TIN: 06-1469419

Form **990** 

Department of the Treasury Internal Revenue Service

# **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 <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

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				19 Main	St													subor			. nt . c		□Yes 🔽	No
				Groton,	CT 06	340											H(E	) Are a includ			iates		☐ Yes〔	$\square_{No}$
<b>I</b> Ta	x-exe	mpt status:	::	<b>V</b> 501(c	:)(3)	O 501	(c) ( ) <b>《</b>	(inse	ert no	o.)	□ 4	4947(	(a)(1)	or [	J 527			If "No	o," a	ttach	a list	See i	instructions.	
J W	ebsi	te:▶ http	tps	://gosad	nline.c	org											H(c	Group	р ех	empti	on nu	mber	▶	
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<b>K</b> For	m of o	organization	n:	✓ Corpe	oration	☐ Trus	st 🗆 Ass	ociat	tion		Other	۰					L Yea	r of form	ation	: 1967	М	State	of legal domicil	e: CT
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P	art I	Sum Briefly des			organi	zation's	mission	or m	noct	ciar	ifican	nt ac	tivitio	201										
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ce		GOSA's purpose is to: Protect and preserve open space and water resources in Southeastern CT, provide public ac recreation, and to educate the public.																						
a																								
E																								
Activities & Governance	2	Check th	his	box ▶	☐ if th	ne organ	nization d	isco	ntin	ued	its op	erat	ions	or disi	osed	of m	ore t	han 25%	6 of	its ne	t asse	ets.		
9		Number																				3		8
S	4	Number	of	indepen	dent v	oting m	nembers o	of th	ne go	overr	ning b	oody	(Par	t VI, li	ne 1b)							4		8
Œ.	5	Total nun	ımb	er of inc	dividua	ıls empl	oyed in c	alen	ıdar	year	2023	3 (Pa	art V,	line 2	a) .							5		0
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2					_	-									•					130	0,907			49,847
Revenue		Program				-		-									_				193			
å		Investme			-							-			•									3,294
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88		Salaries,			•					•			•			0)					0			0
SUS	16	a Profession	ion	al fundra	ising f	ees (Pa	art IX, colu	ımn	(A)	), line	2 11e)	) .	٠								0			0
Expenses	b	Total fundr	drai	sing expe	nses (P	'art IX, c	olumn (D)	line	: 25)	<b>▶</b> 1,2	278													
ω	17	Other ex	хрє	enses (Pa	art IX,	column	(A), lines	11	a-1	1d, 1	.1f-24	4e)								242	2,147			29,230
	18	Total exp	pei	nses. Ad	d lines	13-17	(must eq	ual	Part	t IX, d	colum	nn (A	A), lin	ne 25)						24	2,147			29,230
	19	Revenue	e le	ess expe	nses. S	Subtract	line 18 f	rom	ı line	e 12										-84	4,868		2	27,881
9 Q																	Ве	eginning	of C	urrent	t Year		End of Year	
Net Assets or Fund Balances	_			<b>.</b> =																				
Ass Ba		Total ass										•	•		•					6,57	2,404		6,8	00,285
and a		Total liab		•	•	•					•	•									0			0
Zű	23	Net asset	ets	or fund	balanc	es. Sub	tract line	21	fron	n line	≥ 20	•		•	•					6,57	2,404		6,8	00,285
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Form	990 (2	2023)				Page <b>2</b>
Pa	rt III	Statement of Program	Service Accomplish	nments		
1	Briefly	Check if Schedule O contain y describe the organization's r		iny line in this Part III .	<u> </u>	🗆
		pose is to: Protect and preserve public.	re open space and water	resources in Southeaste	rn CT, provide public access for pa	ssive recreation, and to
2	the p	ne organization undertake any rior Form 990 or 990-EZ? . s," describe these new service		rices during the year whi	ch were not listed on	☐ Yes ☑ No
3	Did th	ne organization cease conduct	ng, or make significant o	changes in how it conduct	ets, any program	🗆 Yes 💆 No
4	Section		ganizations are required		argest program services, as measu grants and allocations to others, th	
4a	(Code	e: ) (Expens	es \$ 11,683	including grants of \$	) (Revenue \$	)
	Inc. (	GOSA will use these plans for guida	nce and direction on improvi	ng forest health, combating	for several of our properties in 2023 by l invasive species, and adapting to the eff nip plans, public access, and conservation	ects of climate change.
4b	(Code	e: ) (Expens	es \$ 5,277	including grants of \$	) (Revenue \$	)
	Gene	ral Stewardship Activities: Funds w teers and the environment. Our in	ere spent purchasing battery	powered hedge trimmers a	nd mowers. The equipment is lighter, qui eed to help restore areas infested with M	
4c	(Code	, , ,	•	including grants of \$	) (Revenue \$	)
					ut the opportunities to experience nature ate a 0.6 mile trail as ADA compliant.	on our properties and to
4d		er program services (Describe	•			
	(Exp	enses \$	including grants of	\$	) (Revenue \$	)
4e	Tota	al program service expense	s▶ 17.9	975		

Pai	TIV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Yes	
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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ , as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
	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		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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? <i>If</i> " <i>Yes</i> ," <i>complete Schedule F, Parts III and IV</i>	16		No
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions.	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

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 . . . . . . . .

No

20b

21

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Part IV	Checklist of Required Schedules (	(continued)	

			res	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		No
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? <i>If "Yes," complete Schedule J</i>	23		No
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		No
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		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
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? <i>If "Yes," complete Schedule L,</i> Part III	27		No
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? <i>If "Yes,"</i> complete Schedule L, Part IV			
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a		No
		28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	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		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· i	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   0		. 63	.10
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No		
b	If "Yes," enter the name of the foreign country:					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No		
	If "Yes," indicate the number of Forms 8282 filed during the year					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No		
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h				
8	sponsoring organization have excess business holdings at any time during the year?					
э a	<ul> <li>Sponsoring organizations maintaining donor advised funds.</li> <li>Did the sponsoring organization make any taxable distributions under section 4966?</li></ul>					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b				
	Section 501(c)(7) organizations. Enter:					
	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 10b					
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders					
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
c	Enter the amount of reserves on hand					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b				
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No		
16	If "Yes," see the instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		No		
17	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17				
	If "Yes," complete Form 6069.					

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

Check if Schedule O contains a response or note to any line in this Part VI **✓** Section 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 8 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 in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? No Did the organization delegate control over management duties customarily performed by or under the direct supervision No of officers, directors or trustees, or key employees to a management company or other person? .  $\ \, \text{Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?} \, \, \textbf{.}$ 4 No Did the organization become aware during the year of a significant diversion of the organization's assets? 5 No 5 Did the organization have members or stockholders? . . . . . . . . . . . . . . . . 6 6 Yes 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7a Yes 7b Yes Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8b Yes No Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? . 10a No If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Yes **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. . . . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . 12a Yes Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . 12b Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on 12c Yes 13 13 Yes Did the organization have a written document retention and destruction policy? . . . . . . 14 Yes 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a **a** The organization's CEO, Executive Director, or top management official . No 15b No 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 16a No If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed CT Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 19

policy, and financial statements available to the public during the tax year.

►Michael Maurice 840 Shennecossett Rd Groton, CT 06340 (860) 884-8625

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State the name, address, and telephone number of the person who possesses the organization's books and records:

Form 990 (2	2023)	Page <b>7</b>
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization ne	or any related o	rganiza	tion c	omp	oens	ated a	any o	current officer, dire	ctor, or trustee.	
<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related	pers and	an on on is	e bot bot ecto	t ch ox, u h ar or/tr	inless office ustee)	er )	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or director		Former	MISC/1099- NEC)	MISC/1099- NEC)	related organizations			
(1) Joan Smith	20.00									
Vice President		Х		Х				0	0	
(2) Danny O'Connell President	35.00	х		х				0	0	C
(3) Michael Maurice Treasurer	20.00	х		х				0	0	C
(4) Sidney Van Zandt Vice President	20.00	х		х				0	0	C
(5) Betsy Chittenden Director	20.00	х						0	0	C
(6) Robin Thomas Secretary	20.00	х		х				0	0	C
(7) Wendy Spader Director	20.00	х						0	0	C
(8) Kenneth Paonessa Director	20.00	х						0	0	C

Form 990 (2023) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (**D**) Reportable **(E)** Reportable (A) Name and title **(B)** Average **(C)** Position (do not check more **(F)** Estimated hours per than one box, unless person compensation compensation amount of other from related organizations (Wweek (list is both an officer and a from the compensation organization (Wany hours for director/trustee) from the 2/1099-MISC/1099-NEC) 2/1099-MISC/1099-NEC) related organization and Officer Highest compensated employee Former Individual trustee or director related organizations Institutional below dotted organizations employee line) Trustee 1b Sub-Total . Þ c Total from continuation sheets to Part VII, Section A . ۰ 0 d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 0 No Yes 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . . 3 No For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 4 No Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for 5 No

Section	В.	Independent	Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	(B) Description of services	(C) Compensation				
2	2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0						

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (C) Unrelated (D) (A) Revenue excluded from Total revenue exempt business tax under sections 512 - 514 function revenue revenue Contributions, gifts, grants, and other similar amounts 1a Federated campaigns . 1a **b** Membership dues . . 1b  ${f c}$  Fundraising events . **1c** d Related organizations 1d **e** Government grants (contributions) 1e 100,000 **f** All other contributions, gifts, grants, and similar amounts not included 149,847 above **g** Noncash contributions included in lines 1a - 1f:\$ 1g **h Total.** Add lines 1a-1f . . . 249,847 Business Code 2a Program Service Revenue  ${f f}$  All other program service revenue. **9 Total.** Add lines 2a−2f. . . . . ▶ 3 Investment income (including dividends, interest, and other 3,294 4 Income from investment of tax-exempt bond proceeds **5** Royalties . . (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses Rental income 6c or (loss) **d** Net rental income or (loss) . (i) Securities (ii) Other 7a Gross amount 7a from sales of assets other than inventory Other Revenue **b** Less: cost or other basis and 7b sales expenses c Gain or (loss) **d** Net gain or (loss) .  $\textbf{8a} \ \, \text{Gross income from fundraising events}$ (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . 8a 8b **b** Less: direct expenses . . **c** Net income or (loss) from fundraising events . **9a** Gross income from gaming activities. See Part IV, line 19 . 9a 9b **b** Less: direct expenses . .  $\boldsymbol{c}$  Net income or (loss) from gaming activities **10a**Gross sales of inventory, less returns and allowances . 10a  ${f b}$  Less: cost of goods sold . . 10b c Net income or (loss) from sales of inventory Business Code  $\mathbf{11a}_{Refund}$  of taxes 103 103 Other Revenue **b** Culvert payment 3,867 3.867 d All other revenue . e Total. Add lines 11a-11d . 3.970 **12 Total revenue.** See instructions . . . . . 257,111 7.264 Form 990 (2023)
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to an	y line in this Part IX			🗆
	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	( <b>D</b> ) 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				
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				_
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				_
Ŀ	Legal				
c	: Accounting	41		41	0
c	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
ç	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,936	7,936		
12	Advertising and promotion				_
13	Office expenses				
14	Information technology	2,811	415	2,396	
15	Royalties				
16	Occupancy	190		190	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	730	730		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,496	3,399	97	
23	Insurance	4,342		4,342	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a Consumable Supplies	4,635	4,037	598	
	<b>b</b> Postage & Printing	3,296	1,051	1,341	904
	c Fundraising & Square Fees	471		97	374
	<b>d</b> Membership & Registration Fees	1,135	260	875	
	e All other expenses	147	147		
25	<b>Total functional expenses.</b> Add lines 1 through 24e	29,230	17,975	9,977	1,278
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2023) Page **11** 

Part X Balance Sheet

11 Investments—publicly traded securities .			Check if Schedule O contains a response or not	e to an	iy line in this Part IX	(A)		(B)
2 Savings and temporary cash investments								,
3   Pledges and grants receivable, net   3   3			<u>-</u>		•	*		
4 Accounts receivable, net  5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  6 Loans and other receivables from other disqualifice persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(8).  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  11 Investments—publicly traded securities  11 Investments—publicly traded securities  12 Investments—publicly traded securities  13 Investments—publicly traded securities  14 Intrangible assets  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  17 Accounts payable and accrued expenses  17 Total assets. Add lines 1 through 15 (must equal line 33)  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Loans and other payables to unrelated third parties  22 Unsecured notes and loans payable to unrelated third parties  23 Secured mortages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities and notes payable to unrelated third parties  26 Total liabilities. Add intens 17 at 24).  27 Complete Part X of Schedule D  28 Total liabilities and notes payable to unrelated third parties  29 Organizations that follow FASB ASC 958, check here   Organizations that follow FASB ASC 958, check here   Organizations that follow FASB ASC 958, check here   Organizations that do not follow FASB ASC 958, check here		2	Savings and temporary cash investments .			242,110		185,764
Lears and other receivables from any current or former difficer, director, received in the property of the		3	Pledges and grants receivable, net		•		3	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Leans and other receivables from other disqualified persons (as defined under section 4958f(1)), and persons described in section 4958f(2)(3)(8).  7 Notes and loans receivable, net		4	Accounts receivable, net				4	
section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		5	trustee, key employee, creator or founder, subs	tantial	contributor, or 35%		5	
8 Inventories for sale or use		6					6	
10a   a.d., buildings, and equipment: cost or other basis. Complete Part V of Schedule D   10b   21.800   5.963,346   10c   6.423,760   11   Investments—publicly traded securities   12   Investments—program-related. See Part IV, line 11   12   13   Investments—program-related. See Part IV, line 11   13   14   Intangible assets   14   15   14   15   15   15   15   16   16   16   16	S	7	Notes and loans receivable, net				7	
10a   a.d., buildings, and equipment: cost or other basis. Complete Part V of Schedule D   10b   21.800   5.963,346   10c   6.423,760   11   Investments—publicly traded securities   12   Investments—program-related. See Part IV, line 11   12   13   Investments—program-related. See Part IV, line 11   13   14   Intangible assets   14   15   14   15   15   15   15   16   16   16   16	ē	8	Inventories for sale or use				8	
10a   a.d., buildings, and equipment: cost or other basis. Complete Part V of Schedule D   10b   21.800   5.963,346   10c   6.423,760   11   Investments—publicly traded securities   12   Investments—program-related. See Part IV, line 11   12   13   Investments—program-related. See Part IV, line 11   13   14   Intangible assets   14   15   14   15   15   15   15   16   16   16   16	SS	9	Prepaid expenses and deferred charges				9	
11 Investments—publicly traded securities .	٩	10a	Land, buildings, and equipment: cost or other	10a	6,445,560			
12 Investments—other securities. See Part IV, line 11		ь	Less: accumulated depreciation	10b	21,800	5,963,346	10c	6,423,760
13 Investments—program-related. See Part IV, line 11		11	Investments—publicly traded securities .				11	
14 Intangible assets		12	Investments—other securities. See Part IV, line	11 .			12	
14 Intangible assets		13	Investments—program-related. See Part IV, line	11 .			13	
15 Other assets. See Part IV, line 11			, •					
16 Total assets. Add lines 1 through 15 (must equal line 33)			<u> </u>			48		48
17 Accounts payable and accrued expenses			,					
18 Grants payable				aur mire	. 55)	0,0.2,10.		0,000,200
19 Deferred revenue			, ,	•	· ·			
20 Tax-exempt bond liabilities								
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons								
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			·		· ·			
24 Unsecured notes and loans payable to unrelated third parties	es	21	Escrow or custodial account liability. Complete F	art IV (	of Schedule D		21	
24 Unsecured notes and loans payable to unrelated third parties	abiliti	22	employee, creator or founder, substantial contril	outor, o	or 35% controlled entity		22	
Unsecured notes and loans payable to unrelated third parties	Ξ	23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24).  Complete Part X of Schedule D  Total liabilities. Add lines 17 through 25		24	, ,		· —		24	
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions		25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24	ayables	·			
Organizations that follow FASB ASC 958, check here  and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions		26	<b>Total liabilities.</b> Add lines 17 through 25 .			0	26	0
29 Capital stock or trust principal, or current funds	inces		complete lines 27, 28, 32, and 33.	neck h	ere 🕨 🗹 and	0.500.000		0.740.005
29 Capital stock or trust principal, or current funds	ala	27		•			27	i
29 Capital stock or trust principal, or current funds	1 B	28	Net assets with donor restrictions			2,475	28	89,400
Paid-in or capital surplus, or land, building or equipment fund			complete lines 29 through 33.	958, c	check here 🕨 🗆 and			
30 Paid-in or capital surplus, or land, building or equipment fund	0			•	· · · · <u> </u>			
Yet31Retained earnings, endowment, accumulated income, or other funds3132Total net assets or fund balances6,572,404326,800,28533Total liabilities and net assets/fund balances6,572,404336,800,285	ets	30	Paid-in or capital surplus, or land, building or eq	Juipme	nt fund		30	
32       Total net assets or fund balances       6,800,285         33       Total liabilities and net assets/fund balances       6,800,285         6,800,285       6,800,285	ISS	31	Retained earnings, endowment, accumulated in	come,	or other funds		31	
<b>2</b> 33 Total liabilities and net assets/fund balances 6,572,404 <b>33</b> 6,800,285	it /	32	Total net assets or fund balances			6,572,404	32	6,800,285
	ž	33	Total liabilities and net assets/fund balances .			6,572,404	33	6,800,285

Pa	art XI Reconcilliation 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			257,111
2	Total expenses (must equal Part IX, column (A), line 25)	2			29,230
3	Revenue less expenses. Subtract line 2 from line 1	3			227,881
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		6	,572,404
5	Net unrealized gains (losses) on investments	5			0
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 in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10		6	,800,285
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: ✓ Cash ☐ Accrual ☐ Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	<b>a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Ur Guidance, 2 C.F.R. Part 200, Subpart F?	ıiform	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	red	3b		
			F	orm <b>99</b>	<b>0</b> (2023)

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## **SCHEDULE A**

(Form 990) Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

TIN: 06-1469419 OMB No. 1545-0047

Open to Public Inspection

		L CDACE ACCOCTATION INC					Employer identification	ation number
GKUTUN	OPE	N SPACE ASSOCIATION INC					06-1469419	
Part		Reason for Public					See instructions.	
The org	janiza	ation is not a private four	ndation because	e it is: (For lines 1 thro	ough 12, check o	nly one box.)		
1 (		A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i)</b> .						
2 (		A school described in se	ection 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90).)		
3 (		A hospital or a cooperat	ive hospital serv	vice organization desc	ribed in <b>section</b>	170(b)(1)(A)(	iii).	
4 (		A medical research organisme, city, and state:	nization operate	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). Er	nter the hospital's
5 (		An organization operate 170(b)(1)(A)(iv). (Co			rsity owned or op	perated by a gov	ernmental unit describ	oed in <b>section</b>
6		A federal, state, or local	government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	a)(v).	
	<b>✓</b>	An organization that no section 170(b)(1)(A)	<b>(vi).</b> (Complete	Part II.)		5	nit or from the genera	l public described in
8 (		A community trust desc	ribed in <b>sectior</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9 (		An agricultural research non-land grant college of	of agriculture. S	ee instructions. Enter	the name, city, a	ind state of the o	college or university:	,
10		An organization that not from activities related to investment income and 30, 1975. See <b>section</b>	its exempt fun unrelated busin	nctions—subject to cer less taxable income (le	tain exceptions,	and (2) no more	than 33 1/3% of its su	pport from gross
11 (		An organization organiz	ed and operated	d exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		An organization organiz more publicly supported on lines 12a through 12	l organizations d	described in <b>section 5</b>	<b>609(a)(1)</b> or <b>se</b>	ction 509(a)(2	). See section 509(a	
a (		Type I. A supporting or organization(s) the pow complete Part IV, Sec	er to regularly a	appoint or elect a majo				
<b>b</b>		Type II. A supporting of management of the sup must complete Part I	porting organiza	ation vested in the sar				
<b>c</b> (		Type III functionally supported organization(	integrated. A s	supporting organizatio				ted with, its
d (		<b>Type III non-function</b> functionally integrated. instructions). <b>You mus</b>	The organizatio	n generally must satis	fy a distribution	requirement and		
<b>e</b> (		Check this box if the orgintegrated, or Type III r				RS that it is a Ty	pe I, Type II, Type III	functionally
f E	nter	the number of supported	dorganizations				<u>0</u>	
	Trovide the following information about the supported organization(s).							
(					(vi) Amount of other support (see instructions)			
					Yes	No		
Total		0					0	0

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.) **Section A. Public Support** Calendar year (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total (or fiscal year beginning in) Gifts, grants, contributions, and 124,787 143,992 1,448,544 156,967 250,452 membership fees received. (Do not 2.124.742 include any "unusual grant.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . The value of services or facilities furnished by a governmental unit to the organization without charge.. 124,787 143,992 1,448,544 156,967 250,452 2,124,742 Total. Add lines 1 through 3 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) Public support. Subtract line 5 from 2,124,742 line 4 Section B. Total Support Calendar year (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total (or fiscal year beginning in) 124,787 143,992 1,448,544 156,96 250,452 2,124,742 Amounts from line 4. . Gross income from interest, dividends, payments received on 9,732 2,315 117 193 3,294 15,651 securities loans, rents, royalties and income from similar sources. . Net income from unrelated business activities, whether or not the business is regularly carried on. Other income. Do not include gain 800 119 3.970 or loss from the sale of capital 24,592 29,481 assets (Explain in Part VI.). 11 Total support. Add lines 7 through 2,169,874 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f)) . . . . . . . . . 14 97.920 % 15 Public support percentage for 2022 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . 96.640 % 16a 33 1/3% support test—2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 33 1/3% support test—2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

Schedule A (Form 990) 2023 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. c Add lines 7a and 7b. . Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total (or fiscal year beginning in) Amounts from line 6. . Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources. . Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. C Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain

	or loss from the sale of capital assets (Explain in Part VI.)							
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.).							
14	First 5 years. If the Form 990 is for t	he organization's	first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3	) orga	nization, check
	this box and <b>stop here</b>						<u></u>	▶□
Se	ection C. Computation of Public	Support Perce	entage					
15	Public support percentage for 2023 (lin	ne 8, column (f) d	ivided by line 13,	column (f))		15		
16	Public support percentage from 2022 S	Schedule A, Part I	II, line 15			16		
Se	ction D. Computation of Invest	ment Income	Percentage					
17	Investment income percentage for 20	23 (line 10c, colu	mn (f) divided by	line 13, column (f	"))	17		
18	Investment income percentage from 2	2022 Schedule A,	Part III, line 17 .			18		
19a	<b>33</b> 1/3% support tests-2023. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more than	33 <sub>1/3</sub> %, a	nd line	e 17 is not
b	more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							
	not more than 33 1/3%, check this box	and <b>stop here.</b>	The organization of	qualifies as a publi	cly supported orga	anization .		. ▶□
20	Private foundation. If the organizati	on did not check a	box on line 14, 1	19a, or 19b, check	this box and see	instructions		▶□
				•	•	Schedul	e A (F	Form 990) 2023

### **Supporting Organizations**

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

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	Ja		
	determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	4c		
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 <b>Part VI</b> , 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).	5a		
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?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		<del></del>
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 <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).	7		
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).	8		
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 <b>Part VI</b> .	9a		
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 <b>Part VI</b> .	9b		
С	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 <b>Part VI</b> .	9c		
.0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.			
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10a 10b		
	Schedule A		990)	2023

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а				
	governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
С		11c		
	VI.			
	ection B. Type I Supporting Organizations		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the trustees.		les	NO
	applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit			
	carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
	ection 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 <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection 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 <b>Part VI</b> how the			
	organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ons):		
	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	<b>b</b> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	c The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	inctru	ctione	
	The organization supported a governmental entity. Describe in <b>Fait VI</b> now you supported a government entity (see	ii isti u	ctions)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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 <b>Part VI identify those supported organizations and explain</b> 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		165	140

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

b

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting C	Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegra	ted Type III supporting o	rganization (see

Schedule A (Form 990) 2023				Page <b>7</b>
Part V Type III Non-Functionally Integrated	1 509(a)(3) Supporting	Organizations	(continue	d)
Section D - Distributions				Current Year
1 Amounts paid to supported organizations to accomplish	exempt purposes	1		
2 Amounts paid to perform activity that directly furthers corganizations, in excess of income from activity	exempt purposes of supported	2		
Administrative expenses paid to accomplish exempt pur	poses of supported organization	ons 3		
4 Amounts paid to acquire exempt-use assets		4		
5 Qualified set-aside amounts (prior IRS approval require	d - provide details in <b>Part VI</b> )	5		
6 Other distributions (describe in <b>Part VI</b> ). See instructio	ns	6		
<b>7 Total annual distributions.</b> Add lines 1 through 6.		7		
<b>8</b> Distributions to attentive supported organizations to whe details in <b>Part VI</b> ). See instructions	ich the organization is respons	sive ( <i>provide</i> 8		
<b>9</b> Distributable amount for 2023 from Section C, line 6		9		
10 Line 8 amount divided by Line 9 amount		10		
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribu Pre-2023		(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required explain in <b>Part VI</b> ). See instructions.				
<b>3</b> Excess distributions carryover, if any, to 2023:				
<b>a</b> From 2017				
<b>b</b> From 2018				
<b>c</b> From 2019				
<b>d</b> From 2021				
e From 2022				
f Total of lines 3a through e				
g Applied to underdistributions of prior years				
h Applied to 2023 distributable amount				
<ul> <li>Carryover from 2017 not applied (see instructions)</li> </ul>				
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
<b>4</b> Distributions for 2023 from Section D, line 7:				
\$ Applied to underdictributions of prior years				
<ul><li>a Applied to underdistributions of prior years</li><li>b Applied to 2023 distributable amount</li></ul>				
c Remainder. Subtract lines 4a and 4b from line 4.				
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.				
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.				
<b>7 Excess distributions carryover to 2024.</b> Add lines 3j and 4c.				
8 Breakdown of line 7:				
a Excess from 2018				
<b>b</b> Excess from 2019				
c Excess from 2021.				

d Excess from 2022.e Excess from 2023.

Schedule A (Form 990) 2023 Page 8

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

Fa	acts And Circumstances Test

Return Reference	Explanation
Part II, Line 10 - Other Income Detail	Culvert Payment \$3,867 Refund of Property Taxes \$222 Gross Fundraising Income \$25,392 Total: \$29,481

Schedule A (Form 990) 2023

### TIN: 06-1469419

## **SCHEDULE D**

(Form 990)

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 
► Attach to Form 990. 
► Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.

OMB No. 1545-0047

Treas	rtment of the sury nal Revenue Service	rmation.	Open to Public Inspection				
Name of the organization				Employer identification number			
GRO	OTON OPEN SPACE A	SSOCIATION INC		06-1469419			
Pa	rt I Organi	zations Maintaining Donor Advi	sed Funds or Other Similar Funds o				
		te if the organization answered "Ye	s" on Form 990, Part IV, line 6.				
	Takal assessing as	and of ware	(a) Donor advised funds	( <b>b</b> ) Funds	s and other accounts		
1		end of year					
2	55 5	of contributions to (during year)					
3	55 5	of grants from (during year)					
4	55 5	at end of year					
5	organization's p	roperty, subject to the organization's ex	rs in writing that the assets held in donor ad clusive legal control?		$\Box$ Yes $\Box$ No		
6			onor advisors in writing that grant funds can for donor advisor, or for any other purpose o				
	private benefit?				☐ Yes ☐ No		
Pa		vation Easements.	c" on Form 000 Part IV line 7				
1		te if the organization answered "Ye onservation easements held by the organ					
•		on of land for public use (e.g., recreation		historically imp	ortant land area		
			,				
		of natural habitat	☐ Preservation of a c	certified historic	structure		
		on of open space					
2		2a through 2d if the organization held a e last day of the tax year.	qualified conservation contribution in the for		tion t the End of the Year		
а		conservation easements		2a	t the End of the Year		
b				2b			
c	_	ervation easements on a certified historic	•	2c			
d		ervation easements included in (c) acqui	` '	2d			
-		e listed in the National Register					
3	Number of constax year	ervation easements modified, transferre 	d, released, extinguished, or terminated by	the organization	during the		
4	Number of state	es where property subject to conservatio	n easement is located <b>&gt;</b>				
5		zation have a written policy regarding that of the conservation easements it holds	ne periodic monitoring, inspection, handling of	of violations,	☐ Yes ☐ No		
6	Staff and volunt	eer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co	onservation ease	ments during the year		
	<b>•</b>						
7	Amount of expe	nses incurred in monitoring, inspecting,	handling of violations, and enforcing conser	vation easement	s during the year		
8			above satisfy the requirements of section 1	70(h)(4)(B)(i)	☐ Yes ☐ No		
9	balance sheet, a		ervation easements in its revenue and exper footnote to the organization's financial state ts.				
Par	t III Organi		of Art, Historical Treasures, or Oth	er Similar As	sets.		
1a	historical treasu		C 958, not to report in its revenue statemen lic exhibition, education, or research in furth ents that describes these items.				
b	historical treasu		C 958, to report in its revenue statement an lic exhibition, education, or research in furth				
(	(i) Revenue includ	ed on Form 990, Part VIII, line 1		▶\$			
(i	ii)Assets included	in Form 990, Part X		<b>&gt;</b> \$			
2		on received or held works of art, historions required to be reported under FASB A	cal treasures, or other similar assets for fina ASC 958 relating to these items:	ncial gain, provi	de the		
а	Revenue include	ed on Form 990, Part VIII, line 1		<b>&gt;</b> \$			
b	Assets included	in Form 990, Part X		<b>&gt;</b> \$			

Sche	dule D	(Form 990) 2023										Page
Pari		Organizations Maintaining Col	lections of Art, I	listor	ical T	rea	sures, o	r Othe	er Similar	Assets	(continued	
3		the organization's acquisition, accessio (check all that apply):	n, and other records,	, check	any of	the	following	that are	a significa	nt use of it	s collection	n
а		Public exhibition		d		Lo	an or exch	ange pi	ograms			
b		Scholarly research		е		Otl	ner					
С		Preservation for future generations										
4	Provid Part X	de a description of the organization's col	lections and explain	how th	ey furt	her	the organi	zation's	exempt pu	rpose in		
5	Durin assets	g the year, did the organization solicit o s to be sold to raise funds rather than to	r receive donations of the maintained as p	of art, h art of th	istorica ne orga	al tre aniza	easures or ation's coll	other s ection?	imilar 	□ <b>Y</b>	es 🗆	No
Par	t IV	Escrow and Custodial Arrange Complete if the organization answ line 21.		m 990	), Part	: IV,	line 9, o	r repor	ted an am	nount on f	Form 990	, Part X
1a		organization an agent, trustee, custodi led on Form 990, Part X?								· 🗆 Y	es 🗆	No
b	If "Ye	s," explain the arrangement in Part XIII	and complete the fo	llowing	table:	:				Amount	:	
c	Begin	ning balance						1c				
d	Additi	ons during the year						1d			,	
е	Distri	butions during the year						1e				<u></u>
f	Endin	g balance						1f				
2a	Did th	ne organization include an amount on Fo	orm 990, Part X, line	21, for	escrov	w or	custodial	account	liability? .	\( \nabla \)		No
b		s," explain the arrangement in Part XIII							-	_	_	
Pa	rt V	Endowment Funds.					p					
		Complete if the organization answ	vered "Yes" on For	m 990	), Part	ΙV,	line 10.					
			(a) Current year	(b)	Prior y	ear	(c) Two	years ba	ck (d) Thre	ee years back	< <b>(e)</b> Four y	ears back
		ing of year balance										
		outions										
		restment earnings, gains, and losses										
		or scholarships										
	and pro	expenditures for facilities ograms										
		strative expenses										
g	End of	year balance										
2		de the estimated percentage of the curr	ent year end balance	(line 1	g, colu	ımn	(a)) held a	as:				
а	Board	l designated or quasi-endowment 🕨										
b	Perma	anent endowment 🕨										
c	Term	endowment 🕨										
		ercentages on lines 2a, 2b, and 2c shou	•									
3а	organ	nere endowment funds not in the posses ization by:	-					istered	for the	_	Yes	s No
	<b>(i)</b> Ur	nrelated organizations				•				<u> </u>	Ba(i)	
b		elated organizations s" on 3a(ii), are the related organization									3b	
4		ibe in Part XIII the intended uses of the								<u> </u>		

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

(b) Cost or other basis (other) (c) Accumulated depreciation

6,417,409

13,290

14,862

Part VI Land, Buildings, and Equipment.

Description of property

**1a** Land . . . .

e Other .

**b** Buildings . . . .

c Leasehold improvementsd Equipment . . . .

(a) Cost or other basis (investment)

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

10,632

11,169

(d) Book value

6,417,409

2,658

3,693

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 99	0, Part IV,	line 11b.See For	m 990, Pa	art X, line 12.
(a) Description of security or category (including name of security)	(b) Book	Cost	(c) Method	of valuation: year market value
	value			
(1) Financial derivatives	· -			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII Investments - Program Related.  Complete if the organization answered 'Yes' on Form 99	0, Part IV,	line 11c. See For	rm 990, P	art X, line 13.
(a) Description of investment		(b) Book value	(c)	Method of valuation: end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX Other Assets.  Complete if the organization answered 'Yes' on Form 990	0, Part IV, I	line 11d. See For	m 990, Pa	art X, line 15.
(a) Description				(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)				<b>b</b>
Part X Other Liabilities.  Complete if the organization answered 'Yes' on Form 990	0, Part IV, I	line 11e or 11f.Se	ee Form 9	990, Part X, line 25.
1. (a) Description of liability				(b) Book value
(1) Federal income taxes (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)			<b>•</b>	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Sche	dule D (Form 990) 2023		Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements Complete if the organization answered 'Yes' on Form 990, Part IV, I		rn.
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2	e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII.) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	4	с
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.) .		5
Pai	rt XII Reconciliation of Expenses per Audited Financial Statements		turn.
	Complete if the organization answered 'Yes' on Form 990, Part IV, I		. 1
1	Total expenses and losses per audited financial statements	1	L
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2	e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>	4	с

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

Explanation

Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)

Part XIII

**Supplemental Information** 

Return Reference

Schedule D (Form 990) 2023

5

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# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.

OMB No. 1545-0047 Open to Public Inspection

TIN: 06-1469419

Name of the organization GROTON OPEN SPACE ASSOCIATION INC

SCHEDULE O

Department of the Treasury Internal Revenue Service

(Form 990)

**Employer identification number** 

06-1469419

Return Reference	Explanation
Part VI, Line 11b	A copy of the form 990 is provided to and reviewed by the Finance Committee and then the Board of Directors
Part VI, Line 12c	The organization requires every Director to disclose compliance with the conflicts of interest policy
Part VI, Line 19	The organization makes its governing documents conflict or interest policy and financial statements available to the public upon request.
Part VI, Line 6	Organization has members that meet at least annually
Part VI, Line 7a	The membership elects the governing body at the annual membership meeting
Part VI, Line 7b	The membership elects the governing body and appoints the officers at the annual membership meeting

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K

Schedule O (Form 990) 2023