

Certified Public Accountants

One Battery Park Plaza New York, NY 10004-1405 Tel: (212) 661 - 7777 Fax: (212) 661 - 4010

February 15, 2024

Mr. Christopher Hayward President Westmoreland Sanctuary, Inc. 260 Chestnut Ridge Road Mount Kisco, NY 10549

Dear Mr. Hayward:

Enclosed are the tax returns. We will submit, on the organization's behalf, the federal tax return (Form 990) electronically. Please sign, date and return Form 8879-TE to us so that we may electronically file the returns. Authorization forms may be emailed to gramos@comdcpa.com.

We will not submit the New York State Form CHAR500 electronically. The Form CHAR500 is now required to be submitted directly by the organization via the New York State Charities website, as indicated on the instructions. In addition, payments are required to be made online.

If you would like a paper copy of the return for your records, please advise.

If you have any questions, please do not hesitate to contact us.

Very truly yours,

Alexander Lazzaruolo

Alexander Lazzaruolo, CPA, Esq. Partner

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

MARCH 31, 2023

PREPARED FOR:

WESTMORELAND SANCTUARY, INC. 260 CHESTNUT RIDGE ROAD MOUNT KISCO, NY 10549

PREPARED BY:

CONDON O'MEARA MCGINTY & DONNELLY LLP ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

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

TAXPAYER COPY

		RS e-file Signa	ture Authorization	ו	OMB No. 1545-0047
Form 8879-TE			Exempt Entity		
	For calendar year 2022,	or fiscal year beginning APR 1		1, 20 <mark>23</mark>	2022
Department of the Treasury Internal Revenue Service			RS. Keep for your records. 879TE for the latest information.		
Name of filer				EIN or SS	N
WESTMOREI	AND SANCTUARY,	INC.		13-18	355977
Name and title of officer or pe	erson subject to tax			ł	
	-				
Part I Type of	Return and Retu	urn Information			
Form 5330 filers may enter or 10a below, and the am	r dollars and cents. F ount on that line for t	For all other forms, enter wh he return being filed with th	nd enter the applicable amount, if hole dollars only. If you check the his form was blank, then leave line the return, then enter -0- on the ap	box on line 1a, 2a box 1b, 2b, 3b, 4b, 5 b	, 3a, 4a, 5a, 6a, 7a, 8a, 9a, o, 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check	nere 🛄 🗴 🗴	b Total revenue, if any (Form 990, Part VIII, column (A), lin	ne 12)	1b 2,045,875.
2a Form 990-EZ che	eck here	b Total revenue, if any (Form 990-EZ, line 9)		2b
3a Form 1120-POL	check here		POL, line 22)		
4a Form 990-PF che			nent income (Form 990-PF, Part \		
5a Form 8868 check			368, line 3c)		
6a Form 990-T chec			Part III, line 4)		
7a Form 4720 check			Part III, line 1)		
8a Form 5227 check			of tax year (Form 5227, Item D)		8b
9a Form 5330 check		b Tax due (Form 5330, F			9b
10a Form 8038-CP cl			ment requested (Form 8038-CP, Officer or Person Subject		10b
of any refund. If applicable entry to the financial instit financial institution to deb later than 2 business days payment of taxes to receiv personal identification nur PIN: check one box only X I authorize <u>CON</u> as my signature with a state age on the return's of As an officer or return. If I have IRS Fed/State p	e, I authorize the U.S ution account indicat it the entry to this ac s prior to the paymen ve confidential inform mber (PIN) as my sign IDON O'MEARA MCG on the tax year 2022 incy(ies) regulating ch disclosure consent so person subject to tax indicated within this program, I will enter m	Treasury and its designate ted in the tax preparation s count. To revoke a paymer t (settlement) date. I also an ation necessary to answer hature for the electronic ret <u>INTY & DONNELLY LLP</u> ERO firm nan 2 electronically filed return. harities as part of the IRS F creen.	If I have indicated within this returned/State program, I also authorized I will enter my PIN as my signatur turn is being filed with a state age	lectronic funds with I taxes owed on this ry Financial Agent a nvolved in the proc ed to the payment. t to electronic funds to enter my l rn that a copy of th e the aforementioned re on the tax year 2 ency(ies) regulating	drawal (direct debit) s return, and the tt 1-888-353-4537 no essing of the electronic I have selected a s withdrawal. PIN 55977 Enter five numbers, but do not enter all zeros e return is being filed ed ERO to enter my PIN 022 electronically filed charities as part of the
Signature of officer or person subje	et to tax ation and Auther	ntication		Dat	e
ERO's EFIN/PIN. Enter y					
number (EFIN) followed by	/ your five-digit self-se	elected PIN.	1360180777 Do not enter a	all zeros	
submitting this return in a Business Returns.	ccordance with the re	equirements of Pub. 4163,	the 2022 electronically filed return , Modernized e-File (MeF) Informat	tion for Authorized I	
ERO's signature COND	ON O'MEARA MCGII	NTY & DONNELLY Alex	<u>(ander Lazzaruo</u> loDate	<u>2/15/2024</u>	
	Do Not Su	EX Nust Feth in This omit This Form to th	s Forn - See Instructions e IRS Unless Requested	To Do So	
LHA For Privacy Act and	d Paperwork Reduc	tion Act Notice, see instru	uctions.		Form 8879-TE (2022)

202521 12-16-22

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

<u>A</u>	For th	e 2022 calendar year, or tax year beginning APR 1, 2022 and	ending M2	AR 31, 2023				
B	Check if applicab	C Name of organization		D Employer identif	fication number			
	Addre	WESTMORELAND SANCTUARY, INC.						
Name change Doing business as 13-1855977								
	er							
	8							
	termin ated Amer			G Gross receipts \$	6,841,649.			
	return							
	Appli tion pendi	F Name and address of principal officer: Child For Har Wards		for subordinate	es? Yes X No			
		SAME AS C ABOVE		H(b) Are all subordinates	included? Yes No			
<u> </u>	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o	or 527	If "No," attach	a list. See instructions			
	Websi			H(c) Group exempti				
		f organization: X Corporation Trust Association Other	L Year	of formation: 1957	M State of legal domicile: NY			
Pa	art I	Summary						
¢	1	Briefly describe the organization's mission or most significant activities:		ND WILDLIFE				
anc		PRESERVE WITH ITS MISSION TO ESTABLISH, MAINTAIN AND CONSERVE						
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos	ed of more					
Š	3			<u>3</u>				
ن مر	4	Number of independent voting members of the governing body (Part VI, line 1b)						
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)						
iviti	6	Total number of volunteers (estimate if necessary)						
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12						
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0. Current Year			
				753,105,				
ne	8	Contributions and grants (Part VIII, line 1h)		72,541.	, ,			
Revenue	9	Program service revenue (Part VIII, line 2g)		465,716.	· · · · ·			
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)						
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		23,986. 1,315,348.	,			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,313,340	, ,			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	· ·				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		231,472				
Expenses	160	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)		231,472	,			
en	10a		656					
Ĕ	17	Total fundraising expenses (Part IX, column (D), line 25) 22, 0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		293,609,	. 383,950.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		525,081,	· · · · · ·			
	19	Revenue less expenses. Subtract line 18 from line 12		790,267	,			
OL				ginning of Current Year	, ,			
ets (20	Total assets (Part X, line 16)		9,176,516.				
Assets	21	Total liabilities (Part X, line 26)		22,138,				
Net,	22	Net assets or fund balances. Subtract line 21 from line 20		9,154,378,	· · ·			
P	art II			, , ,	, , , , , ,			

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

Sign	Signature of officer		Date					
Here								
nere	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date Check	PTIN				
Paid	ALEXANDER LAZZARUOL	Nlexander Lazariolo	215/2023 self-employed	P01775353				
Preparer	Firm's name CONDON D'MAR MAIN Y &	CIVELIY L P		-3628255				
Use Only	Firm's address ONE BATTERY PARK PLAZA, 7	TH FL.						
NEW YORK, NY 10004 Phone no.212-66								
May the II	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No				
232001 12-1	3-22 I HA For Paperwork Reduction Act Noti	ce, see the separate instructions.		Form 990 (2022)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	1990 (2022) WESTMORELAND SANCTUARY, INC.	13-1855977	Paç	ge 2
Pa	rt III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III		<u>[</u>	
1	Briefly describe the organization's mission:			
	ESTABLISHED AS A NOT-FOR-PROFIT NATURE CENTER AND WILDLIFE PRESERVE			
	WITH ITS MISSION TO ESTABLISH, MAINTAIN AND CONSERVE ITS 669 ACRES OF			
	LAND AND 8.5 MILES OF HIKING TRAILS FOR THE FREE USE, ENJOYMENT AND			
	EDUCATION OF THE PUBLIC.			
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		es X	No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.			NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		es X	No
Ū	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services, as m	leasured by expense	es.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others			
	revenue, if any, for each program service reported.			
4a	(Code:) (Expenses \$261,067. including grants of \$) (Revenue	÷\$	85,846	5.)
	EDUCATIONAL PROGRAMS. WESTMORELAND OFFERS A VARIETY OF ENVIRONMENTAL			
	PROGRAMS EMPLOYING THE GREEN STEM (SCIENCE, TECHNOLOGY, ENGINEERING,			
	AND MATHEMATICS) LEARNING APPROACH TO FINDING EDUCATIONAL SOLUTIONS			
	THAT REDUCE THE ECOLOGICAL FOOTPRINT IN SUSTAINING THE BENEFIT TO THE			
	ENVIRONMENT. THESE PROGRAMS EDUCATE BETWEEN 7,000-9,000 PARTICIPANTS			
	EACH YEAR FROM VARIOUS SCHOOLS (I.E., CHARTER, PUBLIC, ALTERNATIVE.			
	ETC.) IN WESTCHESTER AND NEW YORK CITY. FOR EXAMPLE, IN FISCAL 2023, 492			
	PROGRAMS WERE OFFERED ATTRACTING A TOTAL OF 8,084 PARTICIPANTS. THE GOALS OF THESE PROGRAMS ARE TO CREATE AN APPRECIATION OF NATURE WHILE			
	PROVIDING ACADEMIC SUPPORT THROUGH IMMERSIVE EXPERIENTIAL EDUCATION. TO			
	MEET THE DEMAND FOR WESTMORELAND'S GROWING EDUCATIONAL AND CONSERVATION			
4b	(Code:) (Expenses \$ 160,288. including grants of \$) (Revenue	- \$)
	CONSERVATION AND LAND MANAGEMENT. WESTMORELAND'S CHALLENGE WITH THE			_ ′
	MANAGEMENT OF 669 ACRES IS TO CONCENTRATE ITS CONSERVATION FUNDING			
	EFFORTS ON FIVE HABITATS REQUIRING IMMEDIATE RESTORATION, NAMELY (1)			
	WHEELER FIELD, A WET FIELD HABITAT WITH AN ATTACHING SHRUB/WOODLAND			
	CORRIDOR, (2) CATBIRD FIELD, A DRY FIELD HABITAT, (3)LOST POND VERNAL			
	POOL, A SEASONAL POND REQUIRING MONITORING, (4) BETCHEL LAKE, A LARGE			
	OPEN WATER WETLAND, AND (5 RIPARIAN STREAM HABITAT, A NYS REGULATED			
	WETLAND. WESTMORELAND MANAGES ITS ENTIRE ACREAGE OF LAND FOR THE FREE			
	USE AND ENJOYMENT OF THE PUBLIC, INCLUDING 8.5 MILES OF HIKING TRAILS,			
	TWO TOWN OF BEDFORD CEMETERIES, AND HOSTS 3 MILES OF HORSE TRAILS.			
4c	(Code:) (Expenses \$ including grants of \$) (Revenue			
70		; o)
4d	Other program services (Describe proschrödele P.)	`		
A ::	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 421,355.)		
<u>4e</u>	Total program service expenses 421,355.	Eam	n 990 (2	0000
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Form 990 (2022)

Part IV Checklist of Required Schedules

WESTMORELAND SANCTUARY, INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	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	445		x
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c		x
А	assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 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			
u		11d		x
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one of more fospital facilities. If Ves, 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	000	X
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232003 12-13-22

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Form 990 (2022)

WESTMORELAND SANCTUARY, INC.

Pa	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		x
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%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
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? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	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		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
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		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box pron Form 1096. Enter-on if not applicable			
b				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
5	(gambling) winnings to prize winners?	1c	х	
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13-1855977

Page 4

		13-1855977	F	Page 5
Par	art V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	5		
b	o If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a				x
b		3b		
	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)?			x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a				x
b				x
				\square
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization s			\square
	any contributions that were not tax deductible as charitable contributions?			x
b	 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 			<u> </u>
~	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a		the payor? 7a	х	
b			х	<u> </u>
c		·····		<u> </u>
•	to file Form 8282?			x
d				
e		7e		
f		7f		<u> </u>
g				+-
h				\vdash
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а		9a		
b		9b		
10	Section 501(c)(7) organizations. Enter:			
а	a Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а				
b				
	amounts due or received from them.)			
12a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
	D 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		13a	1	
	Note: See the instructions for additional information the organization must report on Schedule O.			
b				
	organization is licensed to issue qualified health plans			
с				
14a		14a	1	x
b	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14k)	Τ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?			х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution surject to the section 4968 excise ax or net investment income?	16		х
	If "Yes," complete Form 4720 Schedule 9. AYER COPY			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			
	If "Yes," complete Form 6069.			
232005	05 12-13-22	For	m 990	(2022)

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5 2022.05050 WESTMORELAND SANCTUARY, I 5977WS_1

MORELAND	SANCTUARY	INC.

Form	990 (2022) WESTMORELAND SANCTUARY, INC. 13-18559	77	Р	age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for	a "No" i	respon	se
	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 1a1	6		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1	6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	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	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	
			Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	x	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a		
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	12.5		
-	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	Х	
b	Other officers or key employees of the organization	15b	х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		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			
<u> 600</u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17				
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 for public inspection. Indicate how you made these available. Check all that apply.	js only)	avalla	bie
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if support the organization mide its governing documents, conflic o interest policy, ar	nd finan	cial	
.5	statements available to the public arming the tay year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ANN PAUL - (914)666-8448			
	260 CHESTNUT RIDGE RD, MOUNT KISCO, NY 10549			
232006) 12-13-22	Forn	990	(2022)
	6			. ,

2022.05050 WESTMORELAND SANCTUARY, I 5977WS_1

Form 990 (20	D22) WESTMORELAND SANCTUARY, INC.	13-1855977	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	nsated	
	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		
	e this table for all persons required to be listed. Report compensation for the calendar year ending with ou of the organization's current officers, directors, trustees (whether individuals or organizations), regardles	0	,

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

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

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

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

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

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do		Pos		l than c	ane	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	id a d	Irecto	r/trus [:]	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or di	ee			sated		organization	(W-2/1099-MISC/	from the
	organizations	rustee	l trus		ee	npen		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	Individual trustee or director	utiona	L_	nploy	st cor	L.			organizations
	line)	Indivi	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			g
(1) ANN PAUL	40.00									
EXECUTIVE DIRECTOR				х				93,368.	0.	6,000.
(2) CHRISTOPHER HAYWARD	1.00									
PRESIDENT		х		х				0.	0.	0.
(3) MATTHEW BROMLEY	1.00									
VICE PRESIDENT		х		х				0.	0.	0.
(4) SUSAN GREENWALD	1.00									
VICE PRESIDENT		х		х				0.	0.	0.
(5) GLENN TICEHURST	1.00									
VICE PRESIDENT		Х		Х				٥.	٥.	0.
(6) GRAHAM ANDERSON	2.00									
TREASURER		х		Х				٥.	0.	0.
(7) CINDY FEUREISEN	1.00									
SECRETARY		Х		х				٥.	0.	0.
(8) ALLI CHOI	1.00									
TRUSTEE		Х						0.	0.	0.
(9) LIZA CLYMER	1.00									
TRUSTEE		Х						0.	0.	0.
(10) KENNETH KRASNOW	1.00									
TRUSTEE		Х						0.	0.	0.
(11) ARTHUR J. LIKA	1.00									
TRUSTEE		Х						0.	0.	0.
(12) MELISSA MENDEZ	1.00									
TRUSTEE		х						0.	0.	0.
(13) ANTOINETTE MUTI	1.00									_
TRUSTEE		х						0.	0.	0.
(14) ALEXANDER HAMER	1.00									
TRUSTEE	1.00	Х						0.	0.	0.
(15) OLIVIA REIGHLEY	1.00									
	KD/	X	\mathbf{N}				D-	PAD	0.	0.
(16) JOHN STOCKBRIDGE										
TRUSTEE	1 00	x				-		0.	• 0.	0.
(17) BONNIE TISA TRUSTEE	1.00	х						0.	0.	
	1	Δ						l 0.	0.	0. Form 990 (2022)
232007 12-13-22				_	-					F0ffff 330 (2022)

	D SANCTUARY,	IN	c.						13-18559	77	P	age 8
Part VII Section A. Officers, Directors, Tru	istees, Key Emp	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)	_		
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average			Pos	itior			Reportable	Reportable	Es Es	stimate	ьd
	hours per					than o is both		compensation	compensation		nount	
	week					or/trus		from	from related		other	01
	(list any	tor						the	organizations	com	pensa	tion
	hours for	direc				5		organization	(W-2/1099-MISC/		rom th	
	related	ndividual trustee or director	stee			nsate		(W-2/1099-MISC/	1099-NEC)		anizat	
	organizations	truste	al tru		/ee	mpel		1099-NEC)	,	۲ ×	d relat	
	below	dual t	ltion	-	nplo	st co	5				anizati	
	line)	ndivi	Institutional trustee	Officer	ƙey employee	Highest compensated employee	Former					
			_	-	-	<u> </u>						
						-						
						-						
	+					\vdash						
						-						
		-										
1b Subtotal						-		93,368.	0.		6	000.
								0.	0.		•,	0.
c Total from continuation sheets to Part							••	93,368.	0.	-	6	000.
								,		•	٥,	000.
2 Total number of individuals (including but	not limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization												0
											Yes	No
3 Did the organization list any former office	r, director, trust	ee, k	key e	empl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for	such individual									3		X
4 For any individual listed on line 1a, is the	sum of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization			
and related organizations greater than \$1										4		х
5 Did any person listed on line 1a receive or										-		
										5		х
rendered to the organization? <i>If</i> "Yes." co Section B. Independent Contractors	mplete Schedule	e J to	or sl	icn r	oers	ion .				5		
1 Complete this table for your five highest of										ation fro	om	
the organization. Report compensation fo	r the calendar ye	ear e	endir	ig w	ith c	or wi	<u>thin</u>	the organization's tax y	ear.			
(A)								(B)			C)	
Name and busines	s address	NO	NE					Description of s	ervices	Compe	nsatio	n
							-					
		_		_		_						
	VDV		\checkmark				D					
	$\Delta \Gamma F$	1	ľ									
2 Total number of independent contractors	(including but no	ot lin	nitec	to t	thos	se lis	ted	above) who received me	ore than			
\$100,000 of compensation from the organ	<u>nizatio</u> n				(0						
<u> </u>										Form	990 ()	2022)
										. 0/11	(

				iins a respo			(A)	(B)		(D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excl from tax un sections 512
ts	1 a	Federated campaigns		1a						
uno	b	Membership dues		1b		9,957.				
Am		Fundraising events				49,128.				
ar		Related organizations								
and Other Similar Amounts		Government grants (contr								
er	f	All other contributions, gifts,	-			1 054 010				
1 C		similar amounts not included				1,254,013.				
Da	-	Noncash contributions included in					1,313,098.			
a	n	Total. Add lines 1a-1f				Business Code	1,515,050.			
	2 a	EDUCATIONAL PROGRAM	IS			900099	85,846.	85,846.		
Kevenue	b				_		,	,		
enu	с									
Чe	d e									
		All other program service	rever	nue						
	g	Total. Add lines 2a-2f					85,846.			
	3	Investment income (inclue					144 700			144
							144,709.			144,
	4 5	Income from investment of		-		Г				
	3	Royalties		(i) Real		(ii) Personal				
	6 a	Gross rents	6a	1,7		(.,				
		Less: rental expenses	6b		0.					
		Rental income or (loss)	6c	1,7	00.					
		Net rental income or (loss)				1,700.			1,
	7 a	Gross amount from sales of		(i) Securiti	ies	(ii) Other				
		assets other than inventory	7a	5,288,6	29.					
	b	Less: cost or other basis								
		and sales expenses	7b	4,776,8	42.					
		Gain or (loss)					F11 707			F11
		Net gain or (loss)			·····		511,787.			511,
	8 a	Gross income from fundraisi including \$	-							
1		contributions reported on								
		Part IV, line 18			8a	2,090.				
	b				8b					
		Net income or (loss) from				·	-16,842.			-16,
		Gross income from gamin		0						
		Part IV, line 19			9a					
		Less: direct expenses			9b					
		Net income or (loss) from	•	•	°	·····				
	10 a	Gross sales of inventory,								
		and allowances			10a					
		Less: cost of goods sold			10b	0.	2,096.	2,096.		
+	С	Net income or (loss) from	sales	or inventor	у	Business Code	2,030.	2,030.		
	11 a	CREDIT CARD REWARDS	:			900099	2,481.			2,
nue	b	OTHER INCOME	- /			9400 🔍 🖊 🗖			/	1,
Revenue	с		F	$\mathbf{\Lambda}$	E	AT				
T		All other revenue		•••• ••	•		2 401			
_		Total. Add lines 11a 11d		<u></u>	<u></u>		3,481.	07.040	0	C.4.4
	12	Total revenue. See instruction	JUS				2,045,875.	87,942.	0.	644, Form 990

WESTMORELAND SANCTUARY, INC.

Form 990 (2022)

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Page **9**

13-1855977

Form 990 (2022) WESTMORELAND SANCTU.
Part IX Statement of Functional Expenses WESTMORELAND SANCTUARY, INC.

13-1855977 Page 10

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon			()	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	103,125.	70,870.	27,399.	4,856.
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	128,906.	87,807.	34,957.	6,142.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	36,599.	28,741.	6,467.	1,391.
10	Payroll taxes	4,406.	3,459.	779.	168.
11	Fees for services (nonemployees):				
а	Management	93,212.	48,900.	42,152.	2,160.
b	Legal	5,663.	2,971.	2,561.	131.
С	• · · · · · · · · · · · · · · · · · · ·	35,445.	18,595.	16,029.	821.
d	, , , , , , , , , , , , , , , , , , , ,				
е	Professional fundraising services. See Part IV, line 17	10.010		10.010	
f	Investment management fees	42,849.		42,849.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	22.005	15 664	6 226	1 005
13	Office expenses	22,995.	15,664.	6,236.	1,095.
14	Information technology				
15	Royalties	24,578.	16,742.	6,665.	1,171.
16		24,570.	10,742.	0,005.	1,1/1.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10					
19 20	, , , , , , , , , , , , , , , , , , ,				
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization	17,503.	11,923.	4,746.	834.
23	Insurance	25,690.	17,499.	6,967.	1,224.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	OTHER	33,928.	24,043.	8,409.	1,476.
b	EDUCATION	28,783.	28,783.	,	•
c	CONSERVATION	28,378.	28,378.		
d	MAINTENANCE AND REPAIRS	24,926.	16,980.	6,759.	1,187.
е	All other expenses				
25	Total functional expenses. Add nes 1 roug, 2/e	658,900.	42,305.	12,975.	22,656.
26	Joint costs. Complete this line or y if the organization reported in column (B) joint costs from a combined	ATE	えしつ		
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
-					

232010 12-13-22

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Form 990 (2022)

Form 990 (
Part X	Ba	lance	Sheet

WESTMORELAND SANCTUARY, INC.

				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		19,354.	1	9,610
	2	Savings and temporary cash investments	48,720.	2	1,144,910	
	3	Pledges and grants receivable, net	44,585.	3	62,523	
	4	Accounts receivable, net		,•	4	,
	5	Loans and other receivables from any current or form				
	5	trustee, key employee, creator or founder, substantia				
		controlled entity or family member of any of these pe		5		
	6	Loans and other receivables from other disqualified	E E E E E E E E E E E E E E E E E E E		J	
	U	under section 4958(f)(1)), and persons described in s		6		
	7				7	
Assets	-	Notes and loans receivable, net		8		
Ass	8 9	Inventories for sale or use			9	415
					9	115
	10a	Land, buildings, and equipment: cost or other	a 3,420,336.			
	h	basis. Complete Part VI of Schedule D 10		1,308,276.	10c	2,997,013
		Less: accumulated depreciation 10		7,755,166.	11	5,383,388
	11	Investments - publicly traded securities		1,100,100.		5,505,500
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14 45	Intangible assets	415.	14		
	15	Other assets. See Part IV, line 11	9,176,516.	15	9,597,859	
	<u>16</u> 17	Total assets. Add lines 1 through 15 (must equal lin		17,613.	16 17	15,155
	17 10	Accounts payable and accrued expenses	17,013.	18	10,100	
	18 10	Grants payable	4,525.	19	9,314	
	19 20	Deferred revenue	4,525.	20	5,514	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part			21	
ies	22	Loans and other payables to any current or former or				
ij		trustee, key employee, creator or founder, substantia			00	
Liabilities	~~	controlled entity or family member of any of these pe			22	
	23	Secured mortgages and notes payable to unrelated the			23	
	24 05	Unsecured notes and loans payable to unrelated thir			24	
· · ·	25	Other liabilities (including federal income tax, payable				
		parties, and other liabilities not included on lines 17-2	24). Complete Part X		05	
	26	of Schedule D Total liabilities. Add lines 17 through 25		22,138.	25 26	24,469
	20	Organizations that follow FASB ASC 958, check h	ere X	22,130.	20	21,105
ŝ		and complete lines 27, 28, 32, and 33.				
ũ	07			6,784,270.	27	2,826,012
ala	27			2,370,108.		6,747,378
р С	28		baak bara	2,370,100.	28	0,747,570
5		Organizations that do not follow FASB ASC 958, o				
2	00	and complete lines 29 through 33.			00	
ste	29 20				29	
SSE	30 01	Paid-in or capital surplus, or land, building, or equipm	Г		30	
÷	31	Retained earnings, endowment, accumulated income	······	0 15/ 270	31	0 573 300
	32	Total net assets or fund balances		9,154,378.	32	9,573,390 9,597,859
	33	Total liabilities and net assets/fund balances		9,176,516.	33	Form 990 (202)

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Form 990 (2022) WESTMORELAND SANCTUARY, INC.	13-185597	7	Pag	_{ge} 12
Part XI Reconciliation of Net Assets				-
Check if Schedule O contains a response or note to any line in this Part XI				
1 Total revenue (must equal Part VIII, column (A), line 12)	1	2,	045,	875.
2 Total expenses (must equal Part IX, column (A), line 25)	2		656,	986.
3 Revenue less expenses. Subtract line 2 from line 1	3	1,	388,	889.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,	154,	378.
5 Net unrealized gains (losses) on investments	5	_	969,	877.
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			٥.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
column (B))	10	9,	573,	390.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		<u> </u>
	,		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	0.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
separate basis, consolidated basis, or both:				
Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?		2b	Х	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
consolidated basis, or both:				
X Separate basis Consolidated basis Both consolidated and separate basis				
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		(0000)

Form **990** (2022)

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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

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

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

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

OMB No. 1545-0047
2022

Open to Public . Inspection

-

Nan	ne of 1	the organization							Identification number	
De			RELAND SANCTUAR	1			<u> </u>		13-1855977	
	art I	Reason for Public (See instructions	6.		
	organ	ization is not a private found								
1		A church, convention of chu				on 170(b)(⁻	1)(A)(i).			
2		A school described in section								
3		A hospital or a cooperative					•	<u>-</u> .		
4		A medical research organiz	ation operated in cor	njunction with a hospita	described	in sectio	on 170(b)(1)(A)	(iii). Enter	the hospital's name,	
_		city, and state:								
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
~		section 170(b)(1)(A)(iv). (C		e e se de la completa		70/1- \/ 4\/ A\				
6		A federal, state, or local gov	-						and the set of a set of the	
7	X	An organization that norma	•	ntial part of its support i	rom a gove	ernmental	unit or from the	e general p	Dudiic described in	
•		section 170(b)(1)(A)(vi). (C		(1)(A)(ui) (Complete De	+ II \					
8 9	\square	A community trust describe				nd in ooniu	upotion with a l	land grant		
9		An agricultural research org or university or a non-land-g	•			-		-	-	
		university:	grant college of agric			name, city	, and state of t	ine college	01	
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	ort from o	ontribution	ns membershi	n fees and	aross receipts from	
10		activities related to its exem	•					-	•	
		income and unrelated busir		-					-	
		See section 509(a)(2). (Cor		(,						
11		An organization organized a		ively to test for public sa	fety. See	section 50	09(a)(4).			
12		An organization organized a	and operated exclusi	ively for the benefit of, to	o perform t	he functio	ns of, or to car	ry out the	purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1)	or section	509(a)(2).	See section 5	09(a)(3). (heck the box on	
		lines 12a through 12d that	describes the type o	f supporting organizatio	n and com	plete lines	s 12e, 12f, and	12g.		
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving	
		the supported organization	on(s) the power to req	gularly appoint or elect a	a majority c	of the direc	ctors or trustee	s of the su	pporting	
		_ organization. You must c	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	anization supervised	or controlled in connec	tion with it	s supporte	ed organization	n(s), by hav	ing	
		control or management o	f the supporting orga	anization vested in the s	ame perso	ns that co	ontrol or manag	e the supp	orted	
		organization(s). You mus								
C		Type III functionally inte	• • • •					y integrate	d with,	
		its supported organization								
C		J Type III non-functionally						-		
		that is not functionally int	• •	c ,			•	an attentiv	eness	
		requirement (see instructi		•						
е	, [Check this box if the orga					а туре ї, туре її	і, туре ш		
f	Ente	functionally integrated, or er the number of supported c								
י ה		vide the following information	0	d organization(s)						
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of	monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ins	structions)	support (see instructions)	
		Т	ΔΥΡ	AYE	\mathbf{R} (P r	\mathbf{DV}	7		
		I					┦┨──┨			
Tota	al									

Schedule A	(Form 99	0) 2022
		5, 2022

Sch	edule A (Form 990) 2022 WI	ESTMORELAND SA	NCTUARY INC.			13-18559	77 Page 2
	Int II Support Schedule for			Sections 170(b)(1)(A)(iv) and		i ugo 🗖
	(Complete only if you checke	-		-			
	fails to qualify under the tests			-			0
See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	86,334.	139,865.	194,876.	253,105.	1,313,098.	1,987,278.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	86,334.	139,865.	194,876.	253,105.	1,313,098.	1,987,278.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						979,876.
6	Public support. Subtract line 5 from line 4.						1,007,402.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	86,334.	139,865.	194,876.	253,105.	1,313,098.	1,987,278.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	121,854.	133,640.	145,027.	131,706.	144,709.	676,936.
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.)	85,439.	96,137.	39,950.	113,167.	4,186.	338,879.
11	Total support. Add lines 7 through 10						3,003,093.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	1,288,999.
13	First 5 years. If the Form 990 is for the	•					
-	organization, check this box and stop						
	ction C. Computation of Publi						
14	Public support percentage for 2022 (I		•			14	33.55 %
15	Public support percentage from 2021					15	37.41 %
16a	33 1/3% support test - 2022. If the o			line 13, and line 14	4 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies						X
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact					VI how the organiza	ation
-	meets the facts-and-circumstances te	-					
b	10% -facts-and-circumstances test	e e				-	U% or
	more, and if the organization meets the						
40	organization meets the facts-and-circu					_	
18	Private foundation. If the organization	alo not clieckia	opt onting 13, 16a	$, \mathbf{b}, 1/\mathbf{a}, \mathbf{r} 1 \mathbf{b},$	check this box an		
	· · · · · · · · · · · · · · · · · · ·					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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	: (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5					1	
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6		(6) 2010	(0) 2020			
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organ	ization,
_							
	ction C. Computation of Publi					 	
15	Public support percentage for 2022 (I		•	column (f))		15	%
16	Public support percentage from 2021					16	%
See	ction D. Computation of Inves					 	
17	1 0			ine 13, column (f))		17	%
18	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022 If th more than 33 1/3%, check this box a 33 1/3% support tests - 2021. If the	io st phe ie. The	organization ual	ifies as a publicly	ounport d organiza		
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization			•		•	
	23 12-09-22			, <u>.</u> , snon t			lule A (Form 990) 2022

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Yes No

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 access hus ness hordings rules if section 4) 43 because of section 4943(f) (regarding certain Type III supporting organizations, and all Type III non-unctionally 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.)

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2 3a 3b 3c 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

WESTMORELAND SANCTUARY, INC.

Yes No

1

2

		Yes	No
1 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
11c below, the governing body of a supported organization?	11a		
b A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		

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.	
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,

upervised, or controlled the supporting organization. Section 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			
		4		

<u>the supported organization(s)</u> Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to see	tisfy the Integral Par	t Test during the ver	r (see instructions).
-		usiy unc integrari an		" (eee

- The organization satisfied the Activities Test. Complete line 2 below. а
- h The organization is the parent of each of its supported organizations. Complete line 3 below.

c 🗋		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruction	1 <u>s).</u>
-----	--	---	---	--------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations Answer in as 3 3 3h a Did the organization have the bow a majority trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

2a 2b 3a 3b Schedule A (Form 990) 2022

Yes No

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Sche	dule A (Form 990) 2022 WESTMORELAND SANCTUARY, INC.			13-1855977	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (<i>explain ii</i>	Part VI). See instr	uctions.
	All other Type III non-functionally integrated supporting organizations must		•		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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 (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1 a			
b	Average monthly cash balances	1b			
C	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
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 Y	ear
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	ly integra	ted Type III supporting org	ganization (see	

Schedule A (Form 990) 2022

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instructions).

Section 1 Di 2 U	ine 8 amount divided by line 9 amount n E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii)	10	
2 U			Underdistribution Pre-2022	IS	(iii) Distributable Amount for 2022
2 U	Distributable amount for 2022 from Section C, line 6				
	Inderdistributions, if any, for years prior to 2022 (reason-				
	ble cause required - <i>explain in</i> Part VI). See instructions.				
	Excess distributions carryover, if any, to 2022				
	rom 2017				
b Fr	rom 2018				
c Fr	rom 2019				
d Fr	rom 2020				
e Fr	rom 2021				
	otal of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i C	Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2022 from Section D,				
lir	ne 7: \$				
a A	pplied to underdistributions of prior years				
b A	pplied to 2022 distributable amount				
c Re	Remainder. Subtract lines 4a and 4b from line 4.				
5 R	Remaining underdistributions for years prior to 2022, if				
	ny. Subtract lines 3g and 4a from line 2. For result greater				
	han zero, explain in Part VI. See instructions.				
	Remaining underdistributions for 2022. Subtract lines 3h				
	nd 4b from line 1. For result greater than zero, explain in				
Pa	Part VI. See instructions.				
7 E	Excess distributions carryover to 2023. Add lines 3j				
ar	nd 4c.				
8 Bi	Breakdown of line 7:				
a Ex	Excess from 2018				
b Ex	Excess from 2019				
c Ex	excess from 2020				
d Ex	xcess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

organizations, in excess of income from activity

6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.

4 Amounts paid to acquire exempt-use assets

1 Amounts paid to supported organizations to accomplish exempt purposes

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)

Administrative expenses paid to accomplish exempt purposes of supported organizations

Section D - Distributions

3

7

Current Year

1

2

3 4

5 6

7

Schedule A	(Form 990) 2022	WESTMORELANI	SANCTUARY	, INC.	13-1855977	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4b, 4c lines 2 and 3; Par	, 5a, 6, 9a, 9b, t IV, Section E,	ons required by Part II, line 10; Part II, 9c, 11a, 11b, and 11c; Part IV, Sectio lines 1c, 2a, 2b, 3a, and 3b; Part V, li 5, and 6. Also complete this part for a	n B, lines 1 and 2; Part IV, Section ne 1; Part V, Section B, line 1e; Pa	C,
	_		ᠫ᠕᠊ᢆᢦ	ER COF		
	I				-	
	_					
232028 12-09-2	2				Schedule A (Form 9	90) 2022

232028 12-09-22

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2022

Employer identification number

WESTMORELAND SANCTUARY, INC.	13-1855977			
Drganization type (check one):				

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

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

General Rule

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

Special Rules

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

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

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

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



Name of o	rganization		Employer identification number
WESTMORE	ELAND SANCTUARY, INC.		13-1855977
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
1	ZBGA (ZOOS, BOTANICAL GARDENS, AND AQUARIA)		Person X Payroll
	625 BROADWAY	\$49,	359. Noncash (Complete Part II for
	ALBANY, NY 12207		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
2	BEDFORD ASSOCIATES		Person X Payroll
	96 SPRING STREET	\$,000,	(Complete Part II for
	SOUTH SALEM, NY 10590		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
		\$	Person Payroll Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
	TAXPAYER	ÇOP	Person Payroll Noncash

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Schedule B (Form 990) (2022)

(Complete Part II for noncash contributions.)

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Page **2**

Schedule E Name of or	3 (Form 990) (2022)		Page 3
Name of of	ganization		
WESTMORE	LAND SANCTUARY, INC.		13-1855977
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed	J.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
	CONSERVATION LAND		
		\$1,000,	.000. 08/11/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		 _\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	l late received
		A LOP	
		\$	

223453 11-15-22

Schedule B (Form 990) (2022)

Schedule I	B (Form 990) (2022)		Page 4
Name of o	rganization		Employer identification number
WESTMORE	ELAND SANCTUARY, INC.		13-1855977
Part III		a) through (e) and the following line entry. For charitable, etc., contributions of \$1,000 or less	n 501(c)(7), (8), or (10) that total more than \$1,000 for the year or organizations
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held
·		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			-
		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferees name, address a		Reation stip of transferree

Schedule B (Form 990) (2022)

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					OMB No. 1545-	0047
	HEDULE D		al Financial Statements			n
(Forr	n 990)		nization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			2
	ment of the Treasury I Revenue Service		ttach to Form 990. 0 for instructions and the latest information.		Open to Pu Inspection	ıblic
_	e of the organizati	loyer identification n	umber			
		WESTMORELAND SANCTUARY, INC			13-1855977	
Pa		ations Maintaining Donor Advised n answered "Yes" on Form 990, Part IV, lin	d Funds or Other Similar Funds or Ac	count	ts. Complete if the	
	organizatio			(b) Fund	ds and other accounts	
1	Total number at er	nd of year				
2		f contributions to (during year)				
3		f grants from (during year)				
4		t end of year				
5			writing that the assets held in donor advised fund	ds		
	are the organizatio	on's property, subject to the organization's	exclusive legal control?		Yes	No
6	Did the organization	on inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used o	only		
			r donor advisor, or for any other purpose conferr	•		
Pa	impermissible priv	ate benefit?			Yes	No
		servation easements held by the organization	ganization answered "Yes" on Form 990, Part IV,	, line 7.		
1		of land for public use (for example, recreation	11 57	orically i	moortant land area	
		f natural habitat	Preservation of a certi	-	-	
		n of open space				
2		• •	ied conservation contribution in the form of a co	nservati	ion easement on the la	ast
	day of the tax year	r.			Held at the End of the Ta	ax Year
а	Total number of co	onservation easements		2a		
b	Total acreage rest	ricted by conservation easements		2b		
С	Number of conser	vation easements on a certified historic stru	ucture included in (a)	2c		
d		vation easements included in (c) acquired a				
				2d		
3		vation easements modified, transferred, rele	eased, extinguished, or terminated by the organi	ization d	during the tax	
4	year	 where property subject to conservation eas	rement is located			
5		tion have a written policy regarding the per				
•	0	orcement of the conservation easements it	e , 1 , e		Yes	No
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservatio			
7	Amount of expens	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation ea	sements	s during the year	
-				(1)		
8		1 ()	e satisfy the requirements of section 170(h)(4)(B)	()	Yes	No
9	and section 170(h)		on easements in its revenue and expense statem			
5	,	U	note to the organization's financial statements that			
		ounting for conservation easements.				
Pa	t III Organiza	ations Maintaining Collections of	Art, Historical Treasures, or Other S	imilar	Assets.	
	Complete it	f the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and bala	ance she	eet works	
	of art, historical tre	easures, or other similar assets held for pub	olic exhibition, education, or research in furtherar	nce of p	ublic	
_			ncial statements that describes these items.			
b	•		8, to report in its revenue statement and balance			
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,					
	•	ng amounts relating to these items:		¢	2	
		ed in Form 990, Part VIII, line 1		Þ	\$	
2	.,	received or held Aprks of art, hist ric Atrea	aures, prother sin ilar a sets for financial gain,	Ψ pr∕vide	·	
_			SQ 958 relating to these items:	Y		
а		on Form 990, Part VIII, line 1		\$	6	
b	Assets included in			\$	§	

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25 2022.05050 WESTMORELAND SANCTUARY, I 5977WS_1

Sche	dule D (Form 990) 2022 WESTMORELAN	ND SANCTUARY, IN	۱C.				13	8-1855	5977	P	age 2
Par	t III Organizations Maintaining C	ollections of Art	t, Hist	orical Tre	asures, or	Other S	Similar As	ssets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	s, check	any of the f	ollowing that	make sign	ificant use	of its			
	collection items (check all that apply):			,	0	Ũ					
а	Public exhibition	d		Loan or excl	hange progra	m					
b	Scholarly research	e			iaiige pregia						
c	Preservation for future generations	C									
_	Provide a description of the organization's co	lastions and avalain	bow th	ov furthor th	o organizatio	n'a avamp	t nurnaaa ir	Dort \	/111		
4								i Fail /	XIII.		
5	During the year, did the organization solicit o										7
Par	to be sold to raise funds rather than to be ma								Yes		No
Fai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par		ete it the	e organizatio	n answered "	Yes" on Fo	orm 990, Pa	art IV, II	ne 9, or		
1 a	Is the organization an agent, trustee, custodi		•						1		٦
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing t	able:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe						?	🗆	Yes		No
b	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete i	f the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 10.					
		(a) Current year		Prior year	(c) Two year) Three years	back	(e) Four	years	back
1a	Beginning of year balance	7,698,030.	6	,504,765.	4,930	,885.	5,716,	5,716,711. 5,676,972.			
b	Contributions	203,701.		593,224.	102	,150.	73,633. 27,250.				250.
	Net investment earnings, gains, and losses	-356,230.		917,373.	1,848	,255.	-435,520. 318,08				
	Grants or scholarships	,				,	,				
	Other expenditures for facilities										
C		798,123.		317,332.	376	,525.	423	939.		91	141.
	and programs			•==,••==.		,	,			,	
	Administrative expenses	6,747,378.	7	,698,030.	6,504	765	4,930,	885	5	031	169.
g	End of year balance					,705.	Ŧ,550,	005.	5,	, ,	105.
2	Provide the estimated percentage of the curr			g, column (a)) neid as:						
	Board designated or quasi-endowment	69.7339	_%								
	Permanent endowment 18.5260	%									
с	Term endowment11.7400	,									
	The percentages on lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posse	ssion of the organiza	tion tha	t are held an	d administer	ed for the			F		
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		X
	(ii) Related organizations								3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the	organization's endov	wment f	unds.							
Par	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answere	d "Yes" on Form 990	, Part IV	/, line 11a. S	ee Form 990,	Part X, lin	e 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	umulated		(d) Book	valu	e
		basis (investr		basis		• •	eciation		()		
1a	Land				,150,775.				2	150.	775.
	Buildings				704,327.		361,788				539.
	Leasehold improvements				· - , · •		-,	-		,	
					126,133.		59,888			66	245.
	Equipment				439,101.		1,647	_			454.
	Other						±,04/	•			
Iota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990. Part J</u>	<u>X, colun</u>	<u>nn (B), line 1(</u>	<u>)c.)</u>	<u></u>				-	013.
					_		Sch	edule	D (Form	990)	2022

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232052 09-01-22

Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-of-year market value (a) Description of security or category (including name of security) (b) Book 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" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value 1 (1) Federal income taxes (2)(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 9.90 2. Liability for uncertain tax position ements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

232053 09-01-22

Sche	dule D (Form 990) 2022 WESTMORELAND SANCTUARY, INC.			13-1855977	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.			
1	Total revenue, gains, and other support per audited financial statements			1	1,055,769.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	-969,877.		
b	Donated services and use of facilities	2b	3,688.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		18,932.		
е	Add lines 2a through 2d			2e	-947,257.
3	Subtract line 2e from line 1			3	2,003,026.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	42,849.		
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines 4a and 4b			4c	42,849.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	2,045,875.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With B	Expenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.			
1	Total expenses and losses per audited financial statements			1	636,757.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	3,688.		
b	Prior year adjustments	2b			
с	Other losses				
d	Other (Describe in Part XIII.)		18,932.		
е	Add lines 2a through 2d			2e	22,620.
3	Subtract line 2e from line 1			3	614,137.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	42,849.		
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines 4a and 4b			4c	42,849.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	656,986.
Pa	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1b ar	nd 2b; Part V, line 4	; Part X, line 2;	Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	litional informa	ation.		

PART	XI,	LINE	2D	-	OTHER	ADJUSTMENTS:
------	-----	------	----	---	-------	--------------

GROSS UP OF FUNDRAISING EVENT EXPENSES

PART XII, LINE 2D - OTHER ADJUSTMENTS:

GROSS UP OF FUNDRAISING EVENT EXPENSES

18,932.

18,932.

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232054 09-01-22

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ing or Gaming A	ctiv	ities	OMB No. 1545-0047	
(Form 990)	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.								
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Open to Public								
Name of the organization		o www.irs.gov/Form990 for instruc	tions	and t	ne latest information	า.	Employer id	dentification number	
		ND SANCTUARY, INC.					13-1855		
	complete this part	Complete if the organization answe t.	red "Y	es" or	n Form 990, Part IV, li	ine 1	7. Form 990-E	EZ filers are not	
 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or 									
, , ,	highest paid indiv	art VII) or entity in connection with pr viduals or entities (fundraisers) pursua organization.			0	ne fui		es I No be	
(i) Name and addres or entity (func	s of individual	(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	tò (e	Amount paid or retained by fundraiser ted in col. (i)		
			Yes	No					
		n is registered or licensed to solicit c		utions	or has been notified	it is	exempt from	registration	
							/		
		\XPAYE	Þ		COP	Ì			

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Schedule G (Form 990) 2022

232081 10-27-22

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 FALL FUNDRAISER	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	– col. (c))
Revenue	1	Gross receipts	51,218.			51,218.
	2	Less: Contributions	49,128.			49,128.
	3	Gross income (line 1 minus line 2)	2,090.			2,090.
	4	Cash prizes				
6	5	Noncash prizes				
penses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				18,932.
	10	Direct expense summary. Add lines 4 through	9 in column (d)			18,932.
		Net income summary. Subtract line 10 from lin				-16,842.
Pa	irt I	II Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	n 990, Part IV, line 19, or r	eported more than	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
enses	2	Cash prizes				
ΞË						

9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states?

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

7 Direct expense summary. Add lines 2 through 5 in column (d)

b	lf	"No."	explain:
υ	н	INU,	Explain.

Noncash prizes

6 Volunteer labor

Other direct expenses

Rent/facility costs

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No b If "Yes," explain:

%

Yes

No

%

Yes

No

%

Yes

No

232082 10-27-22

Direct Expe 3

4

5

Schedule G (Form 990) 2022

Yes

No

Sch	edule G (Form 990) 2022	WESTMORELAND SANCTUARY, INC.	13-18559	77	Page 3
11 12	Is the organization a grantor, bene	ming activities with nonmembers? ficiary or trustee of a trust, or a member of a partnership or other entity formed		Yes	No
	to administer charitable gaming?			Yes	No
	Indicate the percentage of gaming		40-	1	0/
					<u>%</u> %
		e person who prepares the organization's gaming/special events books and records:			70
17		person who prepares the organization's gaming/special events books and records.			
	Name				
	Address				
15a	Does the organization have a cont	ract with a third party from whom the organization receives gaming revenue?		Yes	No No
b	If "Yes," enter the amount of gami	ng revenue received by the organization \$ and the amou	nt		
	of gaming revenue retained by the				
С	If "Yes," enter name and address	of the third party:			
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation	\$			
	carning manager compensation	•			
	Description of services provided				
	Director/officer	Employee Independent contractor			
17	Mandatory distributions:				
а	-	state law to make charitable distributions from the gaming proceeds to			—
-				Yes	L No
b		required under state law to be distributed to other exempt organizations or spent in the	ne		
Pa	organization's own exempt activiti rt IV Supplemental Infor	es during the tax year \$ nation. Provide the explanations required by Part I, line 2b, columns (iii) and (v); ar	d Dart III li	000	0h 10h
		applicable. Also provide any additional information. See instructions.	iu Fait III, III	1165 9,	9D, 10D,
	100, 100, 10, and 170, ao				
		AXPAYER COPY			
23208	33 10-27-22	s	chedule G	(Form	990) 2022

Part IV	Supplemental Information (continued)
	TAXPAYER COPY

232084 04-01-22

Schedule G (Form 990)

15330215 152490 5977WS

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

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

2022 Open to Public Inspection

Employer identification number

13-1855977

Name of the organization

WESTMORELAND SANCTUARY, INC.

Par	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribu amounts reported Form 990, Part VIII, I	lon	(d) Method of de noncash contribu		•	s
1	Art - Works of art				into i g				
2	Art - Historical treasures								
2	Art - Fractional interests								
4	Books and publications								
- 5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8									
9	Securities - Publicly traded								
9 10									
11	Securities - Closely held stock Securities - Partnership, LLC, or								
12	Securities - Miscellaneous								
12	Qualified conservation contribution -								
13									
44	Historic structures Qualified conservation contribution - Other	x	1	1 000	,000.	FMV			
14 15	· · · · · · · · · · · · · · · · ·			1,000	,				
15 16	Real estate - Residential Real estate - Commercial								
17									
	Real estate - Other								
18 10	Collectibles								
19 20	Food inventory								
	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24 05	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
<u>28</u> 29	Other () Number of Forms 8283 received by the organiza	ation during	the tex year for a	antributions					
29	for which the organization completed Form 8283		•		9			1	
	for which the organization completed Form 626	J, Fait V, L	onee Acknowledge		.9			Yes	No
302	During the year, did the organization receive by	contributio	n any property rep	orted in Part I lines 1	throug	o 28. that it		165	
004	must hold for at least 3 years from the date of th								
	exempt purposes for the entire holding period?					01	30a		х
h	If "Yes," describe the arrangement in Part II.						504		
31	Does the organization have a gift acceptance po	olicy that re	ouires the review o	of any nonstandard co	ontributi	ons?	31		х
	Does the organization hire or use third parties o	•	-	-			51		
	contributions?		•				32a		x
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in co	lumn (c) foi	r a type of property	for which column (a)	is chec	ked,			
	describe in Part II.		· · ·		_				
LHA	For Paperwork Reduction Act Natice, see t	ie In str At	tions for Form 990	K CO	P	Schedule M	l (Forn	1 990)	2022

Page 2 **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete Part II this part for any additional information.

TAXPAYER COPY

13-1855977

232142 09-09-22

15330215 152490 5977WS

SCHEDULE O (Form 990) Department of the Treasury	Supplemental Information to Forr Complete to provide information for responses to s Form 990 or 990-EZ or to provide any addition Attach to Form 990 or Form 990-E	pecific questions on al information.	OMB No. 1545-0047
Internal Revenue Service	Go to www.irs.gov/Form990 for the latest i	nformation.	Inspection
Name of the organizatio	WESTMORELAND SANCTUARY, INC.		r identification number 855977
FORM 990, PART I,	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
ACRES OF LAND AND	8.5 MILES OF HIKING TRAILS FOR THE FREE USE,		
ENJOYMENT AND EDUC	ATION OF THE PUBLIC		
FORM 990, PART VI,	SECTION A, LINE 7A:		
BOARD OF TRUSTEES			
FORM 990 PART VT	SECTION B, LINE 11B:		
REVIEWED BY EXECUT			
FORM 990, PART VI,	SECTION B, LINE 12C:		
ANNUAL RENEWAL			
FORM 990, PART VI,	SECTION B, LINE 15:		
ANNUAL PERFORMANCE	REVIEW BY EXECUTIVE COMITTEE		
FORM 990, PART VI,	SECTION C, LINE 18:		
WEBSITE AND UPON R	EQUEST		
FORM 990, PART VI,	SECTION C, LINE 19:		
WEBSITE AND UPON R	EQUEST		
FORM 990, PART XII	, LINE 2C:		
AUDIT COMITTEE			
	TAXPAYER (COPY	
LHA For Paperwork R	eduction Act Notice, see the Instructions for Form 990 or 990-EZ	. Sche	dule O (Form 990) 202

232211 10-28-22

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

MARCH 31, 2023

PREPARED FOR:

WESTMORELAND SANCTUARY, INC. 260 CHESTNUT RIDGE ROAD MOUNT KISCO, NY 10549

PREPARED BY:

CONDON O'MEARA MCGINTY & DONNELLY LLP ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004

AMOUNT OF TAX:

BALANCE DUE OF \$275

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN TO:

THE NEW YORK FORM FORM CHAR500 SHOULD BE FILED VIA THE WEB AT: HTTPS://CHARITIESNYS.COM/ANNUAL_FILING.HTML

RETURN MUST BE MAILED ON OR BEFORE:

FEBRUARY 15, 2024

SPECIAL INSTRUCTIONS:



CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Open to Public Inspection

1.General Information					
For Fiscal Year Beginning (mm/dd/yyyy) 04/01/2022 and Ending (mm/dd/yyyy) 03/31/2023					
Check if Applicable: Address Change	Name of Organization: WESTMORELAND SANCTUARY, INC.	Employer Identification Number (EIN): 13-1855977			
Name Change Initial Filing	Mailing Address: 260 CHESTNUT RIDGE ROAD	NY Registration Number: $00-56-40$			
Final Filing Amended Filing	City / State / ZIP: MOUNT KISCO, NY 10549	Telephone: 914 666-8448			
Reg ID Pending	Website: WWW • WESTMORELANDSANCTUARY • ORG	Email:			
Check your organization's registration category:		Confirm your Registration Category in the Charities Registry at <u>www.CharitiesNYS.com</u> .			
2. Certification					
See instructions for certifi two signatories.	cation requirements. Improper certification is a violation of law that may be subject t	o penalties. The certification requires			
	enalties of perjury that we reviewed this report, including all attachments, and to the e true, correct and complete in accordance with the laws of the State of New York ap				
President or Authorized	Officer:				
	Signature Print Name	and Title Date			
Chief Financial Officer or Treasurer:					
Signature Print Name and Title Date					
3. Annual Reporting Exemption					
Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.					
<u>3a. 7A filing exemption</u> : Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.					
	iling exemption: Gross receipts did not exceed \$25,000 and the market value of ass fiscal year.	ets did not exceed \$25,000 at any time			
4. Schedules and At	ttachments				
See the following page for a checklist of schedules and	Yes X No 4a. Did your organization use a professional fund raiser, fund ra for fund raising activity in NY State? If yes, complete Schedule				
attachments to complete your filing.	Yes X No 4b. Did the organization receive government grants? If yes, cor	nplete Schedule 4b.			
5. Fee					
See the checklist on the next page to calculate you fee(s). Indicate fee(s) you are submitting here:	r 7A filing fee: EPTL filing fee: Total fee: TA25XP\$AY50ER\$5 F	Make a single check or money order payable to: <u>"Department of Law"</u>			

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

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

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Page 1



Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF: - Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3. - Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.

- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV) If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.

Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report: Review Report if you received total revenue and support greater than \$250,000 and up to \$1,000,000

X Audit Report if you received total revenue and support greater than \$1,000,000 and the fiscal year begins on or after July 1, 2021. If the fiscal year begins before that date, an Audit Report is required if total revenue and support is greater than \$750,000 No Review Report or Audit Report is required because total revenue and support is less than \$250,000 We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

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

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

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

For EPTL and DUAL filers, calculate the EPTL fee:

\$0, if you checked the EPTL exemption in Part 3b

\$25, if the NET WORTH is less than \$50,000

\$50, if the NET WORTH is \$50,000 or more but less than \$250,000

\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000

X \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000 \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

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

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

Need Assistance?

Visit: www.CharitiesNYS.com Call: (212) 416-8401 Email: Charities.Bureau@ag.ny.gov

FAXPAYER COPY

²⁶⁸⁴⁶¹ ⁰¹⁻²⁴⁻²³ 1019 CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

Page 2

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Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

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

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

DUAL filers are registered under both 7A and EPTL.

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

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

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

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

Financial Statements for the years ended March 31, 2023 and March 31, 2022



Certified Public Accountants

One Battery Park Plaza New York, NY 10004-1405 Tel: (212) 661 - 7777 Fax: (212) 661 - 4010

Independent Auditor's Report

To the Board of Directors Westmoreland Sanctuary, Inc.

Opinion

We have audited the accompanying financial statements of Westmoreland Sanctuary, Inc. (the "Sanctuary") which comprise the statement of financial position as of March 31, 2023 and March 31, 2022 and the related statements of activities, functional expenses and cash flows for the years then ended and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Sanctuary as of March 31, 2023 and March 31, 2022 and the results of its activities and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Sanctuary and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Sanctuary's ability to continue at a going concern within one year other ineduce that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Sanctuary's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Sanctuary's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Condon Omen Me Ginty + Donnelly LLP TAXPAYER COPY

January 23, 2024

Statement of Financial Position

Assets

	Mar	ch 31
	2023	2022
Cash and cash equivalents Contributions receivable Prepaid expenses Investments, at fair value Property and equipment, net	\$ 46,791 62,523 415 6,491,117 2,997,013	\$ 68,074 44,585 415 7,755,166 1,308,276
Total assets	<u>\$ 9,597,859</u>	<u>\$ 9,176,516</u>
Liabilities and Net Assets		
Liabilities Accounts payable and accrued expenses Unearned revenue Total liabilities Net assets	\$ 15,155 	\$ 17,613 4,525 22,138
Without donor restrictions Undesignated Board-designated Total without donor restrictions With donor restrictions Total net assets	2,826,012 4,705,211 7,531,223 2,042,167 9,573,390	1,456,348 $5,327,922$ $6,784,270$ $2,370,108$ $9,154,378$
Total liabilities and net assets	<u>\$ 9,597,859</u>	<u>\$ 9,176,516</u>

See notes to financial schements PAYER COPY

(with Summarized Comparative Information for the year ended March 31, 2022) Statement of Activities Year Ended March 31, 2023

			2023			2022
	Withou	Without Donor Restrictions	ctions			
Т		Board-		With Donor		
Support and Support	<u>Undesignated</u>	Designated	Total	Restrictions	Total	Total
Contribution and grants	\$ 60,269	Ч	\$ 60,269	\$ 203,701	\$ 263,970	\$ 664,156
Governit and grant – PPP	I	ı		I	1	46,200
Special events	51,218	ı	51,218	ı	51,218	71,700
Program ning fees	85,846	ı	85,846	1	85,846	72,540
Contributed non financial assets	1,003,688	ı	1,003,688	I	1,003,688	8,605
Investment the teturn (loss), net	1	(303, 217)	(303, 217)	(53,013)	(356, 230)	917,373
Investment return designated for						
current everations	380,885	(319, 494)	61,391	(61, 391)	ı	I
Store solos, rental, and other	7,277	I	7,277	1	7,277	11,675
Net as ets r leased from restrictions	417,238	I	417,238	(417, 238)	T	8
Tetal support and revenue	2,006,421	(622, 711)	1,383,710	(327,941)	1,055,769	1,792,249
Expenses						
Program services	423,290	1	423,290	ĩ	423,290	326,882
Supporting activities						
Management and general	171,794	ı	171,794	ı	171,794	123,455
Fund-raising	41,673	I	41,673	I	41,673	54,931
Teal supporting activities	213,467	I	213,467	T	213,467	178,386
out expenses	636,757	1	636,757	ſ	636,757	505,268
Increase (decrease) in net						
sets	1,369,664	(622,711)	746,953	(327, 941)	419,012	1,286,981
Net assets, beginning of year	1,456,348	5,327,922	6,784,270	2,370,108	9,154,378	7,867,397
Net assets, end of year	\$ 2,826,012	\$ 4,705,211	\$ 7,531,223	\$ 2,042,167	\$ 9,573,390	\$ 9,154,378

See notes to financial statements.

Statement of Activities Year Ended March 31, 2022

			2022		
	Withou	Without Donor Restrictions	ctions		
		Board-		With Donor	
٦	Undesignated	Designated	Total	Restrictions	Total
Support and revenue					
Contribution and grants	\$ 70,932	s '	\$ 70,932	\$ 593,224	\$ 664,156
Government grant - PPP	46,200	ı	46,200	ı	46,200
Special vents	71,700	ı	71,700	I	71,700
Programming fees	72,540	ı	72,540	ı	72,540
Contributed non financial assets	8,605	ı	8,605	ı	8,605
Investment return, net	ı	743,072	743,072	174,301	917,373
Investment to the signated for					
current operations	223,719	(181, 212)	42,507	(42,507)	I
Store said, rental, and other	11,675	1	11,675		11,675
Net assets released from restrictions	93,613	T	93,613	(93, 613)	1
I otal support and revenue	598,984	561,860	1,160,844	631,405	1,792,249
Expenses					
Program e vices	326,882	I	326,882	1	326,882
Supporting activities					
M mag ment and general	123,455	ı	123,455	ı	123,455
Fund-mising	54,931	E	54,931	1	54,931
To al supporting activities	178,386	I	178,386	Β	178,386
Total expenses	505,268	I	505,268	I	505,268
increase in net assets	03 716	561 860	965 276	631 405	196,001
	01/600	000,100	0/0000	CU4,1CU	106,007,1
Net assets, beginning of year	1,362,632	4,766,062	6,128,694	1,738,703	7,867,397
Net assets, end of year	<u>\$ 1,456,348</u>	\$ 5,327,922	<u>\$ 6,784,270</u>	\$ 2,370,108	\$ 9,154,378

See notes to financial statements.

<u>5</u>

(with Summarized Comparative Information for the year ended March 31, 2022) **Statement of Functional Expenses** Year Ended March 31, 2023

				2023				2022
_	P	Program Services	S	Supportin	Supporting Activities			s and the second se
F				Management		ı		
				and	Fund-			
·	Conservation	Education	Total	General	Raising		Total	Total
www.wages	\$ 54,506	\$ 99,460	\$ 153,966	\$ 61,295	\$ 10,768	8	226,029	\$ 199,392
or and employee benefits	14,518	22,393	36,911	8,308		8	47,007	32,078
0	6,195	11,304	17,499		1,224	4	25,690	22,236
	5,927	10,815	16,742			1	24,578	18, 149
c and repairs	6,011	10,969	16,980	6,759		7	24,926	22,255
al and consultants fees	27,138	45,263	72,401	U		8	138,008	117,938
10.	28,378	I	28,378	ı	ı		28,378	20,735
te v Vpense	3	8	ı	I	18,932	6	18,932	16,640
	ı	28,783	28,783	'	ı		28,783	12,161
ins and expense	3,862	7,047	10,909	4,343	763	3	16,015	10,236
	ı	2,920	2,920	1	1		2,920	4,187
ocessing	1,307	2,385	3,692	1,470	258	8	5,420	4,447
and internet	662	1,209	1,871	745	131		2,747	2,113
subscriptions	12	22	34	14		2	50	117
on the fees	1,021	1,863	2,884	1,148	201	1	4,233	3,085
	887	1,618	2,505	L66	175	2	3,677	6,817
	4,221	7,702	11,923	4,746	834	4	17,503	12,294
	5,272	9,620	14,892	5,928	1,041		21,861	388
Total	\$ 159,917	\$ 263,373	\$ 423,290	\$ 171,794	\$ 41,673	<u>s</u>		\$ 505,268

See notes to financial statements.

subscriptions ie and internet

Telephore Dues and

Payroll processing

Animal

Bank and

Truck

Deprecietic Miscellane

Fundrai

Profession

Conservat

Maintena

Utilities

Education Office sup

Salaries a

Payroll⁴

Insurance

Statement of Functional Expenses Year Ended March 31, 2022

 $\begin{array}{c} 22,255\\1117,938\\20,735\\16,640\\12,161\end{array}$ 199,392 32,078 22,236 18,149 10,236 4,187 2,113 117 4,447 3,085 6,817 12,294 388 505,268 Total 64 \boldsymbol{S} 1,4532,049 18,372 9,055 410 1,672 16,6402,051 943 195 284 628 Π 1,133 54,931 Raising Fund-**Supporting Activities** 5 \$ Management 6,119 4,338 4,995 849 54,871 6,124 36,139 2,8171,224 582 32 ,876 3,382 107 123,455 General and 2022 5 \$ 72,744 20,735 7,779 126,149 26,287 14,068 11,482 14,080 6,476 4,187 2,813 1,336 1,952 4,313 246 326,882 12,161 74 Total 6) 3 **Program Services** 58,824 4,652 6,560 5,354 6,566 3,020 4,187 910 37,943 1,312 623 Education 34 2,011 3,627 147,898 12,161 114 \boldsymbol{S} \$ Conservation 67,325 21,635 7,508 34,801 20,735 6,128 7,514 3,456 713 1,0422,302 40 4,152 1,501 132 178,984 \$ \$

and employee benefits Land consultants fees financial statements. ies and expense Total and repairs Dues and subscriptions ar d internet expense Bank and online fees cessing wages Salariesand leo Ca DIG Office supp See notes t Profession Telephone Education Payroll ta Mainter Conserva Fundraisi Utilities Insuran Depreci Miscell Animal Payroll Truck

Statement of Cash Flows

	Year E Marc	
	2023	2022
Cash flows from operating activities		
Increase in net assets	\$ 419,012	\$ 1,286,981
Adjustments to reconcile increase in net assets		
to net cash provided by (used in) operating activities		
Depreciation	17,503	12,294
Realized (gain) on investments	(511,787)	(334,010)
Unrealized loss (gain) on investments	969,877	(496,714)
PPP loan forgiveness	-	(46,200)
Contribution of conservation land	(1,000,000)	-
(Increase) in assets		
Contributions receivable	(17,938)	(37,278)
Increase (decrease) in liabilities		
Accounts payable and accrued expenses	(2,458)	15,461
Deferred revenue	4,789	615
Net cash provided by (used in)		
operating activities	(121,002)	401,149
Cash flows from investing activities		
Proceeds from sale of investments	5,288,629	1,902,074
Purchases of investments	(4,482,670)	(2,265,088)
Purchases of property and equipment	(706,240)	(52,411)
Net cash provided by (used in)		
investing activities	99,719	(415,425)
Net (decrease) in cash and cash equivalents	(21,283)	(14,276)
Cash and cash equivalents, beginning of year	68,074	82,350
Cash and cash equivalents, end of year	<u>\$ 46,791</u>	<u>\$ 68,074</u>

Notes to Financial Statements March 31, 2023 and March 31, 2022

Note 1 – Nature of organization

Westmoreland Sanctuary, Inc. (the "Sanctuary") was established in 1957 as a not-for-profit nature center and wildlife preserve with the mission to acquire, establish and maintain for the free use, enjoyment and appreciation of the public, tracts of land including woodland and streams, as a nature sanctuary, to promote nature appreciation, preservation and conservation generally, for the present and future benefit and enjoyment of the public.

The Sanctuary also offers a variety of environmental education, conservation and recreational programs and events serving nearly 15,000 visitors every year. Through these facilities and programs the Sanctuary encourages a deeper understanding and engagement with nature and our environment.

Note 2 – Summary of significant accounting policies

Financial statement presentation

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America. Net assets and revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Net assets without donor restrictions are available at the discretion of the Sanctuary for use in its programs and operations. Board-designated funds are a part of net assets without donor restrictions are subject to donor-imposed restrictions that will be met either by actions of the Sanctuary or the passage of time. Net assets with perpetual donor restrictions are required to be maintained in perpetuity by the Sanctuary.

Contributions and bequests

Contributions, including unconditional promises to give, are recognized initially at fair value as support in the period received or pledged. Contributions of assets other than cash are recorded at their estimated fair value at the date of donation. Bequests are recorded as support when a legally binding obligation is received and when a fair value can reasonably be determined.

Investments

Investments are recorded at fair value on the statement of financial position based on publicly quoted prices. Realized and unrealized gains or losses on investment transactions are reported in the statement of activities as increase or decreases in net assets.

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

<u>Note 2 – Summary of significant accounting policies</u> (continued)

Fair value measurements

Accounting principles generally accepted in the United States of America established a fair value hierarchy organized into three levels based upon the input assumptions used in pricing assets. Level 1 inputs have the highest reliability and are related to assets with unadjusted quoted prices in active markets. Level 2 inputs relate to assets with other than quoted prices in active markets which may include quoted prices for similar assets or liabilities or other inputs which can be corroborated by observable market data. Level 3 inputs are unobservable inputs and are used to the extent that observable inputs do not exist. As of March 31, 2023 and March 31, 2022, the Sanctuary's investments are classified in the highest level of the hierarchy (level 1).

Property and equipment

Property and equipment are recorded at cost. The Sanctuary capitalizes all property and equipment expenditures over \$5,000 that have a useful life of one year or more. Property and equipment depreciated on the straight-line method over the useful lives of the assets which range from 3 to 39 years. During the 2023 fiscal year, the Sanctuary removed fully depreciated assets totaling \$28,126 from the books and records.

Contributed non financial assets

The Sanctuary recognizes contributed nonfinancial assets within public support and revenue. Unless otherwise noted, the contributed nonfinancial assets do not have donor-imposed restrictions.

During the 2023 and 2022 fiscal years, the Sanctuary received donated professional services. These services were an integral part of the activities of the Sanctuary and would have had to be purchased by the Sanctuary if they had not been donated. These services, totaling \$3,688 and \$8,605 in the 2023 and 2022 fiscal years, respectively, were recorded at the fair value based on what it would have cost the Sanctuary to purchase them independently and have been reflected as support and expenses in the statement of activities.

During the 2023 fiscal year, the Sanctuary purchased conservation land with an appraised value of \$1,300,000 at a cost of \$300,000. The Sanctuary's policy is to recognize contributions of conservation land as assets at the fair value of the appraisal when received. Based on this policy, the Sanctuary has recognized a \$1,000,000 contribution of conservation land, which is reflected in contributed non-financial assets on the statement of activities.

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

<u>Note 2 – Summary of significant accounting policies</u> (continued)

Functional allocation of expenses

Salaries are generally allocated to the various program services or supporting activities based on the amount of time spent by specific individuals on each program or activity. Fringe benefits and other employee costs are allocated on an overall basis, corresponding generally to the allocation of salary expenses. All other expenses can generally be identified with the program service or supporting activity to which they relate.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the amounts reported in the financial statements. Actual results could differ from these estimates.

Concentration of credit risk

The Sanctuary's financial instruments that are exposed to concentrations of credit risk consist primarily of cash and cash equivalents and investments. The Sanctuary places its cash and cash equivalents with what it believes to be quality financial institutions. The Sanctuary's investments are exposed to various risks such as interest rate, market volatility, liquidity and credit. Due to the level of uncertainty related to the foregoing risks, it is reasonably possible that changes in these risks could materially affect the fair value of the investments reported on the statement of financial position as of March 31, 2023. The Sanctuary believes no significant concentration of credit risk exists with respect to its cash and cash equivalents and investments.

Subsequent events

The Sanctuary has evaluated events and transactions for potential recognition or disclosure through January 23, 2024, which is the date the financial statements were available to be issued.

Note 3 – Liquidity and availability of financial assets

The Sanctuary regularly monitors the availability of resources required to meet its operating needs and other commitments while also striving to maximize the investment of its available funds. For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Sanctuary considers all expenditures related to its ongoing activities to be general expenditures.

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

Note 3 – Liquidity and availability of financial assets (continued)

The following is a summary of the Sanctuary's financial assets as of March 31, 2023 and March 31, 2022 that are available for general use within one year of the statement of financial position date:

	2023	2022
Cash and cash equivalents	\$ 46,791	\$ 68,074
Contributions receivable	62,523	44,585
Investments, at fair value	6,491,117	7,755,166
Sub-total	6,600,431	7,867,825
Add: investment return appropriated for next year's		
operations	383,171	380,885
Less: net assets with board designations	4,705,211	5,327,922
net assets with perpetual donor restrictions	1,250,000	1,250,000
Total	<u>\$ 1,028,391</u>	<u>\$ 1,670,788</u>

The Board-designated funds could be used for general use if approved by the Board of Directors.

Note 4 – Investments, at fair value

As of March 31, 2023 and March 31, 2022, investments, at fair value, consist of the following:

	2023	2022
Cash and cash equivalents	\$1,107,729	\$1,269,548
U.S. Treasury notes	810,960	790,403
Corporate bonds	95,500	105,390
Common stocks	4,476,928	5,589,825
Total	<u>\$6,491,117</u>	<u>\$7,755,166</u>

Note 5 – Property and equipment, net

Property and equipment, net consist of the following at March 31, 2023 and March 31, 2022:

	2023	2022
Land	\$2,129,493	\$ 815,397
Land improvements	21,282	21,282
Nature Museum	382,465	382,465
Route 22 House	226,808	226,808
Bechtel Lake dock	25,688	25,688
Lodge	95,054	95,054
Furniture, fixtures and equipment	126,133	83,142
Construction in progress	413,413	92,386
Less: accumulate depreciption	R ^{3,420,33} 43,32	P742,222 43,946
Total	\$2,997,013	\$1,308,276

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

Note 6 – Endowment and donor restricted net assets

General

The Sanctuary's endowment includes both donor-restricted endowment funds and funds designated by its Board. The Board of Directors, at its discretion, and based on the needs of the Sanctuary, can decide whether to reinvest endowment income or use it for operating purposes. Net assets with perpetual donor restrictions consist of \$1,250,000 in donations from the Helen Clay Frick Foundation and from others that were raised as part of a matching gift grant from the Helen Clay Frick Foundation. The donations have been restricted by the donors in perpetuity, the income from which is to be used for the general purposes of the Sanctuary.

Interpretation of relevant law

The Sanctuary has interpreted New York Prudent Management of Institutional Funds Act (NYPMIFA) as requiring the preservation of the value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Sanctuary classified as net assets with perpetual restrictions (a) the original value of the gifts donated to the perpetual endowment, and (b) the original value of subsequent gifts to the perpetual endowment. Furthermore, the original gift does not require accumulations of investment returns to be added to the perpetual endowment and therefore such returns are classified as net assets with temporary donor restrictions until those amounts are appropriated for expenditure by the Sanctuary in a manner consistent with the standard of prudence prescribed by NYPMIFA.

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

Note 6 - Endowment and donor restricted net assets

Interpretation of relevant law (continued)

The following is a reconciliation of the activity in the funds for the years ending March 31, 2023 and March 31, 2022:

		Net assets		
	Without Donor			
	Restrictions	With Donor	Restrictions	
	Board-Designated	Temporary		
	Fund	Restrictions	Perpetual	Total
Balance at March 31, 2021	<u>\$ 4,766,062</u>	<u>\$ 488,703</u>	\$ 1,250,000	<u>\$ 6,504,765</u>
Contributions and grants	-	593,224	-	593,224
Investment return				
Interest and dividends	106,682	25,024	-	131,706
Realized gains	270,548	63,462	-	334,010
Unrealized gain	402,338	94,376	-	496,714
Investment expenses	(36,496)	(8,561)		(45,057)
Sub-total	743,072	174,301		917,373
(Drawdowns)	(181,212)	(42,507)		(223,719)
Net assets released from				
restrictions		(93,613)		(93,613)
Balance at March 31, 2022	5,327,922	1,120,108	1,250,000	7,698,030
Contributions and grants	-	203,701	-	203,701
Investment return				
Interest and dividends	116,981	27,728	-	144,709
Realized gains	429,297	82,490	-	511,787
Unrealized (loss)	(813,552)	(156,325)	-	(969,877)
Investment expenses	(35,943)	(6,906)		(42,849)
Sub-total	(303,217)	(53,013)		(356,230)
(Drawdowns)	(319,494)	<u>(61,391</u>)	-	(380,885)
Net assets released from				
restrictions		(417,238)		(417,238)
Balance at March 31, 2023	<u>\$ 4,705,211</u>	\$ 792,167	<u>\$ 1,250,000</u>	<u>\$ 6,747,378</u>

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

<u>Note 6 – Endowment and donor restricted net assets</u> (continued)

The following is a summary of the activity of the net assets with temporary donor restrictions as of March 31, 2023 and March 31, 2022:

						2023					
	Ba	lance at				Net		Net assets		Balance at	
	March 31, 2022		Contributions and Grants		Investment Return		Released from <u>Restrictions</u>		March 31, 2023		
Conservation	\$	18,254	\$	32,025	\$	-	\$	(18,437)	\$	31,842	
Education		61,177		41,940		_		(19,915)		83,202	
Conservation/education		38,671		49,359		_		(57,859)		30,171	
Capital projects		466,263		80,377		_		(321,027)		225,613	
Non-appropriated		,		,							
perpetual donor restrictions											
investment return – net		535,743		-		(114,404)		-		421,339	
Total	\$	1,120,108	\$	203,701	\$	(114,404)	\$	(417,238)	\$	792,167	
								,			
						2022					
	Ba	lance at		1449 P. J.		2022 Net	N	let assets	—	alance at	
		lance at arch 31,	Co	ntributions	Ir		_	let assets eased from		alance at Iarch 31,	
	Ma			ntributions d Grants	Ir	Net	Rel				
Conservation	Ma	arch 31, 2020		d Grants	Ir 	Net vestment	Rel	eased from estrictions		1arch 31, 2022	
Conservation Education		arch 31,	and			Net vestment	Rel <u>Re</u>	eased from estrictions (14,950)	N 	1arch 31, 2022 18,254	
		5,229 44,354	and	<u>d Grants</u> 27,975 22,000		Net vestment	Rel <u>Re</u>	eased from estrictions (14,950) (5,177)	N 	1arch 31, 2022 18,254 61,177	
Education		arch 31, 2020 5,229	and	<u>d Grants</u> 27,975		Net vestment	Rel <u>Re</u>	(14,950) (5,177) (38,749)	N 	Aarch 31, 2022 18,254 61,177 38,671	
Education Conservation/education		5,229 44,354	and	d Grants 27,975 22,000 42,249		Net vestment	Rel <u>Re</u>	eased from estrictions (14,950) (5,177)	N 	farch 31, 2022 18,254 61,177	
Education Conservation/education Capital projects		5,229 44,354	and	d Grants 27,975 22,000 42,249		Net vestment	Rel <u>Re</u>	(14,950) (5,177) (38,749)	N 	Aarch 31, 2022 18,254 61,177 38,671	
Education Conservation/education Capital projects Non-appropriated		5,229 44,354	and	d Grants 27,975 22,000 42,249		Net vestment	Rel <u>Re</u>	(14,950) (5,177) (38,749)	N 	Aarch 31, 2022 18,254 61,177 38,671	

Return objectives, strategies employed and spending policy

The Sanctuary utilizes a total return investment approach with its asset allocation diversified over multiple asset classes with the intent of exceeding the targeted spending rate over time as approved by the Board of Directors, while preserving the purchasing power of the Endowment. Target allocation percentages are established for various asset classes and are modified over time. Performance is measured against a composite benchmark of investment indices reflecting the target asset allocation. From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor requires the Sanctuary to retain as a fund of perpetual durations. In accordance with generally accepted accounting principles, deficiencies of this nature will be absorbed by the net assets with donor perpetual restrictions until such losses have been restored. There were no funds with deficiencies as of March 31, 2023 and March 37, 202.

Notes to Financial Statements (continued) March 31, 2023 and March 31, 2022

Note 7 – Paycheck Protection Program loan payable

During 2020, the Sanctuary applied for and received a \$46,200 loan under the Paycheck Protection Program ("PPP") which was a business loan program established by the Coronavirus Aid, Relief, and Economic Security Act. The Sanctuary recorded the loan proceeds as a liability until the loan was, in part or wholly, forgiven and the Sanctuary was legally released from having to repay the loan. Subject to the terms of the PPP loan, the Sanctuary was eligible for forgiveness of the loan proceeds in an amount equal to the total spent on qualifying expenditures as outlined in the agreement. The Sanctuary believes it has spent all of the proceeds in accordance with the terms of the PPP loan program and the loan was forgiven in its entirety during July 2021 and is reflected as a government grant on the statement of activities.

<u>Note 8 – Tax status</u>

The Sanctuary is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (the "Code"). In addition, the Sanctuary has been determined by the Internal Revenue Service to be a publicly supported organization and not a private foundation within the meaning of Section 509(a)(1) of the Code and qualifies for the maximum charitable deduction for donors.