS

THIS YEAR MARKED A RETURN TO NORMALCY, WITH EVENT PARTNERS HAVING THE

TIME TO PLAN AND IMPLEMENT MORE COMPLETE VISIONS OF THEIR REGULAR

EVENTS. THE PUBLIC WAS COMFORTABLE WITH GATHERING OUTSIDE, AND WE AGAIN

SAW CROWDED MARKETS, FULL CAROUSEL RIDES, AND LARGE-SCALE EVENTS.

THE PROGRAMS DEPARTMENT SUPPORTED AND HOSTED MORE THAN 320 FREE EVENTS
ON THE GREENWAY IN 2022, INCLUDING MARKETS, FITNESS CLASSES, AND
PERFORMANCES. FAVORITE FESTIVALS RETURNED, INCLUDING BOSTON LOCAL FOOD
FESTIVAL PRESENTED BY THE SUSTAINABLE BUSINESS NETWORK, THE CARIBBEAN
ONE WORLD EXPO PRESENTED BY THE AUTHENTIC CARIBBEAN FOUNDATION, JAZZ IN
THE PARK PRESENTED BY THE NORTH END MUSIC AND PERFORMING ARTS CENTER,
FILMS AT THE GATE PRESENTED BY THE ASIAN CDC, AND THE LANTERN FESTIVAL
PRESENTED BY CHINATOWN MAIN STREET. WE ALSO SAW THE RETURN OF LET'S
DANCE BOSTON, OFFERING FIVE NIGHTS OF FREE DANCE INSTRUCTION AND LIVE

MUSIC BROUGHT TO THE GREENWAY BY CELEBRITY SERIES OF BOSTON. COOLIDGE

ON THE GREENWAY BROUGHT FREE MOVIES WITH A SCIENCE ON SCREEN SERIES,

AND STREET STAGE RETURNED WITH LIVE OPERA PERFORMANCES.

NEW PARTNERSHIPS BROUGHT THE BAGLY MASSACHUSETTS YOUTH PRIDE EVENT AND
THE BOSTON MUSIC PROJECT FESTIVAL TO THE GREENWAY. AS PART OF A CITY OF
BOSTON EFFORT TO ACTIVATE DOWNTOWN BOSTON, SKATE THE GREENWAY BROUGHT
FREE ROLLER SKATING TO THE GREENWAY IN THE FALL. IN ADDITION,
SIGNIFICANT PLANNING WORK ADVANCED FOR A MAJOR PROGRAMMATIC INITIATIVE,
THE MOMENTUM GREENWAY DANCE SERIES, PRESENTED BY AMAZON. THIS
SITE-RESPONSIVE DANCE PROGRAM HAS BROUGHT TOGETHER FOUR CHOREOGRAPHERS
IN A YEAR-LONG PROCESS TO CONNECT WITH GREENWAY LOCATIONS AND PLAN A
SERIES OF PERFORMANCES IN FALL 2023.

THE BOSTON PUBLIC MARKET RETURNED WITH A WEEKLY FARMERS MARKET AT DEWEY

SQUARE PARK, AND CHINATOWN MAIN STREET CONTINUED THEIR BI-WEEKLY

FARMERS MARKET IN CHIN PARK, WHERE THEY PROVIDED THOUSANDS OF DOLLARS

OF FOOD COUPONS TO LOCAL RESIDENTS. THE GREENWAY ARTISAN MARKET SAW

GREAT SUCCESS WITH OUR OPERATING PARTNER SOMERVILLE FLEA. THE TRILLIUM

GARDEN ON THE GREENWAY WAS OPEN FROM MAY TO OCTOBER, PROVIDING A

BEAUTIFUL OUTDOOR GATHERING SPACE FOR BEER-LOVERS, AND CITY WINERY'S

PLAZA WINE GARDEN WAS OPEN FROM MAY TO SEPTEMBER. 2022 WAS ANOTHER

HIGHLY SUCCESSFUL SEASON FOR FITNESS PROGRAMMING ON THE GREENWAY. WE

ENGAGED 14 PARTNERS, 7 OF WHICH WERE WOMEN- OR MINORITY-OWNED

BUSINESSES, AND 1,117 PEOPLE PARTICIPATED IN 81 OFFERINGS. NEW

OFFERINGS INCLUDED PARKOUR AND SEVERAL ACCESSIBLE YOGA CLASS SERIES.

WE CONTINUED TO OFFER EMPATHETIC AND DATA-DRIVEN SUPPORT TO SMALL

BUSINESSES AND LONG-TERM PARTNERS. WE BEGAN THE FOOD TRUCK SEASON WITH

25 PARTNERS, 16 OF WHICH IDENTIFIED AS WOMEN OR MINORITY-OWNED

BUSINESSES. THE SLOW RETURN OF DOWNTOWN OFFICE WORKERS MADE FOR ANOTHER

TOUGH SEASON AND SOME OF OUR PARTNERS HAD TO DROP THEIR SHIFTS TO FOCUS

ON THEIR RESTAURANTS OR CATERING OPPORTUNITIES. WE RAN A NEW RFP

PROCESS THAT CONTINUES OUR REVENUE-BASED FEE STRUCTURE TO HELP TRUCKS

TO RETURN WITH A SENSE OF PARTNERSHIP AND SECURITY.

THE GREENWAY CONSERVANCY CONTINUED ITS DEEP ENGAGEMENT WITH THE

CHINATOWN COMMUNITY. OUR KEY PROGRAMMATIC PARTNERS INCLUDE THE ASIAN

COMMUNITY DEVELOPMENT CORPORATION, CHINATOWN MAIN STREET, THE CHINESE

CONSOLIDATED BENEVOLENT ASSOCIATION, AND THE PAO ARTS CENTER, AND THIS

YEAR BROUGHT A NEW PARTNERSHIP WITH THE CHINESE BUSINESS ASSOCIATION.

CROWDS GATHERED AT THE VISION/VOICES PERFORMANCE SERIES AT THE YEAR OF

THE TIGER ARTWORK, AND UNDER THE BEAUTIFUL LANTERNS OF THE PUBLIC ART

INSTALLATION, LANTERN STORIES. WE GATHERED COMMUNITY FEEDBACK ON A

REDESIGN FOR A SECTION OF MARY SOO HOO PARK THAT WILL PROVIDE MORE

RECREATIONAL AND CHILDREN'S SPACE IN THIS BUSY NEIGHBORHOOD. OUR WEEKLY

CHIN PARK PLAY SESSIONS ENGAGED FAMILIES FROM JUNE TO OCTOBER, AND WE

AGAIN SPONSORED WEEKLY LION DANCES AT THE CHINATOWN GATE TO DRIVE

WEEKEND TOURISM.

WE ALSO CONTINUED TO PROMOTE OUR PARK AMENITIES. THE GREENWAY CAROUSEL

AT THE TIFFANY & CO. FOUNDATION GROVE, A BOSTON LANDMARK, SAW ANOTHER

STRONG YEAR, WITH OVER 134,000 RIDERS TAKING A SPIN ON THE SEA TURTLE,

RABBIT, LOBSTER, COD, PEREGRINE FALCON, SKUNK, AND OTHER CHARACTERS,

ALL INSPIRED BY THE DRAWINGS OF BOSTON SCHOOL CHILDREN AND BROUGHT TO

LIFE BY A LOCAL ARTIST. OVER 1575 RIDERS RODE FOR FREE THROUGH OUR

PARTICIPATION IN THE EBT CARD TO CULTURE PROGRAM. THE FREE WI-FI
NETWORK CONTINUED TO BE POPULAR, WITH OVER 35,000 LOGINS THIS YEAR.

IN JUNE, THE CONSERVANCY'S LARGEST FUNDRAISING EVENT, THE GREENWAY

GALA, RETURNED TO THE GREENWAY IN PERSON AND IN A NEW, SPECTACULAR

LOCATION BY THE RINGS FOUNTAIN. THE GALA HONORED MAYOR MICHELLE WU AND

DREW A CROWD OF 415. FINANCIALLY, IT WAS THE MOST SUCCESSFUL GALA IN

OUR HISTORY, WITH NET REVENUES OF MORE THAN \$500,000, DESPITE INCREASED

EVENT COSTS OVER OUR LAST IN-PERSON GALA IN 2019. THE NEXT NIGHT WAS

GLOW IN THE PARK, OUR YOUNG PROFESSIONALS FUNDRAISING EVENT, WHICH DREW

300 ATTENDEES AND NETTED MORE THAN \$14,000.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

PUBLIC ART

THE GREENWAY HAS BECOME A PREMIER DESTINATION TO SEE CONTEMPORARY WORKS

OF ART IN DOWNTOWN BOSTON THROUGH FREE, TEMPORARY EXHIBITIONS, ENGAGING

PEOPLE IN MEANINGFUL EXPERIENCES, INTERACTIONS, AND DIALOGUE WITH ART

AND EACH OTHER. THE CONSERVANCY'S PUBLIC ART PROGRAM GIVES ARTISTS

UNIQUE OPPORTUNITIES TO EXHIBIT BOLD, NEW WORK THAT CONSIDERS THE

POSSIBILITIES OF 21ST CENTURY BOSTON. UNDER DR. AUDREY LOPEZ, THE

PROGRAM IS INTENTIONALLY WORKING TO ADVANCE, PROMOTE, AND MEET THE

NEEDS OF LOCAL BLACK, INDIGENOUS, AND LGBTQIA+ ARTISTS, AND OTHER

GROUPS THAT HAVE BEEN UNDERREPRESENTED ON THE GREENWAY AND OTHER HIGH

PROFILE PUBLIC SPACES IN BOSTON BY:

-PROVIDING BIPOC ARTISTS WITH NEW OPPORTUNITIES, RESOURCES, AND SUPPORT
TO ADVANCE THEIR PRACTICES.

-COMMISSIONING AND PRESENTING INNOVATIVE, AESTHETICALLY-EXCEPTIONAL ARTWORK SHAPED THROUGH MEANINGFUL, LONG-TERM COMMUNITY ENGAGEMENT.

-EXPANDING ACCESS TO THE GREENWAY AS A PLATFORM AND BUILDING TRUST

BETWEEN THE CONSERVANCY AND BIPOC ARTISTS, COMMUNITIES, AND

ORGANIZATIONAL PARTNERS.

THE FOLLOWING IS A LIST OF 2022 EXHIBITIONS ON THE GREENWAY:

BREATHE LIFE TOGETHER, 2022 IS THE NEWEST MURAL INSTALLATION ON THE

GREENWAY WALL IN DEWEY SQUARE. THE ARTWORK CENTERS A JOYFUL, COSMIC,

AND POWERFUL DEPICTION OF BLACK YOUTH CREATED BY ROB GIBBS - THE FIRST

BLACK BOSTON-NATIVE ARTIST COMMISSIONED FOR THE MURAL. IN THIS WORK,

GIBBS DRAWS UPON BLACK PORTRAITURE, AFROFUTURISM, AND NON-WESTERN

COSMOLOGIES TO CREATE A CELEBRATION OF THE INTERGENERATIONAL STRENGTH,

COLLECTIVE IMAGINATION, AND JOY OF BLACK LIFE. IN MAY 2022, OVER 2,000

PEOPLE ATTENDED THE CONSERVANCY'S FIRST MURAL FEST, WHICH INVITED

COMMUNITIES TO CELEBRATE GIBB'S ARTWORK AND MESSAGE WITH A COMMUNITY

PARTY THAT INCLUDED HANDS-ON ART MAKING, A LIVE DJ, SPOKEN WORD

PERFORMANCES, CREATIVE PLAY FOR KIDS, AND ROLLER SKATING.

DESIGNED TO COMPLEMENT GIBBS' MURAL, SEEDS OF LOVE AND JUSTICE, 2022 BY

EKUA HOLMES, FEATURED HUNDREDS OF SUNFLOWERS PLANTED IN GARDENS

SURROUNDING THE MURAL. THE SUNFLOWERS WERE DOTTED WITH BRIGHT GOLDEN

SIGNAGE FEATURING POETRY AND INSPIRATIONAL QUOTES CURATED BY HOLMES

THAT SPEAK TO THE IMPORTANCE OF ENGAGING, SUPPORTING, AND NURTURING

BOSTON'S YOUTH AND UPCOMING GENERATIONS.

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YEAR OF THE TIGER, 2022 WAS A SITE-SPECIFIC PAVILION DESIGNED BY NYC

CHINATOWN-BASED ARTIST/ARCHITECT CHERYL WING-ZI WONG. THE PAVILION WAS

FORMALLY ACTIVATED WITH VISIONS/VOICES, A SERIES OF FOUR, IN-PERSON,

OUTDOOR MULTILINGUAL PERFORMANCES BY BOSTON-AREA AAPI ARTISTS,

CO-CURATED BY PAO ARTS CENTER. AN ESTIMATED 510 PEOPLE ATTENDED. WHEN

THE ARTIST-BUILT STRUCTURE WAS NOT IN USE AS A FORMAL STAGE, THE

COMMUNITY AND OTHER NON-PROFIT GROUPS AND ORGANIZATIONS WERE ENCOURAGED

TO USE IT TO GATHER AND CONNECT.

LANTERN STORIES, 2022 BY YU-WEN WU WAS A PUBLIC ARTWORK COMPRISING 31

LANTERNS THAT CELEBRATE THE PAST, PRESENT, AND FUTURE OF BOSTON'S

VIBRANT CHINATOWN COMMUNITY. ADDING TO THE ORIGINAL COMMISSION BY THE

GREENWAY CONSERVANCY IN 2020, THIS ITERATION OF LANTERN STORIES

INCLUDED NEW IMAGERY FOR WU'S PREVIOUS LANTERNS LIONS, STOP ASIAN HATE,

AND EXCLUSION ACT, AS WELL AS COLLABORATIONS WITH ARTISTS FROM BOTH

BOSTON AND SAN FRANCISCO TO CREATE FIVE NEW LANTERNS THAT BEGIN A

BICOASTAL DIALOGUE WITH WU'S CONCURRENT WEST COAST ITERATION OF LANTERN

STORIES IN SAN FRANCISCO'S CHINATOWN.

WHERE THE LAND AND OUR BODIES INTERSECT, 2022 BY MITHSUCA BERRY WAS A

SERIES OF FOUR DIGITAL ILLUSTRATIONS PRINTED ON FABRIC FLAGS AND FOUR

VINYL TEXT INSTALLATIONS MOUNTED ON THE LIGHT BLADES ON THE GREENWAY.

OF THE ARTWORK, BERRY SAYS "MY WORK IS MEANT TO AFFIRM THOSE IN THIS

SPACE, AND THANK THEM FOR WAKING UP TO LIVE ANOTHER DAY, AND ENCOURAGE

THEM TO SHARE THIS EXPERIENCE WITH THEIR COMMUNITY."

AS WE RISE, 2022 WAS A SITE-SPECIFIC VIDEO INSTALLATION ON THE FEDERAL

RESERVE BUILDING IN DOWNTOWN BOSTON THAT FEATURED SHORT BURSTS OF

FREESTYLE-BASED STREET DANCE FROM 5 LOCAL DANCERS SPANNING MULTIPLE

GENERATIONS. CREATED IN COLLABORATION WITH ARTIST WENDY YU (SYDNEY,

AUSTRALIA), LOCAL STREET DANCE ORGANIZATION THE FLAVOR CONTINUES

(CAMBRIDGE, MA), AND PROJECTION ARTISTS ILLUMINUS (BOSTON, MA), THE

VIDEO INSTALLATION WAS GENERATED THROUGH A PROCESS OF RECIPROCAL

CREATIVE EXCHANGE OVER A PERIOD OF SIX MONTHS. THEIR ARTISTIC

COLLABORATION CREATED AN INNOVATIVE PLATFORM TO SHARE THE INTRICATE AND

COMPLEX -YET OFTEN OVERLOOKED- PRACTICES AND TRADITIONS OF STREET DANCE

IN NEW WAYS.

TUHMAGATIPI (DAKOTA FOR "BEEHIVE"), 2022 BY ERIN GENIA WAS A SCULPTURAL
HABITAT AND WATER SOURCE FOR POLLINATORS CREATED USING THE DAKOTA

MORNING STAR FORM AND BUILT WITH SUSTAINABLE MATERIALS: CLAY, NATURAL

COMPOSITES, AND DRIFTWOOD. SITUATED IN THE WILDFLOWER MEADOW -AN

UNDEVELOPED AREA OF THE GREENWAY THAT SUPPORTS MANY BEE SPECIES,

BUTTERFLIES AND MOTHS- THE PROJECT HONORED INDIGENOUS SCIENCE AS WELL

AS THE KEY ECOLOGICAL ROLES OF POLLINATORS AND PLANTS, WHO ARE

INCREASINGLY THREATENED BY CLIMATE CHANGE.

ACKNOWLEDGE + LISTEN: UNDOING COLONIAL DESIGN IN MASSACHUSETTS, 2022

WAS A PUBLIC ART INSTALLATION CO-DESIGNED BY LESLEY ART + DESIGN

STUDENTS AND FACULTY AS ONE PIECE OF A LARGER LEGISLATIVE PROJECT

THROUGH WHICH THEY WORKED LOCALLY AND NATIONALLY WITH INDIGENOUS

PROJECT ADVISORS, HISTORIANS, AND NON-INDIGENOUS LEGISLATIVE STAFF TO

CHALLENGE THE RACIST IMAGERY FEATURED ON THE STATE SEAL AND FLAG OF

MASSACHUSETTS.

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OUTREACH

THE OUTREACH DEPARTMENT LEADS EXTERNAL MESSAGING EFFORTS TO DRAW

VISITORS TO GATHER, PLAY, UNWIND, AND EXPLORE ON THE GREENWAY AND

UNDERSTAND CONSERVANCY INITIATIVES. THE TEAM IS IN REGULAR AND

CONSISTENT CONTACT WITH THE GENERAL PUBLIC, COMMUNITY GROUPS,

GOVERNMENT OFFICIALS, THE MEDIA, AND OTHER STAKEHOLDERS THROUGH DIRECT

OUTREACH, IN-PARK MESSAGING, AND ELECTRONIC COMMUNICATIONS, INCLUDING

EMAIL AND OWNED DIGITAL MEDIA ASSETS.

IN 2022, THE OUTREACH DEPARTMENT PROVIDED IMPORTANT MESSAGING SUPPORT

FOR THE MANY PARK EVENTS AND ACTIVITIES THAT HAPPEN YEAR-ROUND. WORKING

CLOSELY WITH THE NEW CURATOR AND DIRECTOR OF PUBLIC ART, WE

COMMUNICATED ON THE ROBUST SEASON OF PUBLIC ART, INCLUDING NEW EVENTS

AND OPPORTUNITIES TO ENGAGE WITH ARTISTS.

THE OUTREACH DEPARTMENT SUCCESSFULLY PITCHED AND GOT COVERAGE ON

STORIES OF OUR REMARKABLE ACHIEVEMENTS THIS YEAR, GENERATING MORE THAN

175 NEWS STORIES FROM A LARGE VARIETY OF MEDIA OUTLETS, INCLUDING THE

BOSTON GLOBE, BOSTON BUSINESS JOURNAL, COMMONWEALTH MAGAZINE, WBUR, AND

THE BAY STATE BANNER. WE SAW A 2.4% GROWTH IN OUR SOCIAL MEDIA

FOLLOWING AND A 14% INCREASE IN OUR EMAIL SUBSCRIBER BASE.

OUTREACH CONTINUED WORK ON BRAND AWARENESS INITIATIVES THROUGHOUT THE

PARK IN 2022. THE TEAM IMPLEMENTED A NEW TRILINGUAL BRANDING AND MAP ON

OUR IN-PARK MOVABLE SIGNAGE AND PROVIDED SUPPORT FOR CAPITAL

IMPROVEMENT PROJECTS AT NORTH MEADOW ON THE GREENWAY AND FOR THE CHIN

PARK LIGHTING PROJECT. AN IN-PARK SIGNAGE AUDIT WAS COMPLETED AND WILL

HELP DEVELOP PRIORITY PROJECTS. OUTREACH ALSO SUPPORTED THE OTHER

DEPARTMENTS' SIGNAGE, MESSAGING, AND COLLATERAL NEEDS ACROSS A WIDE

RANGE OF DIGITAL, PRINT, AND IN-PARK MEDIA. THE OUTREACH DEPARTMENT

DESIGNED AND IMPLEMENTED ALL PARTNER AND SPONSOR RECOGNITION MATERIALS,

INCLUDING THE CONTINUATION OF A LARGE-SCALE PARK BANNER PROJECT TO

RECOGNIZE GALA SPONSORS.

THE OUTREACH DEPARTMENT CONTINUED TO PROVIDE UPDATES AND SEEK FEEDBACK

FROM STAKEHOLDERS INCLUDING THE GREENWAY BUSINESS IMPROVEMENT DISTRICT

MEMBERS, ELECTED OFFICIALS, GOVERNMENT STAFF, PARTNER ORGANIZATIONS,

AND COMMUNITY MEMBERS. IN PARTICULAR, WE HELPED TO ONBOARD AND MESSAGE

NEW LEADERSHIP STAFF AND WE WORKED CLOSELY WITH CHINATOWN COMMUNITY

STAKEHOLDERS ON UPCOMING PARK IMPROVEMENTS AND PUBLIC ART.

EXPENSES \$ 227,100. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,075.

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

PER COMMONWEALTH LAW, AND THE ACTS OF 2008, CERTAIN MEMBERS OF THE BOARD OF DIRECTORS ARE NOMINATED BY ELECTED OFFICIALS OR BY GOVERNMENT AGENCIES.

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

AFTER INTERNAL REVIEW BY THE CONSERVANCY'S FINANCE DEPARTMENT AS WELL AS BY ITS EXECUTIVE DIRECTOR, A DRAFT OF THE FORM 990 IS DELIVERED TO THE FINANCE, AUDIT, AND RISK MANAGEMENT COMMITTEE (FARMC) OF THE BOARD OF DIRECTORS FOR ITS REVIEW AND COMMENT. THE FARMC MEETS WITH THE CONSERVANCY'S INDEPENDENT ACCOUNTING FIRM TO REVIEW ANY QUESTIONS IT MAY HAVE. ONCE THE FARMC APPROVES THE DRAFT FORM 990, THE INDEPENDENT AUDITING FIRM PROVIDES A FINAL VERSION FOR REVIEW BY THE FULL BOARD PRIOR TO THE

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

RETURN BEING FILED.

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). 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. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or ROSE FITZGERALD KENNEDY GREENWAY print 20-1678932 CONSERVANCY, INC. Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 185 KNEELAND STREET return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. 02111 BOSTON, MA Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ 01 Form 1041-A 80 Form 4720 (individual) Form 4720 (other than individual) 09 03 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) 07 CHRIS COOK The books are in the care of ► 185 KNEELAND STREET - BOSTON, MA 02111 Telephone No. ► 617-292-0020 Fax No. ▶ 617 292-2705 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this __l. If it is for part of the group, check this box ▶ ____ and attach a list with the names and TINs of all members the extension is for. NOVEMBER 15, 2023, to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or ___ tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 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

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

Form 8868 (Rev. 1-2022)

instructions.