

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**2015**  
Open to Public Inspection

**A** For the 2015 calendar year, or tax year beginning **APR 1, 2015** and ending **MAR 31, 2016**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <p align="center"><b>THE TRUST FOR PUBLIC LAND</b></p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p align="center"><b>101 MONTGOMERY STREET 900</b></p> City or town, state or province, country, and ZIP or foreign postal code <p align="center"><b>SAN FRANCISCO, CA 94104</b></p> <b>F</b> Name and address of principal officer: <b>WILLIAM B. ROGERS</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <p align="center"><b>23-7222333</b></p> <b>E</b> Telephone number <p align="center"><b>415-495-4014</b></p> <b>G</b> Gross receipts \$ <b>220,127,476.</b> H(a) Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> H(b) Are all subordinates included? Yes <input type="checkbox"/> No <input type="checkbox"/> H(c) Group exemption number ▶ <b>2659</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.TPL.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1972</b> <b>M</b> State of legal domicile: <b>CA</b>

COPY FOR PUBLIC DISCLOSURE

Part I Summary			
	1	Briefly describe the organization's mission or most significant activities: <b>CREATES PARKS AND PROTECTS LAND FOR PEOPLE, ENSURING HEALTHY, LIVABLE COMMUNITIES.</b>	
Activities & Governance	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	18
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	434
	6	Total number of volunteers (estimate if necessary)	279
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	111,595,050.
	9	Program service revenue (Part VIII, line 2g)	19,810,321.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,900,615.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-164,765.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	136,141,221.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	40,441,786.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	37,264,247.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	766,533.
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>11,711,588.</b>	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	37,380,685.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	115,853,251.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	20,287,970.
	20	Total assets (Part X, line 16)	269,276,336.
	21	Total liabilities (Part X, line 26)	90,781,103.
	22	Net assets or fund balances. Subtract line 21 from line 20	178,495,233.

<b>Part II Signature Block</b>			
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.			
<b>Sign Here</b>	Signature of officer CYNTHIA SCHERER, CFO & TREASURER Type or print name and title	Date 10/31/16	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MAGA E. KISRIEV</b>	Preparer's signature 	Date 10/25/16
	Firm's name ▶ <b>HOOD &amp; STRONG LLP</b>	Firm's EIN ▶ <b>94-1254756</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P01008919</b>
	Firm's address ▶ <b>275 BATTERY STREET, STE. 900 SAN FRANCISCO, CA 94111</b>	Phone no. <b>415.781.0793</b>	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file)** . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

	Enter filer's identifying number	
<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number (EIN) or <b>23-7222333</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>101 MONTGOMERY STREET, NO. 900</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SAN FRANCISCO, CA 94104</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**CYNTHIA SCHERER**

- The books are in the care of ▶ **101 MONTGOMERY STREET, STE 900 - SAN FRANCISCO, CA 94104**  
Telephone No. ▶ **415-495-4014** Fax No. ▶ **415-495-4103**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **NOVEMBER 15, 2016**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **APR 1, 2015**, and ending **MAR 31, 2016**.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE TRUST FOR PUBLIC LAND CREATES PARKS AND PROTECTS LAND FOR PEOPLE, ENSURING HEALTHY, LIVABLE COMMUNITIES FOR GENERATIONS TO COME. IN THE PAST YEAR, WE HELPED COMMUNITIES TO PLAN FOR PARKS AND CONSERVATION, FUND PARKS AND CONSERVATION, PROTECT LAND, AND CREATE NEW PARKS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 46,835,329. including grants of \$ 34,346,293. ) (Revenue \$ 6,461,350. ) PROTECT - WE COMPLETED 75 CONSERVATION TRANSACTIONS THAT PROTECTED 62,134 ACRES FOR RECREATION, TO PROTECT DRINKING WATER, AND TO PRESERVE CRITICALLY IMPORTANT WILDLIFE HABITAT.

4b (Code: ) (Expenses \$ 42,193,929. including grants of \$ 3,397,893. ) (Revenue \$ 13,959,672. ) CREATE - WE COMPLETED 21 PROJECTS, INCLUDING 10 NEW PLAYGROUNDS, 3 GARDENS AND 8 FITNESS ZONE EXERCISE AREAS. WE EXPANDED OUR PARKSCORE INDEX, A MEASURE OF HOW WELL THE LARGEST U.S. CITIES ARE MEETING THE NEED FOR PARKS, BY 10 CITIES.

4c (Code: ) (Expenses \$ 2,971,615. including grants of \$ 44,250. ) (Revenue \$ 230,640. ) PLAN - WE COMPLETED 30 PROJECTS TO HELP AGENCIES AND COMMUNITIES DEFINE CONSERVATION PRIORITIES, IDENTIFY LAND TO BE PROTECTED, AND PLAN AND DESIGN PARKS AND NATURAL SPACES. THESE INCLUDED 10 PROJECTS TO HELP CITIES NATIONWIDE REDUCE THE EFFECTS OF CLIMATE CHANGE.

4d Other program services (Describe in Schedule O.) (Expenses \$ 2,494,228. including grants of \$ 630,175. ) (Revenue \$ 564,497. )

4e Total program service expenses 94,495,101.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 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> .....	X	
<b>5</b> 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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> 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, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....	X	
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> 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> .....		X
<b>10</b> 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> .....	X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	X	
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....	X	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....		X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> 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 "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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> .....	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> 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> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> 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> .....		X
<b>33</b> 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> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36</b> <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> .....	X	
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Main table with columns for question numbers (1a-14b), Yes/No, and numerical responses (391, 0, 434).

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> 19		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> 18		
<b>2</b>	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?	X	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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 in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>12c</b>		X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 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)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **CYNTHIA SCHERER - 415-495-4014**  
**101 MONTGOMERY STREET, STE 900, SAN FRANCISCO, CA 94104**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STEPHEN BAIRD DIRECTOR	1.00 0.00	X						0.	0.	0.
(2) BRIAN M. BEITNER DIRECTOR (THRU 10/1/15)	1.00 0.00	X						0.	0.	0.
(3) GEORGE BELL DIRECTOR	1.00 0.00	X						0.	0.	0.
(4) PAGE KNUDSEN COWLES DIRECTOR	1.00 2.00	X						0.	0.	0.
(5) WILLIAM J. CRONON DIRECTOR	1.00 0.00	X						0.	0.	0.
(6) DOUGLAS DURST DIRECTOR	1.00 1.00	X						0.	0.	0.
(7) F. WHITNEY HATCH DIRECTOR	1.00 1.00	X						0.	0.	0.
(8) IGNACIA S. MORENO DIRECTOR	1.00 1.00	X						0.	0.	0.
(9) CAROLINE NIEMCZYK DIRECTOR	1.00 1.00	X						0.	0.	0.
(10) MICHAEL E. PATTERSON DIRECTOR	1.00 0.00	X						0.	0.	0.
(11) TOM REEVE DIRECTOR	1.00 0.00	X						0.	0.	0.
(12) JEFFREY RESNICK DIRECTOR	1.00 0.00	X						0.	0.	0.
(13) LAURA RICHARDS DIRECTOR	1.00 0.00	X						0.	0.	0.
(14) ROY RICHARDS, JR. DIRECTOR	1.00 1.00	X						0.	0.	0.
(15) ALEXIS G. SANT DIRECTOR	1.00 1.00	X						0.	0.	0.
(16) SHERYL TISHMAN DIRECTOR	1.00 0.00	X						0.	0.	0.
(17) F. JEROME TONE DIRECTOR	1.00 1.00	X						0.	0.	0.



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANA VALDEZ DIRECTOR	1.00 0.00	X					0.	0.	0.	
(19) SUSAN D. WHITING DIRECTOR	1.00 0.00	X					0.	0.	0.	
(20) WILLIAM B. ROGERS PRESIDENT & CEO	40.00 3.00	X		X			452,074.	0.	137,335.	
(21) D. MALCOLM CARSON (FROM 11/1/15) SECRETARY & GENERAL COUNSEL	40.00 1.00			X			27,053.	0.	1,931.	
(22) HOLLY HAUGH SECRETARY & GENERAL COUNSEL	40.00 1.00			X			194,474.	0.	24,236.	
(23) CYNTHIA SCHERER TREASURER & CFO	40.00 3.00			X			214,221.	0.	29,801.	
(24) ADRIAN BENEPE SENIOR VP	40.00 0.00			X			238,437.	0.	29,458.	
(25) MARGIE BERMEO CHIEF PHILANTHROPY OFFICER	40.00 0.00			X			240,889.	0.	30,568.	
(26) RAY CHRISTMAN SENIOR VP	40.00 0.00			X			202,114.	0.	37,661.	
<b>1b Sub-total</b>							1,569,262.	0.	290,990.	
<b>c Total from continuation sheets to Part VII, Section A</b>							2,282,588.	0.	295,140.	
<b>d Total (add lines 1b and 1c)</b>							3,851,850.	0.	586,130.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **87**

	Yes	No
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	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

**Section B. 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
W.E. O'NEIL CONSTRUCTION COMPANY OF CALIFOR 909 N. SEPULVEDA, SUITE 400, EL SEGUNDO, CA	CONSTRUCTION	2,911,889.
CONSOLIDATED CONTRACTING SERVICES, INC., 181 AVENIDA LA PLATA, #200, SAN CLEMENTE,	CONSTRUCTION	2,250,140.
MSM EMPIRE CONSTRUCTION CORP. 128 ROSELLE ST., MINEOLA, NY 11501	CONSTRUCTION	1,572,757.
LOS ANGELES ENGINEERING 633 N. BARRANCA AVE., COVINA, CA 91723	CONSTRUCTION	995,812.
JD JAMES, INC. DBA NATURE BRIDGES, 1568 SEVEN BRIDGES RD., MONTICELLO, FL 32344	CONSTRUCTION	819,743.

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 **50**

SEE PART VII, SECTION A CONTINUATION SHEETS

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) SEAN CONNOLLY CHIEF MARKETING OFFICER	40.00 0.00				X		211,134.	0.	29,792.	
(28) ERNEST COOK SENIOR VP	40.00 2.00				X		199,462.	0.	31,776.	
(29) JEFF DANTER SENIOR VP	40.00 0.00				X		191,683.	0.	37,431.	
(30) KATHY DECASTER DIRECTOR OF FEDERAL AFFAIRS	40.00 0.00				X		167,703.	0.	16,311.	
(31) DEBORAH LOVE SENIOR VP	40.00 0.00				X		215,055.	0.	6,637.	
(32) BRENDA SCHICK VICE PRESIDENT	40.00 0.00				X		166,723.	0.	5,187.	
(33) BARBARA SMITH VICE PRESIDENT	40.00 0.00				X		152,518.	0.	27,991.	
(34) TIMOTHY WOHLGENANT SENIOR VP	40.00 0.00				X		186,384.	0.	35,309.	
(35) TILY SHUE LEGAL COUNSEL	40.00 1.00					X	161,743.	0.	26,844.	
(36) GINA FROMMER STATE DIRECTOR	40.00 0.00					X	161,433.	0.	11,837.	
(37) JOHN DAVIS CONTROLLER	40.00 0.00					X	156,962.	0.	28,090.	
(38) MAGGIE MADDEN ASST GENERAL COUNSEL	40.00 0.00					X	156,229.	0.	15,958.	
(39) DON MORROW TRANSACTION DIRECTOR	40.00 0.00					X	155,559.	0.	21,977.	
Total to Part VII, Section A, line 1c .....							2,282,588.		295,140.	

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	846,630.				
	<b>d</b> Related organizations .....	<b>1d</b>	1,888,688.				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	14,402,686.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	98,028,991.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		16,869,069.				
	<b>h Total.</b> Add lines 1a-1f .....		115,166,995.				
	<b>Program Service Revenue</b>	<b>2 a</b> GOVT COST REIMBURSEMENTS .....	<b>Business Code</b> 900099	9,361,440.	9,361,440.		
<b>b</b> GOVT CONTRACT FEES .....		900099	4,661,670.	4,661,670.			
<b>c</b> LANDOWNER FEE .....		531190	4,484,251.	4,484,251.			
<b>d</b> TECHNICAL ASSISTANCE .....		541900	899,673.	899,673.			
<b>e</b> PROJECT REIMBURSEMENTS .....		900099	483,889.	483,889.			
<b>f</b> All other program service revenue .....		900099	1,325,236.	1,325,236.			
<b>g Total.</b> Add lines 2a-2f .....			21,216,159.				
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		2,293,734.			2,293,734.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	(i) Real					
		(ii) Personal					
		<b>b</b> Less: rental expenses .....					
		<b>c</b> Rental income or (loss) .....					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities					
		(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses .....					
		<b>c</b> Gain or (loss) .....					
	<b>d</b> Net gain or (loss) .....			51,533.		51,533.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 846,630. of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>	109,952.				
		<b>b</b> Less: direct expenses .....	<b>b</b>	837,617.			
<b>c</b> Net income or (loss) from fundraising events .....			-727,665.			-727,665.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>						
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
	<b>b</b> Less: cost of goods sold .....	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory .....						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> .....							
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....						
<b>12 Total revenue.</b> See instructions. ....			138,000,756.	21,216,159.	0.	1,617,602.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 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	38,407,611.	38,407,611.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	11,000.	11,000.		
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	3,611,050.	1,833,940.	837,079.	940,031.
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	28,977,620.	16,721,521.	6,187,371.	6,068,728.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	584,611.	339,439.	123,802.	121,370.
9 Other employee benefits	4,230,619.	2,431,949.	903,447.	895,223.
10 Payroll taxes	2,389,660.	1,362,529.	514,407.	512,724.
11 Fees for services (non-employees):				
a Management				
b Legal	140,804.	93,494.	47,310.	
c Accounting	205,027.		205,027.	
d Lobbying	268,720.	268,720.		
e Professional fundraising services. See Part IV, line 17	917,462.			917,462.
f Investment management fees	141,858.		141,858.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	4,906,261.	4,056,425.	428,850.	420,986.
12 Advertising and promotion	2,145,199.	211,663.	1,908,483.	25,053.
13 Office expenses	1,633,408.	827,311.	497,292.	308,805.
14 Information technology	546,101.	126,061.	396,270.	23,770.
15 Royalties				
16 Occupancy	3,545,018.	2,114,873.	721,539.	708,606.
17 Travel	2,384,708.	1,187,564.	548,468.	648,676.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,458,204.	1,108,882.	97,827.	251,495.
20 Interest	640,591.	640,591.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	231,568.	57,922.	151,850.	21,796.
23 Insurance	796,219.	453,986.	171,397.	170,836.
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 <b>DESIGN &amp; CONSTRUCTION</b>	18,910,918.	18,910,918.		
b <b>PRINTING/REPRODUCTION</b>	1,353,949.	771,991.	291,456.	290,502.
c <b>APPRAISAL SERVICES</b>	1,310,395.	1,310,395.		
d <b>ENVIRONMENTAL ASSESSMEN</b>	711,435.	711,435.		
e All other expenses	834,115.	534,881.	913,709.	-614,475.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	121,294,131.	94,495,101.	15,087,442.	11,711,588.
<b>26 Joint costs.</b> 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)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	864,022.	<b>1</b>	183,114.
	<b>2</b> Savings and temporary cash investments .....	589,708.	<b>2</b>	4,435,702.
	<b>3</b> Pledges and grants receivable, net .....	18,446,020.	<b>3</b>	31,699,184.
	<b>4</b> Accounts receivable, net .....	13,902,602.	<b>4</b>	13,759,460.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	0.	<b>7</b>	3,000,000.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	171,848.	<b>9</b>	353,311.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 5,104,622.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 4,383,729.	<b>10c</b>	720,893.
	<b>11</b> Investments - publicly traded securities .....	21,208,183.	<b>11</b>	22,339,565.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	81,004,537.	<b>12</b>	62,782,857.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	132,252,550.	<b>15</b>	148,028,805.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	269,276,336.	<b>16</b>	287,302,891.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	17,934,001.	<b>17</b>	17,756,178.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	5,085,860.	<b>19</b>	5,917,731.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	550,243.	<b>23</b>	432,203.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	22,536,803.	<b>24</b>	26,086,126.
	<b>25</b> 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 .....	44,674,196.	<b>25</b>	47,074,442.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	90,781,103.	<b>26</b>	97,266,680.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	27,143,378.	<b>27</b>	27,769,594.
	<b>28</b> Temporarily restricted net assets .....	134,975,471.	<b>28</b>	144,631,902.
	<b>29</b> Permanently restricted net assets .....	16,376,384.	<b>29</b>	17,634,715.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	178,495,233.	<b>33</b>	190,036,211.	
<b>34</b> Total liabilities and net assets/fund balances .....	269,276,336.	<b>34</b>	287,302,891.	

**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	138,000,756.
2	Total expenses (must equal Part IX, column (A), line 25)	2	121,294,131.
3	Revenue less expenses. Subtract line 2 from line 1	3	16,706,625.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	178,495,233.
5	Net unrealized gains (losses) on investments	5	-1,790,697.
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	-3,374,950.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	190,036,211.

**Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
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 _____	3b	X

Form 990 (2015)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

<b>Name of the organization</b> <p style="text-align:center;">THE TRUST FOR PUBLIC LAND</p>	<b>Employer identification number</b> <p style="text-align:center;">23-7222333</p>
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	96,398,195.	101,906,077.	119,434,191.	111,595,050.	115,166,995.	544,500,508.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	96,398,195.	101,906,077.	119,434,191.	111,595,050.	115,166,995.	544,500,508.
<b>5</b> 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) .....						16,031,386.
<b>6 Public support.</b> Subtract line 5 from line 4.						528,469,122.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>7</b> Amounts from line 4 .....	96,398,195.	101,906,077.	119,434,191.	111,595,050.	115,166,995.	544,500,508.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	1,389,990.	1,224,095.	1,306,617.	2,044,520.	2,293,734.	8,258,956.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	60,187.	133,512.	184,326.	124,154.	109,952.	612,131.
<b>11 Total support.</b> Add lines 7 through 10						553,371,595.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	99,249,355.
<b>13 First five years.</b> 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 this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	95.50 %
<b>15</b> Public support percentage from 2014 Schedule A, Part II, line 14 .....	<b>15</b>	95.45 %
<b>16a 33 1/3% support test - 2015.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2014.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2015.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2014.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



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

(Complete only if you checked the box on line 9 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 (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five 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 this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2014 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the 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 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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).		
<b>3</b> By reason of the relationship described in (2), 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.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> 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>b</b> Did the activities described in (a) 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.			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> 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? Provide details in Part VI.			
<b>b</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.			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2015 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
<b>1</b> Distributable amount for 2015 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> From 2013			
<b>e</b> From 2014			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<b>i</b> Carryover from 2010 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2015 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b> Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7 Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b> Excess from 2013			
<b>d</b> Excess from 2014			
<b>e</b> Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

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

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

**SPECIAL EVENT REVENUE**

2011 AMOUNT: \$ 60,187.

2012 AMOUNT: \$ 127,819.

2013 AMOUNT: \$ 182,396.

2014 AMOUNT: \$ 124,154.

2015 AMOUNT: \$ 109,952.

**SALES**

2012 AMOUNT: \$ 5,693.

2013 AMOUNT: \$ 1,930.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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 or 990-EZ), 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, 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. Do not 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 ..... ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number <b>23-7222333</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>8,030,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>9,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>4,398,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>3,219,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>3,280,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>2,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number  <b>23-7222333</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	BARGAIN SALE 2448 ACRES LAND EASEMENT IN CO	\$ 3,219,000.	12/17/15
5	BARGAIN SALE 3022 ACRES LAND EASEMENT IN MT	\$ 3,280,000.	02/16/16
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization  <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number  <b>23-7222333</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
- ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number <b>23-7222333</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2015

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10-05-15

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) .....	59,802.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	799,795.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....	859,597.													
<b>d</b>	Other exempt purpose expenditures .....	117,486,526.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....	118,346,123.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....	250,000.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....	0.													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....	0.													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
<b>c</b> Total lobbying expenditures	974,719.	884,076.	955,637.	859,597.	3,674,029.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures	60,952.	42,785.	59,071.	59,802.	222,610.

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	2a	
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	5	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

**Name of the organization** THE TRUST FOR PUBLIC LAND **Employer identification number** 23-7222333

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or education)     Preservation of a historically important land area  
 Protection of natural habitat     Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a 10
b Total acreage restricted by conservation easements .....	2b 1,428.00
c Number of conservation easements on a certified historic structure included in (a) .....	2c 1
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d 0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ 6

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 89

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 6,898.

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,501,631.	3,140,028.	2,979,729.	20,006.	20,006.
b Contributions	1,366,574.	4,361,603.	160,299.	2,959,723.	
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	8,868,205.	7,501,631.	3,140,028.	2,979,729.	20,006.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  .00 %
- b Permanent endowment  100.00 %
- c Temporarily restricted endowment  .00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations		<input checked="" type="checkbox"/>
(ii) related organizations		<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		2,729,041.	2,304,088.	424,953.
c Leasehold improvements		319,335.	142,674.	176,661.
d Equipment		1,799,790.	1,712,763.	87,027.
e Other		256,456.	224,204.	32,252.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				720,893.

**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.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) DEBT SECURITIES	62,782,857.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	62,782,857.	

**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)		
<b>Total.</b> (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) DEPOSITS ON LAND TRANSACTIONS	980,850.
(2) INVESTMENT IN AFFILIATES	300,690.
(3) OTHER DEPOSITS	261,771.
(4) OPEN SPACE HOLDINGS	85,870,024.
(5) ASSETS HELD IN CHARITABLE TRUSTS	54,525,470.
(6) INTEREST RECEIVABLE	60,000.
(7) ESCROW CLEARING	6,030,000.
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	148,028,805.

**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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITIES TO BENEFICIARIES OF CHARITABLE TRUSTS	
(3) MITIGATION ADVANCES	34,997,095.
(4) OPTION PAYMENTS	10,850,336.
(5) GARNISHMENTS	1,226,968.
(6)	43.
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	47,074,442.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	132,068,930.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-1,790,697.
b	Donated services and use of facilities	2b	284,892.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-3,374,950.
e	Add lines 2a through 2d	2e	-4,880,755.
3	Subtract line 2e from line 1	3	136,949,685.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1,051,071.
c	Add lines 4a and 4b	4c	1,051,071.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	138,000,756.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	120,527,952.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	284,892.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	-1,051,071.
e	Add lines 2a through 2d	2e	-766,179.
3	Subtract line 2e from line 1	3	121,294,131.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	121,294,131.

**Part XIII Supplemental Information.**

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

**PART II, LINE 9:**

EASEMENTS ACQUIRED BY THE TRUST ARE CONSERVATION EASEMENTS AND REPRESENT NUMEROUS RESTRICTIONS OVER THE USE AND DEVELOPMENT OF LAND NOT OWNED BY THE TRUST. THESE EASEMENTS GENERALLY PROVIDE THAT THE LAND WILL BE MAINTAINED UNIMPAIRED IN ITS CURRENT NATURAL, AGRICULTURAL, SCENIC OR RECREATIONAL STATE. DURING THE YEAR ENDED MARCH 31, 2016, EASEMENTS VALUED AT \$44,556,000 WERE ACQUIRED AND \$55,631,000 CONVEYED. DURING THE YEAR ENDED MARCH 31, 2015, EASEMENTS VALUED AT \$28,991,000 WERE ACQUIRED AND \$61,796,000 CONVEYED.

**PART X, LINE 2:**

THE FINANCIAL STATEMENTS ARE PART OF THE CONSOLIDATED FINANCIAL STATEMENTS

**Part XIII** Supplemental Information (continued)

OF THE TRUST FOR PUBLIC LAND (THE TRUST), COAST DAIRIES & LAND COMPANY,  
AND THE CONSERVATION CAMPAIGN. THE FOLLOWING IS THE FOOTNOTE TO THE  
CONSOLIDATED FINANCIAL STATEMENTS.

THE INTERNAL REVENUE SERVICE HAS CLASSIFIED THE TRUST AS A PUBLICLY  
SUPPORTED, TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL  
REVENUE CODE. CONTRIBUTIONS TO THE TRUST ARE DEDUCTIBLE AS ALLOWED UNDER  
SECTION 170(B)(1)(A)(VI) OF THE CODE. ALL AFFILIATED ORGANIZATIONS OF THE  
TRUST ARE ALSO QUALIFIED UNDER SECTION 501(C)(3) OF THE IRS CODE WITH THE  
EXCEPTION OF THE CONSERVATION CAMPAIGN, WHICH IS CLASSIFIED AS A 501(C)(4)  
ORGANIZATION. CONTRIBUTIONS TO THE CONSERVATION CAMPAIGN ARE NOT TAX  
DEDUCTIBLE.

MANAGEMENT EVALUATED THE TRUST'S TAX POSITIONS AND CONCLUDED THAT THE  
TRUST HAD MAINTAINED ITS TAX EXEMPT STATUS AND HAD NOT TAKEN UNCERTAIN TAX  
POSITIONS THAT REQUIRED ADJUSTMENT TO THE FINANCIAL STATEMENTS. THEREFORE,  
NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE  
CONSOLIDATED FINANCIAL STATEMENTS.

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

CHANGE IN VALUE OF SPLIT INTEREST TRUSTS	-922,933.
CHANGE IN VALUE OF LAND HOLDINGS	-20,000.
INVESTMENT IN AFFILIATES	-1,789,903.
UNCOLLECTIBLE GRANTS	-642,114.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-3,374,950.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENTS DIRECT EXPENSES NETTED WITH REVENUE	-837,617.
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**Part XIII** Supplemental Information (continued)

RECLASS TRANSFER FROM CDLC DURING MERGER TO REVENUE 1,888,688.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 1,051,071.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS DIRECT EXPENSES NETTED WITH REVENUE 837,617.

RECLASS TRANSFER FROM CDLC DURING MERGER TO REVENUE -1,888,688.

TOTAL TO SCHEDULE D, PART XII, LINE 2D -1,051,071.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

Name of the organization **THE TRUST FOR PUBLIC LAND** Employer identification number **23-7222333**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SIMONCINI STRATEGIES - 94 LENORD WOOD SOUTH, STE. 201,	PROJECT FUNDRAISING		X	3,846,045.	60,000.	3,786,045.
CHAPMAN CUBINE ADAMS HUSSEY - 1600 WILSON BLVD, STE. 300,	ANNUAL FUND		X	1,878,000.	357,216.	1,520,784.
CARE2.COM, INC. - 275 SHORELINE DR., #300, REDWOOD	LIST MAINTENANCE		X	604,000.	183,040.	420,960.
BLACKBAUD, INC. - 2000 DANIEL ISLAND DR., CHARLESTON, SC	DONOR RESEARCH		X	208,600.	109,714.	98,886.
CIVITAS PUBLIC AFFAIRS GROUP - 409 7TH ST. NW, STE. 350,	CIVIC ENGAGEMENT		X	0.	40,000.	-40,000.
MARTS & LUNDY, INC. - 1200 WALL ST. WEST, LYNDHURST, NJ	FEASIBILITY & RESEARCH		X	0.	38,695.	-38,695.
PETER MATTAIR CONSULTING - 2501 WEST ZIA RD., #9-206,	PROJECT FUNDRAISING		X	0.	30,000.	-30,000.
THE STELTER COMPANY - 10435 NEW YORK AVE., DES MOINES, IA	ANNUAL FUND		X	0.	28,296.	-28,296.
FACEBOOK - 1 HACKER WAY, MENLO PARK, CA 94025	ONLINE FUNDRAISING		X	0.	18,344.	-18,344.
PHYLLIS SHAPIRO - 25 CHAMBERLAIN RD., FLEMINGTON,	GRANT WRITING		X	0.	14,000.	-14,000.
<b>Total</b>				6,536,645.	879,305.	5,657,340.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO  
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

**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	(b) Event #2	(c) Other events	(d) Total events
		ABOVE THE RAILS (CHICAGO)	PROCTOR CREEK CLEARWAY	1	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	<b>1</b> Gross receipts .....	713,705.	169,869.	73,008.	956,582.
	<b>2</b> Less: Contributions .....	666,320.	145,312.	34,998.	846,630.
	<b>3</b> Gross income (line 1 minus line 2) .....	47,385.	24,557.	38,010.	109,952.
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....		3,016.	2,661.	5,677.
	<b>6</b> Rent/facility costs .....		20,231.	3,262.	23,493.
	<b>7</b> Food and beverages .....		14,427.	5,973.	20,400.
	<b>8</b> Entertainment .....		2,400.		2,400.
	<b>9</b> Other direct expenses .....	760,948.	13,577.	11,122.	785,647.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				837,617.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				-727,665.	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		<b>1</b> Gross revenue .....			
Direct Expenses	<b>2</b> Cash prizes .....				
	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....					
<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) .....					

**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?  Yes  No  
**b** If "No," explain: \_\_\_\_\_

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

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SIMONCINI STRATEGIES  
 (I) ADDRESS OF FUNDRAISER:  
 94 LENORD WOOD SOUTH, STE. 201, HIGHLAND PARK, IL 60035

(I) NAME OF FUNDRAISER: CHAPMAN CUBINE ADAMS HUSSEY  
 (I) ADDRESS OF FUNDRAISER: 1600 WILSON BLVD, STE. 300, ARLINGTON, VA 22209

**Part IV** Supplemental Information (continued)

(I) NAME OF FUNDRAISER: CARE2.COM, INC.

(I) ADDRESS OF FUNDRAISER: 275 SHORELINE DR., #300, REDWOOD CITY, CA 94065

(I) NAME OF FUNDRAISER: BLACKBAUD, INC.

(I) ADDRESS OF FUNDRAISER: 2000 DANIEL ISLAND DR., CHARLESTON, SC 29492

(I) NAME OF FUNDRAISER: CIVITAS PUBLIC AFFAIRS GROUP

(I) ADDRESS OF FUNDRAISER: 409 7TH ST. NW, STE. 350, WASHINGTON, DC 20004

(I) NAME OF FUNDRAISER: MARTS & LUNDY, INC.

(I) ADDRESS OF FUNDRAISER: 1200 WALL ST. WEST, LYNDHURST, NJ 07071

(I) NAME OF FUNDRAISER: PETER MATTAIR CONSULTING

(I) ADDRESS OF FUNDRAISER: 2501 WEST ZIA RD., #9-206, SANTA FE, NM 87505

(I) NAME OF FUNDRAISER: THE STELTER COMPANY

(I) ADDRESS OF FUNDRAISER: 10435 NEW YORK AVE., DES MOINES, IA 50322

(I) NAME OF FUNDRAISER: PHYLLIS SHAPIRO

(I) ADDRESS OF FUNDRAISER: 25 CHAMBERLAIN RD., FLEMINGTON, NJ 08822

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization **THE TRUST FOR PUBLIC LAND** Employer identification number **23-7222333**

**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF WHITEFISH 1005 BAKER AVE, POB 158 WHITEFISH, MT 59937		CITY OF WHITEFISH	0.	1,640,000.	APPRAISAL	BARGAIN SALE OF HALF INTEREST IN 3022.06 ACRES OF LAND IN MT	LAND CONSERVATION
MT DEPT OF FISH, WILDLIFE & PARKS P.O. 200701 HELENA, MT 59620		MT FW&P DEPT	0.	1,640,000.	APPRAISAL	BARGAIN SALE OF HALF INTEREST IN 3022.06 ACRES OF LAND IN MT	LAND CONSERVATION
LAND TRUST FOR SANTA BARBARA COUNTY - P.O. 91830 - SANTA BARBARA, CA 93190	95-3797404	501(C)(3)	0.	750,000.	APPRAISAL	BARGAIN SALE OF 779.67 ACRES OF LAND IN CA	LAND CONSERVATION
ALOHA KUAMO'O AINA P.O. BOX 10784 LAHAINA, HI 96761	46-4864386	501(C)(3)	0.	1,240,000.	APPRAISAL	BARGAIN SALE OF 47.16 ACRES OF LAND IN HI	LAND CONSERVATION
AMMONOOSUC CONSERVATION TRUST 107 GLESSNER ROAD BETHLEHEM, NH 03574	02-6121209	501(C)(3)	0.	187,500.	APPRAISAL	BARGAIN SALE OF 122.21 ACRES OF LAND IN NH	LAND CONSERVATION
ARAPAHOE COUNTY 5334 S. PRINCE ST LITTLETON, CO 80120		ARAPAHOE COUNTY	0.	107,500.	APPRAISAL	BARGAIN SALE OF 10,915 ACRES OF LAND IN CO	LAND CONSERVATION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **68.**

3 Enter total number of other organizations listed in the line 1 table **2.**

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

Schedule I (Form 990) (2015)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CA WILDLIFE CONSERVATION BOARD 1416 9TH ST, ROOM 1266 SACRAMENTO, CA 95814		CA WCB	0.	100,000.	APPRAISAL	BARGAIN SALE OF 1477.4 ACRES OF LAND IN CA	LAND CONSERVATION
CARVER COUNTY 11360 HWY 212 WEST COLOGNE, MN 55322		CARVER COUNTY	0.	350,000.	APPRAISAL	BARGAIN SALE OF 36.5 ACRES OF LAND IN MN	LAND CONSERVATION
CITY OF SAINT PAUL 1000 CITY HALL ANNEX, 2500 WEST KEL ST. PAUL, MN 55102		CITY OF SAINT PAUL	0.	1,961,999.	APPRAISAL	BARGAIN SALE OF 5.30 ACRES OF LAND IN MN	LAND CONSERVATION
CITY OF SANTA BARBARA P.O. BOX 1980 SANTA BARBARA, CA 93102		CITY SANTA BARBARA	0.	1,300,000.	APPRAISAL	BARGAIN SALE OF 14.74 ACRES OF LAND IN CA	LAND CONSERVATION
CO STATE UNIVERSITY, FOR BENEFIT OF CO STATE FOREST SERVICE - 5060 CAMPUS DELIVERY - FORT COLLINS, CO 80523		CSU	0.	3,869,000.	APPRAISAL	BARGAIN SALE OF 2448 ACRES OF LAND IN CO	LAND CONSERVATION
COLORADO CATTLEMEN'S AGRICULTURAL LAND TRUST - 8833 RALSTON ROAD - ARVADA, CO 80002	84-1317592	501(C)(3)	0.	1,550,400.	APPRAISAL	DONATION OF 183 ACRES OF LAND IN CO	LAND CONSERVATION
COLORADO OPEN LANDS TRUST 355 S.TELLER ST STE 210 LAKEWOOD, CO 80226	84-0866211	501(C)(3)	0.	450,000.	APPRAISAL	DONATION OF 37.67 ACRES OF LAND IN CO	LAND CONSERVATION
FRANKLIN COUNTY BOARD OF COMMISSIONERS - 34 FORBES ST, STE 1 - APALACHICOLA, FL 32320		FRANKLIN COUNTY	0.	78,000.	APPRAISAL	BARGAIN SALE OF 7.13 ACRES OF LAND IN FL	LAND CONSERVATION
KAISHA BAND OF POMO INDIANS OF THE STEWARTS POINT RANCHERIA - 1420 GUERNEVILLE ROAD, STE 1 - SANTA ROSA, CA 95403		TRIBAL GOV	0.	3,101,986.	APPRAISAL	BARGIAN SALE OF OF 678.2 ACRES OF LAND IN CA	LAND CONSERVATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAND TRUST OF THE UPPER ARKANSAS 128 E FIRST ST, SUITE 201 SALIDA, CO 81201	84-1594923	501(C)(3)	0.	1,200,000.	APPRAISAL	DONATION OF 175.09 ACRES OF LAND IN CO	LAND CONSERVATION
MA DIVISION OF FISHERIES & WILDLIFE, DEPT OF FISH & GAME - 251 CAUSEWAY ST - BOSTON, MA 02114		MA DFG	0.	7,000.	APPRAISAL	BARGAIN SALE OF 25.34 ACRES OF LAND IN MA	LAND CONSERVATION
MN DNR DEPT OF FISH & WILDLIFE 500 LAFAYETTE ROAD, BOX 25 ST. PAUL, MN 55155		MN DNR DEPT	0.	1,165,000.	APPRAISAL	DONATION OF 705.75 ACRES OF LAND IN MN	LAND CONSERVATION
MOUNTAINS RECREATION & CONSERVATION AUTHORITY - 570 WEST AVE 26, STE 100 - LOS ANGELES, CA 90065		MRCA	0.	1,275,000.	APPRAISAL	BARGAIN SALE OF 47.68 ACRES OF LAND IN CA	LAND CONSERVATION
NATIONAL PARK SERVICE 1924 BLDG, 100 ALABAMA STE SW ATLANTA, GA 30303		NPS	0.	1,315,000.	APPRAISAL	BARGAIN SALE OF 46 ACRES OF LAND IN GA	LAND CONSERVATION
OR DEPT OF FISH & WILDLIFE 4034 FAIRVIEW INDUSTRIAL DRIVE SE SALEM, OR 97302		ODFW	0.	525,000.	APPRAISAL	DONATION OF 10198.26 ACRES OF LAND IN OR	LAND CONSERVATION
REGENTS OF UNIVERSTY OF CALIFORNIA 1111 FRANKLIN ST 6TH FL OAKLAND, CA 94607		UNIV OF CA	0.	340,000.	APPRAISAL	DONATION OF 144 ACRES OF LAND IN CA	LAND CONSERVATION
SAN LUIS VALLEY LOCAL FOODS COALITION - 412 STATE AVE, P.O. BOX 181 - ALAMOSA, CO 81101	45-3837878	501(C)(3)	0.	300,000.	APPRAISAL	DONATION OF 37.67 ACRES OF LAND IN CO	LAND CONSERVATION
STATE OF MAINE, BUREAU OF PARKS & LANDS - 22 STATE HOUSE STATION - AUGUSTA, ME 04333		STATE OF ME	0.	335,000.	APPRAISAL	BARGAIN SALE OF 8159 ACRES OF LAND IN ME	LAND CONSERVATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STATE OF TN 24TH FL, TN TOWER, 312 ROSA PARKS A NASHVILLE, TN 37243		STATE OF TN	0.	1,720,000.	APPRAISAL	DONATION OF 47.68 ACRES OF LAND IN TN	LAND CONSERVATION
STATE OF VT, DEPT OF FOREST, PARKS & RECREATION - 103 SOUTH MAIN ST - WATERBURY, VT 05671		STATE OF VT	0.	1,218,000.	APPRAISAL	BARGAIN SALE OF 1346 ACRES OF LAND IN VT	LAND CONSERVATION
SUMMIT METRO PARKS 975 TREATY LINE ROAD AKRON, OH 44313		SUMMIT METRO PARKS	0.	50,000.	APPRAISAL	BARGAIN SALE OF 36.28 ACRES OF LAND IN OH	LAND CONSERVATION
TECHUMSEH LAND TRUST POB 417 YELLOW SPRINGS, OH 45387	31-1313236	501(C)(3)	0.	872,199.	APPRAISAL	BARGAIN SALE OF 437.35 ACRES OF LAND IN OH	LAND CONSERVATION
THE NATURE CONSERVANCY 5245 NORTH FAIRFAX DR., STE 100 ARLINGTON, VA 22209	53-0242652	501(C)(3)	0.	6,040,000.	APPRAISAL	DONATION OF 891.9 ACRES OF LAND IN CT	LAND CONSERVATION
TOWN OF CUMBERLAND 290 TUTTLE ROAD CUMBERLAND, ME 04021		TOWN OF CUMBERLAND	0.	460,000.	APPRAISAL	BARGAIN SALE OF 164.5 ACRES OF LAND IN ME	LAND CONSERVATION
TOWN OF OLD SAYBROOK 302 MAIN ST OLD SAYBROOK, CT 06475		TOWN OF OLD SAYBROOK	0.	260,000.	APPRAISAL	DONATION OF 1.83 ACRES OF LAND IN CT	LAND CONSERVATION
TOWN OF STURBRIDGE 308 MAIN ST STURBRIDGE, MA 01566		TOWN OF STURBRIDGE	0.	221,060.	APPRAISAL	BARGAIN SALE OF 280.46 ACRES OF LAND IN MA	LAND CONSERVATION
TOWN OF WEST WINDSOR P.O. BOX 6 BROWNSVILLE, UT 05037		TOWN OF WEST WINDSOR	0.	548,830.	APPRAISAL	BARGAIN SALE OF 470.86 ACRES OF LAND IN VT	LAND CONSERVATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US NAVY 1101 TAUTOG CIRCLE SILVERDALE, WA 98315		US NAVY	0.	762,550.	APPRAISAL	BARGAIN SALE OF 2677.30 ACRES OF LAND IN WA	LAND CONSERVATION
STATE OF HAWAII 1151 PUNCHBOWL ST. HONOLULU, HI 96813		STATE OF HI	2,500,000.	0.			PROJECT SUPPORT
CITY OF CHICAGO 30 N. LASALLE ST, #1100 CHICAGO, IL 60602		CITY OF CHICAGO	1,909,520.	0.			PROJECT SUPPORT
CITY OF JOHNS CREEK 12000 FINDLEY RD., STE. 400 JOHNS CREEK, GA 30097		CITY OF JOHNS CREEK	1,500,000.	0.			PROJECT SUPPORT
CLEVELAND METROPARKS 4101 FULTON PARKWAY CLEVELAND, OH 44144		CLEVELAND METROPARKS	1,240,778.	0.			PROJECT SUPPORT
THE CONSERVATION CAMPAIGN 10 MILK ST., STE. 810 BOSTON, MA 02108	04-3515341	501(C)(4)	657,750.	0.			GENERAL SUPPORT - LOBBYING
WYOMING WILDSHEEP FOUNDATION 6722 HIGHWAY 28 LANDER, WY 82520	83-0264363	501(C)(3)	140,000.	0.			PROJECT SUPPORT
THE NATURE CONSERVANCY INC. 4245 NORTH FAIRFAX DR., STE. 100 ARLINGTON, VA 22209	53-0242652	501(C)(3)	115,000.	0.			PROJECT SUPPORT
TRUCKEE DONNER LAND TRUST P.O. BOX 8816 TRUCKEE, CA 96162	68-0245327	501(C)(3)	61,597.	0.			PROJECT SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UPPER VALLEY LAND TRUST 19 BUCK RD. HANOVER, NH 03755	02-0387997	501(C)(3)	52,000.	0.			PROJECT SUPPORT
BACK COUNTRY LAND TRUST OF SAN DIEGO COUNTY - P.O. BOX 1148 - ALPINE, CA 91903	93-1060214	501(C)(3)	50,000.	0.			PROJECT SUPPORT
LAND TRUST ALLIANCE 1660 L ST., NW, STE. 1100 WASHINGTON, DC 20036	04-2751357	501(C)(3)	46,500.	0.			EVENT SPONSORSHIP
LAND TRUST OF SANTA BARBARA 1530 CHAPALA ST. SANTA BARBARA, CA 93101	95-3797404	501(C)(3)	45,000.	0.			PROJECT SUPPORT
JEFFERSON LAND TRUST 1033 LAWRENCE ST. PORT TOWNSEND, WA 98368	91-1465078	501(C)(3)	37,606.	0.			EVENT SPONSORSHIP
LAND TRUST OF THE UPPER ARKANSAS 128 E. FIRST ST., STE. 201 SALIDA, CO 81201	84-1594923	501(C)(3)	37,500.	0.			PROJECT SUPPORT
AMMONOOSUC CONSERVATION TRUST 107 GLESSNER RD. BETHLEHEM, NH 03574	02-6121209	501(C)(3)	37,250.	0.			PROJECT SUPPORT
COLORADO CATTLEMEN'S AGRICULTURAL LAND TRUST - 8833 RALSTON RD. - ARVADA, CO 80002	84-1317592	501(C)(3)	36,000.	0.			EVENT SPONSORSHIP
MICHIGAN TECHNOLOGICAL UNIVERSITY 1400 TOWNSEND DR. HOUGHTON, MI 49931		MTU	35,000.	0.			PROJECT SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLORADO OPEN LANDS 355 SOUTH TELLER ST., STE. 210 LAKEWOOD, CO 80226	84-0866211	501(C)(3)	32,423.	0.			PROJECT SUPPORT
CITY OF NOVATO 922 MACHIN AVE. NOVATO, CA 94945		CITY OF NOVATO	30,000.	0.			PROJECT SUPPORT
CITY OF ST. PAUL, DEPARTMENT OF PARKS & REC - 25 W. 4TH ST., 400 CHA - ST. PAUL, MN 55102		CITY OF ST. PAUL	30,000.	0.			PROJECT SUPPORT
STATE OF VERMONT 1 NATIONAL LIFE DR., DAVIS 2 MONTPELIER, VT 05620		STATE OF VT	30,000.	0.			PROJECT SUPPORT
ALOHA KUAMOO AINA 1695 AINAKEA RD. LAHAINA, HI 97861	46-4864386	501(C)(3)	25,110.	0.			PROJECT SUPPORT
COLORADO STATE UNIVERSITY FOUNDATION - 2527 RESEARCH BLVD - FORT COLLINS, CO 80526	23-7098397	501(C)(3)	20,000.	0.			PROJECT SUPPORT
GREEN MOUNTAIN CLUB, INC. 4711 WATERBURY-STOWE RD. WATERBURY CENTER, VT 05677	03-0162865	501(C)(3)	18,750.	0.			PROJECT SUPPORT
THE NEW YORK BOTANICAL GARDEN 200TH ST. SOUTHERN BOULEVARD BRONX, NY 10458	13-1693134	501(C)(3)	17,500.	0.			PROJECT SUPPORT
MILDRED HELMS PARK RESURRECTION COMMITTEE - P.O. BOX 3583 - NEWARK, NJ 07103	01-0619649	501(C)(3)	16,982.	0.			PROJECT SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NORTHERN FOREST CENTER 18 NORTH MAIN ST., STE. 204 CONCORD, NH 03301	22-3458955	501(C)(3)	15,000.	0.			PROJECT SUPPORT
THE OKANOGAN LAND TRUST P.O. BOX 293, 416 1/2 S. WHITCOMB # TONASKET, WA 98855	94-3112454	501(C)(3)	14,776.	0.			PROJECT SUPPORT
FUND FOR CITY OF BOSTON PARKS & RECREATION - 1010 MASSACHUSETTS - BOSTON, MA 02118	04-2784811	501(C)(3)	12,500.	0.			PROJECT SUPPORT
CITY PARKS ALLIANCE, INC. 2121 WARD CT., NW 5TH FLR. WASHINGTON, DC 20037	80-0015566	501(C)(3)	10,000.	0.			PROJECT SUPPORT
MAINE COAST HERITAGE TRUST 1 BOWDOIN MILL ISLAND, #201 TOPSHAM, ME 04086	23-7099105	501(C)(3)	10,000.	0.			PROJECT SUPPORT
MONTANA CONSERVATION CORPS, INC. 206 N. GRAND BOZEMAN, MT 59715	81-0467431	501(C)(3)	10,000.	0.			PROJECT SUPPORT
APPALACHIAN TRAIL CONSERVANCY 799 WASHINGTON ST., P.O BOX 807 HARPERS FERRY, WV 25425	52-6046689	501(C)(3)	7,500.	0.			EVENT SPONSORSHIP
GREENBIZ GROUP, INC. 350 FRANK H. OGAWA PLAZA, #800 OAKLAND, CA 94612	20-5602725		7,500.	0.			EVENT SPONSORSHIP
LAND TRUST OF THE TREASURE VALLEY P.O. BOX 106 BOISE, ID 83701	84-1380693	501(C)(3)	7,500.	0.			PROJECT SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW JERSEY CONSERVATION FOUNDATION 170 LONGVIEW RD. FAR HILLS, NJ 07931	22-6065456	501(C)(3)	6,500.	0.			EVENT SPONSORSHIP



**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
HONROARIUM	4	1,000.	0.		
PROJECT SUPPORT	1	10,000.	0.		

**Part IV Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

GRANTEES ADHERE TO MONITORING AND REPORTING REQUIREMENTS ASSOCIATED WITH GRANTS FROM THE TRUST FOR PUBLIC LAND.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2015**

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

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

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions          | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>	X	
<b>2</b>		X
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2015

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM B. ROGERS PRESIDENT & CEO	(i)	352,074.	100,000.	0.	113,680.	23,655.	589,409.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) HOLLY HAUGH SECRETARY & GENERAL COUNSEL	(i)	194,474.	0.	0.	5,982.	18,254.	218,710.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CYNTHIA SCHERER TREASURER & CFO	(i)	214,221.	0.	0.	6,562.	23,239.	244,022.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ADRIAN BENEPE SENIOR VP	(i)	238,437.	0.	0.	0.	29,458.	267,895.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MARGIE BERMEO CHIEF PHILANTHROPY OFFICER	(i)	240,889.	0.	0.	7,392.	23,176.	271,457.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) RAY CHRISTMAN SENIOR VP	(i)	202,114.	0.	0.	6,184.	31,477.	239,775.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SEAN CONNOLLY CHIEF MARKETING OFFICER	(i)	211,134.	0.	0.	271.	29,521.	240,926.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ERNEST COOK SENIOR VP	(i)	199,462.	0.	0.	6,124.	25,652.	231,238.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JEFF DANTER SENIOR VP	(i)	191,683.	0.	0.	5,954.	31,477.	229,114.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) KATHY DECOSTER DIRECTOR OF FEDERAL AFFAIRS	(i)	167,703.	0.	0.	5,113.	11,198.	184,014.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) DEBORAH LOVE SENIOR VP	(i)	215,055.	0.	0.	6,452.	185.	221,692.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) BRENDA SCHICK VICE PRESIDENT	(i)	166,723.	0.	0.	5,002.	185.	171,910.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) BARBARA SMITH VICE PRESIDENT	(i)	152,518.	0.	0.	4,752.	23,239.	180,509.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) TIMOTHY WOHLGENANT SENIOR VP	(i)	186,384.	0.	0.	5,788.	29,521.	221,693.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) TILY SHUE LEGAL COUNSEL	(i)	161,743.	0.	0.	5,062.	21,782.	188,587.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) GINA FROMMER STATE DIRECTOR	(i)	161,433.	0.	0.	0.	11,837.	173,270.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) JOHN DAVIS CONTROLLER	(i)	156,962.	0.	0.	4,851.	23,239.	185,052.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) MAGGIE MADDEN ASST GENERAL COUNSEL	(i)	156,229.	0.	0.	4,760.	11,198.	172,187.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) DON MORROW TRANSACTION DIRECTOR	(i)	155,559.	0.	0.	195.	21,782.	177,536.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

PART I, LINE 1A:

WILL ROGERS'S SPOUSE OCCASIONALLY VOLUNTEERS AT BOARD MEETINGS AND  
FUNDRAISING EVENTS. IN THESE SITUATIONS HER TRAVEL EXPENSES ARE PAID BY THE  
TRUST FOR PUBLIC LAND.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2015**

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization **THE TRUST FOR PUBLIC LAND** Employer identification number **23-7222333**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	96	3,062,590.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other	X	24	13,806,479.	APPRAISAL
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **5**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2015)

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTORS REFLECTS THE NUMBER OF DONORS, NOT THE NUMBER OF ITEMS DONATED.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

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

FUND - WE HELPED PASS 12 STATE AND LOCAL BALLOT MEASURES, AN 86%

SUCCESS RATE, THAT GENERATED \$329,396,000 IN PUBLIC FUNDS FOR PARKS AND  
NATURAL SPACES.

EXPENSES \$ 2,494,228. INCLUDING GRANTS OF \$ 630,175. REVENUE \$ 564,497.

FORM 990, PART VI, SECTION A, LINE 2:

ROY RICHARDS AND LAURA RICHARDS ARE SIBLINGS.

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

THE DRAFT FORM 990 IS INITIALLY REVIEWED BY THE ORGANIZATION'S CFO AND  
TREASURER, CONTROLLER AND GENERAL COUNSEL. AFTER ANY CLARIFICATIONS OR  
QUESTIONS ARE RESOLVED THE DRAFT FORM 990 IS FORWARDED TO THE AUDIT  
COMMITTEE OF THE BOARD OF DIRECTORS AND A MEETING IS SCHEDULED WITH TPL'S  
ACCOUNTING FIRM, CFO & TREASURER AND CONTROLLER. ANY QUESTIONS FROM THE  
AUDIT COMMITTEE ARE ANSWERED AND CHANGES INCORPORATED. THE FINAL DOCUMENT  
IS APPROVED BY THE AUDIT COMMITTEE AND FORWARDED TO THE FULL BOARD FOR  
THEIR REVIEW PRIOR TO FILING.

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

THE ORGANIZATION HAS A COMPREHENSIVE CONFLICT OF INTEREST POLICY (POLICY)  
THAT REQUIRES POTENTIAL CONFLICTS OF INTEREST TO BE BROUGHT TO THE  
ATTENTION OF THE GENERAL COUNSEL. IF THE GENERAL COUNSEL DETERMINES THAT A  
POTENTIAL CONFLICT OF INTEREST EXISTS, THE MATTER IS REVIEWED BY THE  
CONFLICT REVIEW COMMITTEE, A COMMITTEE COMPOSED OF DESIGNATED SENIOR STAFF,  
OR, IF THE MATTER INVOLVES A MEMBER OF THE BOARD OF DIRECTORS OR THEIR

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

Schedule O (Form 990 or 990-EZ) (2015)

532211  
09-02-15



Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

FAMILY OR AFFILIATED ENTITY, IT IS REVIEWED BY THE FULL BOARD. POTENTIAL CONFLICTS INVOLVING THE PURCHASE OF GOODS AND SERVICES WITH A VALUE THAT DOES NOT EXCEED \$5,000 MAY BE REVIEWED BY THE GENERAL COUNSEL. THE POLICY APPLIES TO EMPLOYEES, MEMBERS OF THE BOARD OF DIRECTORS, ADVISORY BOARD MEMBERS, MAJOR DONORS, AND CERTAIN FORMER EMPLOYEES AND DIRECTORS, AS WELL AS THEIR IMMEDIATE FAMILIES AND AFFILIATED ENTITIES. THE POLICY IS PROVIDED TO ALL STAFF AS WELL AS THE MEMBERS OF THE BOARD OF DIRECTORS AND ADVISORY BOARD MEMBERS, IS CONTAINED IN THE HUMAN RESOURCES MANUAL, AND REMINDERS OF THE POLICY ARE ISSUED PERIODICALLY. THE POLICY IS DISCUSSED IN ORIENTATION MEETINGS WITH NEW STAFF AND BOARD MEMBERS, AND IN MEETINGS OF LEGAL AND PROJECT STAFF, THE TWO GROUPS MOST LIKELY TO ENCOUNTER POTENTIAL CONFLICTS OF INTEREST. ADDITIONALLY, POTENTIAL CONFLICTS OF INTEREST ARE ON THE CHECKLIST OF MATTERS TO BE DISCLOSED IN FACT SHEETS SUBMITTED TO THE PROJECT REVIEW COMMITTEE OR TO THE TRANSACTION COMMITTEE OF THE BOARD OF DIRECTORS FOR THE APPROVAL OF CONSERVATION REAL ESTATE TRANSACTIONS. ONCE A YEAR ALL BOARD MEMBERS ARE POLLED ABOUT TRANSACTIONS AND ARRANGEMENTS WITH THE ORGANIZATION. AWARENESS OF THE POLICY IS HIGH, AS EVIDENCED BY QUESTIONS PRESENTED TO THE OFFICE OF THE GENERAL COUNSEL. IF A MATTER IS BROUGHT TO THE BOARD OF DIRECTORS FOR REVIEW, THE BOARD MEMBER WHO IS THE SUBJECT OF THE REVIEW IS REQUIRED TO BE ABSENT FROM THE DISCUSSION AND VOTE ON THE MATTER, AND WITH RESPECT TO ALL CONFLICTS REVIEWS, THE INTERESTED PARTY MUST BE FOUND TO HAVE HAD NO ROLE IN OR INFLUENCE OVER THE DECISION. IF A TRANSACTION IS FOUND TO PRESENT AN UNACCEPTABLE CONFLICT OF INTEREST, THE TRANSACTION IS PROHIBITED OR ITS TERMS MUST BE REVISED SUCH THAT IT CAN MEET THE STANDARDS REQUIRED UNDER THE POLICY, NAMELY (A) ALL MATERIAL INTEREST HAVE BEEN DISCLOSED; (B) THE TRANSACTION IS DEEMED TO BE FAIR AND REASONABLE TO TPL AND IN TPL'S BEST INTERESTS; (C) THE TRANSACTION DOES NOT CONFER ANY SPECIAL BENEFIT ON THE INTERESTED PARTY; AND (D) THE INTERESTED

Name of the organization THE TRUST FOR PUBLIC LAND	Employer identification number 23-7222333
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PARTY DOES NOT HAVE ANY ROLE IN THE DECISION AND HAS NOT INFLUENCED THE DECISION.

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

THE TRUST FOR PUBLIC LAND CONTRACTED WITH AN INDEPENDENT COMPENSATION CONSULTANT, WHO PROVIDED COMPARABILITY DATA AND ANALYSIS FOR THE CEO. THIS INFORMATION WAS PROVIDED TO THE BOARD OF DIRECTORS, WHO APPROVED THE CEO COMPENSATION IN EXECUTIVE SESSION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, HI, MO, TX, DC, NV

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

ANNUAL AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE POSTED ON THE TRUST FOR PUBLIC LAND'S WEBSITE (WWW.TPL.ORG). ARTICLES OF INCORPORATION ARE AVAILABLE ON THE CALIFORNIA SECRETARY OF STATE WEBSITE. FORM 990, AUDITED FINANCIAL STATEMENTS, ARTICLES OF INCORPORATION AND DETERMINATION LETTER ARE ALSO MADE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF TIME SET FORTH IN SEC. 6104(D). THE CONFLICT OF INTEREST POLICY IS NOT MADE AVAILABLE.

FORM 990, PART VII:

TPL OFFICERS OR KEY EMPLOYEES CYNTHIA SCHERER, ERNEST COOK, M. HOLLY HAUGH, WILLIAM B ROGERS, AND D. MALCOLM CARSON SERVED IN VARIOUS CAPACITIES FOR RELATED ORGANIZATIONS AS DID SEVERAL BOARD MEMBERS.

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



**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

Name of the organization **THE TRUST FOR PUBLIC LAND** Employer identification number **23-7222333**

**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
COAST DAIRIES & LAND COMPANY - 94-0392095 101 MONTGOMERY STREET, STE 900 SAN FRANCISCO, CA 94104	TO SUPPORT THE TRUST FOR PUBLIC LAND	CALIFORNIA	501(C)(3)	11A, TYPE I	THE TRUST FOR PUBLIC LAND	X	
THE CONSERVATION CAMPAIGN - 04-3515341 101 MONTGOMERY STREET, STE 900 SAN FRANCISCO, CA 94104	TO SUPPORT FUNDING MEASURES FOR PARKS AND CONSERVATION	CALIFORNIA	501(C)(4)		THE TRUST FOR PUBLIC LAND		X

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

Schedule R (Form 990) 2015

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER TRUSTS (28)	INVESTMENTS	CA	THE TRUST FOR PUBLIC LAND	TRUST				X	
POOLED INCOME FUND (4)	INVESTMENTS	CA	THE TRUST FOR PUBLIC LAND	TRUST				X	

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....	X	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) COAST DAIRIES & LAND COMPANY	S	2,040,000.	FAIR MARKET VALUE
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Table with 11 main columns: (a) Name, address, and EIN of entity; (b) Primary activity; (c) Legal domicile; (d) Predominant income; (e) Are all partners sec. 501(c)(3) orgs.?; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations?; (i) Code V-UBI amount; (j) General or managing partner?; (k) Percentage ownership.