

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2010**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2010 calendar year, or tax year beginning **APR 1, 2010** and ending **MAR 31, 2011**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE TRUST FOR PUBLIC LAND</b>		<b>D</b> Employer identification number <b>23-7222333</b>
	Doing Business As		<b>E</b> Telephone number <b>415-495-4014</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>176,767,922.</b>
	<b>101 MONTGOMERY STREET, STE 900</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or country, and ZIP + 4 <b>SAN FRANCISCO, CA 94104</b>		<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>F</b> Name and address of principal officer: <b>WILLIAM B. ROGERS</b> <b>SAME AS C ABOVE</b>			<b>H(c)</b> 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>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE TRUST FOR PUBLIC LAND AND AFFILIATES (THE TRUST) ARE CHARITABLE, NOT-FOR-PROFIT CORPORATIONS</b>		
	<b>2</b> Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>20</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>19</b>
	<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>383</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>407</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>104,927,533.</b>	<b>101,631,086.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>17,560,902.</b>	<b>13,694,407.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>5,109,615.</b>	<b>3,645,784.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>72,225.</b>	<b>14,922.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>127,670,275.</b>	<b>118,986,199.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>60,662,766.</b>	<b>63,202,903.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>29,471,810.</b>	<b>29,215,054.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>▶ 7,923,591.</b>	<b>484,361.</b>	<b>658,657.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>33,323,064.</b>	<b>26,212,706.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>123,942,001.</b>	<b>119,289,320.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>3,728,274.</b>	<b>-303,121.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>332,533,652.</b>	<b>319,501,503.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>140,536,832.</b>	<b>129,313,774.</b>
		<b>191,996,820.</b>	<b>190,187,729.</b>

**Part II Signature Block**

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: <i>Cynthia Scherer</i>		Date: <b>11/3/11</b>
	Type or print name and title: <b>CYNTHIA SCHERER, CFO &amp; TREASURER</b>		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name: <b>TAMARA L. BONGI</b>	Preparer's signature: <i>Tamara Bong</i>	Date: <b>10/27/11</b>
	Firm's name: <b>HOOD &amp; STRONG LLP</b>	Firm's EIN: <b>▶</b>	Check if self-employed: <input type="checkbox"/> PTIN
Firm's address: <b>10 ALMADEN BLVD., STE.250 SAN JOSE, CA 95113</b>		Phone no. <b>(408) 998-8400</b>	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE TRUST FOR PUBLIC LAND CONSERVES LAND FOR PEOPLE TO ENJOY AS PARKS, GARDENS, AND OTHER NATURAL PLACES, ENSURING LIVABLE COMMUNITIES FOR GENERATIONS TO COME.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 83690741. including grants of \$ 61392008. ) (Revenue \$ 8,577,114. ) CONSERVATION TRANSACTIONS:

TPL COMPLETED 142 CONSERVATION TRANSACTIONS IN THE FISCAL YEAR, PROTECTING 131,385 ACRES WITH A COMBINED MARKET VALUE OF MORE THAN \$285 MILLION. TPL APPLIED ITS EXPERTISE TO A VARIETY OF GOALS-FROM CONSERVING TRIBAL LAND ON WASHINGTON'S KIKET ISLAND, TO SAFEGUARDING PUBLIC ACCESS AT DEVIL'S CANYON RANCH IN WYOMING, TO SUPPORTING LOCAL AGRICULTURE AT BEAN AND ALLARD FARMS IN NORTHAMPTON, MASSACHUSETTS. TPL CONSERVED LARGE LANDSCAPES ACROSS THE COUNTRY, COMPLETING THE 310,000-ACRE MONTANA LEGACY PROJECT AND KEY PURCHASES IN CALIFORNIA'S SIERRA BUTTES. AND FROM HAWAI'I BEACHES TO NEW JERSEY WETLANDS, TPL'S WORK SAFEGUARDED WATER BY PROTECTING THE LAND AROUND IT.

4b (Code: ) (Expenses \$ 9,294,799. including grants of \$ 104,510. ) (Revenue \$ 4,302,772. ) URBAN PARKS AND PLAYGROUNDS:

IN THIS FISCAL YEAR, TPL COMPLETED 51 PROJECTS TO CREATE AND PRESERVE URBAN GREEN SPACE ACROSS THE COUNTRY. AS PART OF NEW YORK CITY'S PLANYC INITIATIVE, TPL TRANSFORMED TEN BARE ASPHALT SCHOOLYARDS INTO VIBRANT NEIGHBORHOOD PLAYGROUNDS. THE SAME COMMUNITY-DRIVEN DESIGN PROCESS SAW THE EXPANSION OF THE WESTERLY CREEK COMMUNITY GARDEN IN DENVER AND A REDESIGN OF HAYES VALLEY PLAYGROUND IN SAN FRANCISCO. IN CHICAGO, TPL'S WORK ON THE BLOOMINGDALE TRAIL IS REINVIGORATING ONETIME INDUSTRIAL NEIGHBORHOODS, WHILE IN LOS ANGELES, NEWLY INSTALLED FITNESS ZONES ARE PROVIDING ACCESS TO OUTDOOR EXERCISE EQUIPMENT.

4c (Code: ) (Expenses \$ 5,258,832. including grants of \$ 1,690,081. ) (Revenue \$ 392,558. ) CONSERVATION SERVICES:

FROM EASTERN OREGON TO CENTRAL TEXAS, TPL'S CONSERVATION VISION TEAM COMPLETED 20 PROJECTS IN THE FISCAL YEAR TO HELP COMMUNITIES PRIORITIZE CONSERVATION GOALS AND PLAN NETWORKS OF PROTECTED LAND. OUR CONSERVATION FINANCE SERVICE HELPED PASS 17 STATE AND LOCAL BALLOT MEASURES THAT WILL GENERATE \$1.8 BILLION FOR LAND PROTECTION-INCLUDING SUPPORT FOR STATE CONSERVATION FUNDS IN MAINE AND IOWA.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 2,368,306. including grants of \$ 16,304. ) (Revenue \$ 421,963. )

4e Total program service expenses 100,612,678.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	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
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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
7	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	
8	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
9	Did the organization report an amount in Part X, line 21; 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
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	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	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	
c	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
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
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, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	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
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		
20b			

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

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 and other assistance to individuals in the United States 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 25</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 Section 501(c)(3) and 501(c)(4) 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> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <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 a grant selection committee member, or to a person related to such an individual? <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, Parts II, III, IV, and V, line 1</i> .....	X	
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>a</b> 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> ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>36 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 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Input box for Schedule O response

Main table with columns for question number, description, and Yes/No responses. Includes rows 1a-1c, 2a-2b, 3a-3b, 4a-4a, 5a-5c, 6a-6b, 7, 7a-7g, 8, 9, 9a-9b, 10, 10a-10b, 11, 11a-11b, 12a, 12b, 13, 13a-13c, 14a-14b.

**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 to any question 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		
			20
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
			19
<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>	Does the organization have members or stockholders?		X
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</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>	Does the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>11a</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b>	Does the organization have a written whistleblower policy?	X	
<b>14</b>	Does 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>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</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>16b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**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 (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website  Another's website  Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **CINDY 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 to any question 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 (describe hours for related organizations in Schedule O)	(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			
WILLIAM ROGERS PRESIDENT & CEO	40.00	X		X			271,890.	0.	27,677.	
STEPHEN BAIRD DIRECTOR	1.00	X					0.	0.	0.	
BRIAN M. BEITNER DIRECTOR	1.00	X					0.	0.	0.	
GEORGE BELL DIRECTOR	1.00	X					0.	0.	0.	
MARGARET L. BROWN DIRECTOR	1.00	X					0.	0.	0.	
ROBERT E. CARLSON DIRECTOR	1.00	X					0.	0.	0.	
PAGE KNUDSEN COWLES DIRECTOR	1.00	X					0.	0.	0.	
WILLIAM J. CRONON DIRECTOR	1.00	X					0.	0.	0.	
GEORGE P. DENNY DIRECTOR	1.00	X					0.	0.	0.	
DOUGLAS DURST DIRECTOR	1.00	X					0.	0.	0.	
DOUGLAS P. FERGUSON DIRECTOR	1.00	X					0.	0.	0.	
JAMES S. HOYTE DIRECTOR	1.00	X					0.	0.	0.	
ELLIOTT P. LAWS DIRECTOR	1.00	X					0.	0.	0.	
CAROLINE NIEMCZYK DIRECTOR	1.00	X					0.	0.	0.	
MICHAEL E. PATTERSON DIRECTOR	1.00	X					0.	0.	0.	
CLAUDIA A. POLLEY DIRECTOR	1.00	X					0.	0.	0.	
TOM REEVE DIRECTOR	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 (describe hours for related organizations in Schedule O)	(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			
ROY RICHARDS, JR. DIRECTOR	1.00	X					0.	0.	0.	
MARTIN J. ROSEN DIRECTOR	1.00	X					0.	0.	0.	
JAMES D. SANO DIRECTOR	1.00	X					0.	0.	0.	
KENT J. THIRY DIRECTOR	1.00	X					0.	0.	0.	
SHERYL TISHMAN DIRECTOR	1.00	X					0.	0.	0.	
F. JEROME TONE DIRECTOR	1.00	X					0.	0.	0.	
NELSON LEE SECRETARY	40.00			X			164,188.	0.	25,385.	
CYNTHIA SCHERER CFO & TREASURER	40.00			X			169,882.	0.	22,360.	
CHRISTOPHER KAY CHIEF OPERATING OFFICER	40.00			X			118,085.	0.	6,596.	
<b>1b Sub-total</b>							724,045.	0.	82,018.	
<b>c Total from continuation sheets to Part VII, Section A</b>							1,659,795.	0.	189,238.	
<b>d Total (add lines 1b and 1c)</b>							2,383,840.	0.	271,256.	

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

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- 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*
- 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*
- 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*

	Yes	No
3		X
4	X	
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.

(A) Name and business address	(B) Description of services	(C) Compensation
TLC PLUMBING & UTILITY, INC. 5000 EDITH NE, ALBUQUERQUE, NM 87107	CONSTRUCTION/PARK DEVELOPMENT	450,727.
WRNS STUDIO, LLP, 501 2ND STREET, SUITE 402, SAN FRANCISCO, CA 94107	CONSTRUCTION/PARK DEVELOPMENT	310,691.
SHERWOOD DESIGN ENGINEERS, 1 UNION ST., 2ND FLOOR, STE. 200, SAN FRANCISCO, CA	ENGINEERING/FEASIBILITY & ARCHITECT	298,384.
WATERSHED CONSERVATION AUTHORITY 100 SAN GABRIEL RD., AZUZA, CA 91702	ENVIRONMENTAL ASSESSMENT	288,281.
HATCH MOTT MACDONALD, INC. PO BOX 7777, PHILADELPHIA, PA 19175	ENGINEERING/FEASIBILITY & ARCHITECT	286,676.

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

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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	(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			
ERNEST COOK SENIOR VICE PRESIDENT	40.00				X			172,162.	0.	25,343.
JAY DEAN SENIOR VICE PRESIDENT	40.00				X			172,362.	0.	15,830.
ROGER HOESTEREY SENIOR VICE PRESIDENT	40.00				X			162,582.	0.	25,293.
ROBERT MCCLYMONDS SENIOR VICE PRESIDENT	40.00				X			150,666.	0.	3,260.
MARGIE BERMEO CHIEF PHILANTHROPY OFFICER	40.00				X			184,159.	0.	18,724.
CYNTHIA WHITEFORD SENIOR VICE PRESIDENT	40.00				X			157,736.	0.	19,049.
GREGORY CHELIUS STATE DIRECTOR	40.00					X		140,411.	0.	11,379.
TILY SHUE LEGAL COUNSEL	40.00					X		133,999.	0.	18,686.
KATHY DECOSTER DIRECTOR OF FEDERAL AFFAIRS	40.00					X		128,854.	0.	24,605.
DON MORROW TRANSACTION DIRECTOR	40.00					X		131,884.	0.	24,318.
BRENDA SCHICK DIRECTOR OF CONSERVATION TRANSACTION	40.00					X		124,980.	0.	2,751.
Total to Part VII, Section A, line 1c .....								1,659,795.		189,238.

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns					
	b	Membership dues					
	c	Fundraising events	165,110.				
	d	Related organizations					
	e	Government grants (contributions)	20,686,255.				
	f	All other contributions, gifts, grants, and similar amounts not included above	80,779,721.				
	g	Noncash contributions included in lines 1a-1f: \$	22,474,692.				
	h	<b>Total.</b> Add lines 1a-1f	101,631,086.				
	Program Service Revenue	2 a	<b>LANDOWNER FEE</b>	5329616.	5329616.		
b		<b>GOVT COST REIMBURSEMEN</b>	4923047.	4923047.			
c		<b>PROJECT REIMBURSEMENTS</b>	815,847.	815,847.			
d		<b>TECHNICAL ASSISTANCE</b>	712,998.	712,998.			
e		<b>GOVT CONTRACT FEE</b>	635,541.	635,541.			
f		All other program service revenue	1277358.	1277358.			
g		<b>Total.</b> Add lines 2a-2f	13,694,407.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	1379591.			1,379,591.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties	12,340.			12,340.	
	6 a	Gross Rents	(i) Real				
		b	Less: rental expenses	(ii) Personal			
		c	Rental income or (loss)				
		d	Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
		b	Less: cost or other basis and sales expenses	(ii) Other			
		c	Gain or (loss)				
		d	Net gain or (loss)				
	8 a	Gross income from fundraising events (not including \$ 165,110. of contributions reported on line 1c). See Part IV, line 18	a	41,070.			
		b	Less: direct expenses	b	43,072.		
		c	Net income or (loss) from fundraising events		-2,002.		-2,002.
9 a	Gross income from gaming activities. See Part IV, line 19	a					
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a	14,671.				
	b	Less: cost of goods sold	b	10,087.			
	c	Net income or (loss) from sales of inventory		4,584.		4,584.	
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d						
12	<b>Total revenue.</b> See instructions.		118,986,199.	13,694,407.	0.	3,660,706.	

**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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21 .....	63,202,903.	63,202,903.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	2,048,110.	1,167,321.	600,854.	279,935.
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 .....	21,923,147.	13,086,267.	5,021,975.	3,814,905.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	430,854.	257,623.	97,757.	75,474.
9 Other employee benefits .....	2,874,179.	1,714,823.	659,934.	499,422.
10 Payroll taxes .....	1,938,764.	1,153,326.	453,519.	331,919.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	133,109.	99,285.	33,824.	
c Accounting .....	206,216.		206,216.	
d Lobbying .....	287,261.	287,261.		
e Professional fundraising services. See Part IV, line 17 .....	658,657.			658,657.
f Investment management fees .....	12,742.		12,742.	
g Other .....	5,637,633.	4,897,383.	581,590.	158,660.
12 Advertising and promotion .....	346,954.	56,717.	150,035.	140,202.
13 Office expenses .....	2,389,992.	1,421,751.	559,071.	409,170.
14 Information technology .....	486,899.	94,543.	352,425.	39,931.
15 Royalties .....				
16 Occupancy .....	4,024,896.	2,604,273.	820,281.	600,342.
17 Travel .....	1,854,693.	1,000,844.	313,392.	540,457.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....	255,067.	137,655.	50,216.	67,196.
20 Interest .....	1,756,947.	1,622,849.	134,098.	
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	285,933.	77,076.	197,843.	11,014.
23 Insurance .....	718,545.	427,446.	168,083.	123,016.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <b>PROJECT SITE DEVELOPME</b> .....	3,698,021.	3,698,021.		
b <b>APPRAISAL SERVICES</b> .....	1,474,172.	1,474,172.		
c <b>FEASABILITY, ARCHITECTU</b> .....	1,121,368.	1,121,368.		
d <b>OTHER PROJECT RELATED E</b> .....	936,817.	932,878.		3,939.
e <b>OTHER OPERATING EXPENSE</b> .....	585,441.	76,893.	339,196.	169,352.
f All other expenses .....				
25 <b>Total functional expenses.</b> Add lines 1 through 24f .....	119289320.	100612678.	10,753,051.	7,923,591.
26 <b>Joint costs.</b> Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation .....				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	-7,233.	<b>1</b>	242,599.	
	<b>2</b> Savings and temporary cash investments .....	5,867,582.	<b>2</b>	5,586,918.	
	<b>3</b> Pledges and grants receivable, net .....	12,288,416.	<b>3</b>	8,398,876.	
	<b>4</b> Accounts receivable, net .....	8,225,304.	<b>4</b>	7,867,875.	
	<b>5</b> 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> 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 instructions) .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....	3,701,403.	<b>7</b>	2,855,869.	
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	170,135.	<b>9</b>	137,218.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 5,681,874.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 4,362,121.	1,359,550.	<b>10c</b>	1,319,753.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>		
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	82,989,596.	<b>12</b>	87,593,024.	
	<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 .....	217,938,899.	<b>15</b>	205,499,371.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	332,533,652.	<b>16</b>	319,501,503.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	13,303,036.	<b>17</b>	15,601,390.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....	7,993,518.	<b>19</b>	3,943,491.	
	<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> 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 .....	66,167,967.	<b>23</b>	58,059,093.	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	53,072,311.	<b>25</b>	51,709,800.	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	140,536,832.	<b>26</b>	129,313,774.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	35,921,066.	<b>27</b>	46,800,987.	
	<b>28</b> Temporarily restricted net assets .....	145,226,604.	<b>28</b>	132,535,747.	
	<b>29</b> Permanently restricted net assets .....	10,849,150.	<b>29</b>	10,850,995.	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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 .....	191,996,820.	<b>33</b>	190,187,729.	
<b>34</b> Total liabilities and net assets/fund balances .....	332,533,652.	<b>34</b>	319,501,503.		

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	118,986,199.
2	Total expenses (must equal Part IX, column (A), line 25)	2	119,289,320.
3	Revenue less expenses. Subtract line 2 from line 1	3	-303,121.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	191,996,820.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,505,970.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	190,187,729.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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		
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?	X	
3b	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.	X	

Form 990 (2010)

**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. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

Open to Public Inspection

Name of the organization <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number <b>23-7222333</b>
--------------------------------------------------------------	-----------------------------------------------------

**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.)
- 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 that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....	<b>11g(i)</b>	
(ii) A family member of a person described in (i) above? .....	<b>11g(ii)</b>	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	<b>11g(iii)</b>	
- h 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 or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	187,924,093.	206,576,978.	149,769,783.	104,926,316.	101,672,521.	750,869,691.
<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 .....	187,924,093.	206,576,978.	149,769,783.	104,926,316.	101,672,521.	750,869,691.
<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) .....						4,677,709.
<b>6 Public support.</b> Subtract line 5 from line 4.						746,191,982.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>7</b> Amounts from line 4 .....	187,924,093.	206,576,978.	149,769,783.	104,926,316.	101,672,521.	750,869,691.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	3,580,755.	4,108,665.	3,627,098.	2,266,672.	1,391,931.	14,975,121.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	20,135.	20,026.				40,161.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	139,508.	90,074.				229,582.
<b>11 Total support.</b> Add lines 7 through 10						766,114,555.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	119,861,240.
<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 2010 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	97.40	%
<b>15</b> Public support percentage from 2009 Schedule A, Part II, line 14 .....	<b>15</b>	97.28	%
<b>16a 33 1/3% support test - 2010.</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 - 2009.</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 - 2010.</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 IV 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 - 2009.</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 IV 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.) .....						
<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 2010 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for <b>2010</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2010.** 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 - 2009.** 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





**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

**2010**

Name of the organization

Employer identification number

THE TRUST FOR PUBLIC LAND

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 of \$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 line 2 of its Form 990-PF, 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) (2010)

<b>Name of organization</b>  <b>THE TRUST FOR PUBLIC LAND</b>	<b>Employer identification number</b>  <b>23-7222333</b>
---------------------------------------------------------------------	----------------------------------------------------------------

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/> <hr/>	\$ <u>3,500,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>2</u>	<hr/> <hr/> <hr/> <hr/>	\$ <u>7,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  THE TRUST FOR PUBLIC LAND	<b>Employer identification number</b>  23-7222333
--------------------------------------------------------------	---------------------------------------------------------

**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	BARGAIN SALE OF 114 ACRES OF LAND _____ _____ _____	\$ 3,500,000.	07/14/10
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

<b>Name of organization</b>	<b>Employer identification number</b>
THE TRUST FOR PUBLIC LAND	23-7222333

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. 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 information once. See instructions.) ▶ \$

(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>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

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

**2010**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

**Open to Public Inspection**

▶ **See separate instructions.**

**If the organization answered "Yes," to 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), 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>
----------------------------------------------------------	-----------------------------------------------------

**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-.

**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.  
 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>1 a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) .....	216,969.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	773,021.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....	989,990.													
<b>d</b>	Other exempt purpose expenditures .....	118,299,330.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....	119,289,320.													
<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: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>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 instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(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	657,139.	843,333.	790,266.	989,990.	3,280,728.
<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	63,956.	55,686.	127,347.	216,969.	463,958.

Schedule C (Form 990 or 990-EZ) 2010

**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
<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? If "Yes," describe in Part IV .....			
<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? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? .....	<b>3</b>	

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<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 .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<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? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. 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," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

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" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate 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" to 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 an 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 14
b Total acreage restricted by conservation easements .....	2b 199.00
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 ▶ 2

4 Number of states where property subject to conservation easement is located ▶ 7

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

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 38

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 2,676.

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)? .....

Yes  No

9 In Part XIV, 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" to 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 XIV, 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) Revenues included in 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 Revenues included in 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 XIV.
- 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" to 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 XIV 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?  Yes  No
- b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to 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	20,006.	20,006.			
b Contributions			20,006.		
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	20,006.	20,006.	20,006.		

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  100.00 %
  - c Term endowment  \_\_\_\_\_ %
- 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                                                           |     | X  |
| (ii) related organizations                                                            |     | X  |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? |     |    |
| 3b                                                                                    |     |    |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		2,664,609.	1,782,965.	881,644.
c Leasehold improvements		494,179.	267,117.	227,062.
d Equipment		2,181,553.	2,040,627.	140,926.
e Other		341,533.	271,412.	70,121.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,319,753.

**Part VII Investments - Other Securities.** 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) <b>MUTUAL FUNDS</b>	3,708,297.	END-OF-YEAR MARKET VALUE
(B) <b>HARBOR PROPERTIES, INC.</b>	190,447.	END-OF-YEAR MARKET VALUE
(C) <b>DEBT SECURITIES</b>	83,694,280.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	<b>87,593,024.</b>	

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) <b>DEPOSITS ON LAND TRANSACTIONS</b>	3,267,550.
(2) <b>INVESTMENT IN AFFILIATES</b>	38,325,809.
(3) <b>MISCELLANEOUS</b>	170,529.
(4) <b>OPEN SPACE HOLDINGS</b>	101,819,262.
(5) <b>ASSETS HELD IN CHARITABLE TRUSTS</b>	61,916,221.
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	<b>205,499,371.</b>

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) <b>LIAB TO BENEFICIARIES OF</b>	
(3) <b>CHARITABLE TRUSTS</b>	45,411,999.
(4) <b>MITIGATION ADVANCES</b>	1,910,998.
(5) <b>OPTION PAYMENTS</b>	4,386,803.
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	<b>51,709,800.</b>

FIN 48 (ASC 740) Footnote. In Part XIV, 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).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	118,986,199.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	119,289,320.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-303,121.
4	Net unrealized gains (losses) on investments	4	236,062.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-1,742,032.
9	Total adjustments (net). Add lines 4 through 8	9	-1,505,970.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-1,809,091.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	117771976.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	236,062.
b	Donated services and use of facilities	2b	206,062.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	1,272,555.
e	Add lines 2a through 2d	2e	1,714,679.
3	Subtract line 2e from line 1	3	116057297.
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 XIV.)	4b	2,928,902.
c	Add lines 4a and 4b	4c	2,928,902.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	118986199.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	119548541.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	206,062.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	53,159.
e	Add lines 2a through 2d	2e	259,221.
3	Subtract line 2e from line 1	3	119289320.
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 XIV.)	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	119289320.

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART II, LINE 3: DURING THE YEAR, THE TRUST TRANSFERRED ITS RIGHTS AND OBLIGATIONS FOR THE CONSERVATION RESTRICTION ON APPROXIMATELY 14.89 ACRES IN HAMILTON COUNTY, TN, TO THE CITY OF CHATTANOOGA. ADDITIONALLY, THE TRUST TRANSFERRED ITS RIGHT AND OBLIGATIONS FOR THE CONSERVATION RESTRICTION ON 106.74 ACRES IN CLATSOP COUNTY, OR TO THE NORTH COAST LAND CONSERVANCY.**

**PART II, LINE 9: EASEMENTS EASEMENTS ACQUIRED BY THE TRUST ARE CONSERVATION EASEMENTS AND REPRESENT**

**Part XIV** Supplemental Information (continued)

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, 2011, EASEMENTS VALUED AT \$33,780,000 WERE ACQUIRED AND \$41,674,000 CONVEYED. DURING THE YEAR ENDED MARCH 31, 2010, EASEMENTS VALUED AT \$30,219,000 WERE ACQUIRED AND \$35,518,000 CONVEYED.

PART X, LINE 2: 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 8 - OTHER ADJUSTMENTS:

IMPAIRMENT LOSS	-2,928,903.
CHANGE IN VALUE OF SPLIT INTEREST	1,219,397.
INVESTMENT IN AFFILIATES AND OTHER ADJUSTMENTS	-32,526.
TOTAL TO SCHEDULE D, PART XI, LINE 8	-1,742,032.

**Part XIV** Supplemental Information (continued)

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

EQUITY IN VALUE OF SPLIT INTEREST AGREEMENT	1,219,396.
COST OF GOODS SOLD	10,087.
SPECIAL EVENTS DIRECT EXPENSES	43,072.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,272,555.

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

IMPAIRMENT LOSS ON LAND HOLDINGS	2,928,902.
----------------------------------	------------

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

SPECIAL EVENTS DIRECT EXPENSES	43,072.
COST OF GOODS SOLD	10,087.
TOTAL TO SCHEDULE D, PART XIII, LINE 2D	53,159.

FORM 990, SCHEDULE D, PART XII, LINE 1

TOTAL REVENUE, GAINS, AND OTHER SUPPORT PER AUDITED FINANCIAL STATEMENTS PRESENTED IS THE UNCONSOLIDATED REVENUE PER SUPPLEMENTAL INFORMATION CONTAINED IN THE AUDIT. THE AMOUNT PRESENTED IS NOT THE TOTAL REVENUE, GAINS, AND OTHER SUPPORT PER AUDIT ON A CONSOLIDATED BASIS.

FORM 990, SCHEDULE D, PART XIII, LINE 1

TOTAL EXPENSES AND LOSSES PER AUDITED FINANCIAL STATEMENTS PRESENTED IS THE UNCONSOLIDATED EXPENSES AND LOSSES PER SUPPLEMENTAL INFORMATION CONTAINED IN THE AUDIT. THE AMOUNT PRESENTED IS NOT THE TOTAL EXPENSES AND LOSSES PER AUDIT ON A CONSOLIDATED BASIS.

**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" to 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. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

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" to 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			
ANDY SPAHN & ASSOCIATES - 100 UNIVERSAL PLAZA BLDG 5121,	CAHUENGA CAMPAIGN		X	3,959,839.	30,000.	3,929,839.
FREDERICK A. VALLEJO - PO BOX 4558, PARK CITY, UT 84060	WRITING ANNUAL FUND		X	1,755,000.	6,500.	1,748,500.
ADAMS HUSSEY & ASSOCIATES - 1600 WILSON BLVD., STE 300,	ANNUAL FUND		X	1,334,000.	254,521.	1,079,479.
BENTZ WHALEY FLESSNER, INC. - 7251 OHMS LANE, MINNEAPOLIS,	COMPREHENSIVE CAMPAIGN		X	1,184,230.	195,166.	989,064.
SALLY RANDEL - 2 SAN BENITO AVE, ATHERTON, CA 94027	CAPACITY BUILDING		X	544,951.	15,600.	529,351.
PHYLLIS SHAPIRO - 25 CHAMBERLAIN ROAD, FLEMINGTON,	GRANT WRITING - SOUTH		X	450,000.	42,758.	407,242.
RENEE M SIMI - 1510 FOURTH STREET, STE 4, BERKELEY, CA	DIRECT MAIL		X	422,000.	46,000.	376,000.
DIVITTORIO & ASSOCIATES - 802 MONTGOMERY STREET, SAN	WEBBER LAKE CAMPAIGN		X	75,000.	8,200.	66,800.
CARLA FRISK - 3340 SAGUNTO STREET, SANTA YNEZ, CA 93460	CENTRAL COAST		X	32,500.	43,538.	-11,038.
WEALTH ENGINE - 4915 ST. ELMO AVE, STE 300, BETHESDA, MD	CAPACITY BUILDING		X	0.	6,888.	-6,888.
<b>Total</b>				<b>9,757,520.</b>	<b>649,171.</b>	<b>9,108,349.</b>

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, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, UT, VA, WA, WV, WI, TN, WY, VI, SD, TX, HI, ID, MO, IN, IA, MT, NE, NV, DE

**Part II Fundraising Events.** Complete if the organization answered "Yes" to 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 (add col. (a) through col. (c))	
		PONY UP FOR TPL (event type)	ANNIE OAKLEY EVENT (event type)	1 (total number)		
Revenue	1	Gross receipts	109,580.	51,725.	44,875.	206,180.
	2	Less: Charitable contributions	91,770.	33,215.	40,125.	165,110.
	3	Gross income (line 1 minus line 2)	17,810.	18,510.	4,750.	41,070.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages			3,792.	3,792.
	8	Entertainment				
	9	Other direct expenses	24,870.	12,659.	1,751.	39,280.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				( 43,072 )
	11	Net income summary. Combine line 3, column (d), and line 10				-2,002.

**Part III Gaming.** Complete if the organization answered "Yes" to 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))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	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
7	Direct expense summary. Add lines 2 through 5 in column (d)				( _____ )
8	Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_  
 a Is the organization licensed to operate 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 operate 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 operated in:
 

<b>13a</b>		%
<b>13b</b>		%
- 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.** Complete this part to 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 complete this part to provide any additional information (see instructions).

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

(I) NAME OF FUNDRAISER: ANDY SPAHN & ASSOCIATES

(I) ADDRESS OF FUNDRAISER:

100 UNIVERSAL PLAZA BLDG 5121, UNIVERSAL CITY, CA 91608

(I) NAME OF FUNDRAISER: ADAMS HUSSEY & ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 1600 WILSON BLVD., STE 300, ARLINGTON, TX 22209

**Part IV** Supplemental Information (continued)

(I) NAME OF FUNDRAISER: BENTZ WHALEY FLESSNER, INC.

(I) ADDRESS OF FUNDRAISER: 7251 OHMS LANE, MINNEAPOLIS, MN 55439

(I) NAME OF FUNDRAISER: PHYLLIS SHAPIRO

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

(I) NAME OF FUNDRAISER: RENEE M SIMI

(I) ADDRESS OF FUNDRAISER: 1510 FOURTH STREET, STE 4, BERKELEY, CA 94710

(I) NAME OF FUNDRAISER: DIVITTORIO & ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 802 MONTGOMERY STREET, SAN FRANCISCO, CA 94133

(I) NAME OF FUNDRAISER: WEALTH ENGINE

(I) ADDRESS OF FUNDRAISER: 4915 ST. ELMO AVE, STE 300, BETHESDA, MD 20814

**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" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.**

OMB No. 1545-0047

**2010**

**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 Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BEND METROPOLITAN PARK & REC DISTRICT - 799 SW COLUMBIA ST - BEND, OR 97702		GOVT	0.	622,204.	APPRAISAL	BARGAIN SALE OF 4.7 ACRES OF LAND	LAND CONSERVATION
BERGEN COUNTY ONE BERGEN COUNTY PLAZA HACKENSACK, NJ 07601-7076		GOVT	0.	430,000.	APPRAISAL	BARGAIN SALE OF 10.66 ACRES OF LAND	LAND CONSERVATION
BOARD OF TRUSTEES OF THE INTERNAL IMPROVEMENT TRUST FUND OF THE STATE OF FL - 3900 COMMONWEALTH BLVD, MAIL STATION 115 -		GOVT	0.	200,000.	APPRAISAL	DONATION OF 12.78 ACRES OF LAND	LAND CONSERVATION
CA DEPT OF FISH & GAME 1807 13TH ST, SUITE 103 SACRAMENTO, CA 95811-7137		GOVT	0.	4,308,410.	APPRAISAL	DONATION OF 4308.41 ACRES OF LAND	LAND CONSERVATION
CENTRAL ARKANSAS WATER 221 EAST CAPITAL AVE LITTLE ROCK, AR 72201		GOVT	0.	560,000.	APPRAISAL	BARGAIN SALE OF 915.038 ACRES OF LAND	LAND CONSERVATION
CITY OF ALBUQUERQUE ONE CIVIC PLAZA NW OTH FL ALBUQUERQUE, NM 87102		GOVT	0.	90,000.	APPRAISAL	BARGAIN SALE OF 65.97 ACRES OF LAND	LAND CONSERVATION

**2** Enter total number of section 501(c)(3) and government organizations **85.**

**3** Enter total number of other organizations **0.**

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

Schedule I (Form 990) (2010)

**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
CITY OF CHATTANOOGA 1250 MARKET ST, STE 1000 CHATTANOOGA, TN 37402		GOVT	0.	1,849,999.	APPRAISAL	DONATION OF 37 ACRES OF LAND	LAND CONSERVATION
CITY OF CHATTANOOGA ADMIN, SUITE 216, CITY HALL CHATTANOOGA, TN 37402		GOVT	0.	184,000.	APPRAISAL	DONATION OF 19.88 ACRES EASEMENT	LAND CONSERVATION
CITY OF CHATTANOOGA ADMIN, SUITE 216, CITY HALL CHATTANOOGA, TN 37402		GOVT	0.	25,000.	APPRAISAL	DONATION OF 0.5 ACRES EASEMENT	LAND CONSERVATION
CITY OF COLLEGE PARK 3667 MAIN ST COLLEGE PARK, GA 30337		GOVT	0.	451,000.	APPRAISAL	BARGAIN SALE OF 8.65 ACRES OF LAND	LAND CONSERVATION
CITY OF L.A. RECREATION & PARKS DEPT. - 221 N. FIGUEROA ST, SUITE 1550 - LOS ANGELES, CA 90012		GOVT	0.	5,979,424.	APPRAISAL	BARGAIN SALE OF 122 ACRES OF LAND	LAND CONSERVATION
CITY OF MAYWOOD 4319 EAST SLAUSON AVE MAYWOOD, CA 90270		GOVT	0.	175,000.	APPRAISAL	DONATION OF 0.2 ACRES OF LAND	LAND CONSERVATION
CITY OF ORMOND BEACH 22 SOUTH BEACH ST. ORMOND BEACH, FL 32174		GOVT	0.	410,000.	APPRAISAL	BARGAIN SALE OF 4.07 ACRES OF LAND	LAND CONSERVATION
CITY OF SANTA FE 200 LINCOLN AVE SANTA FE, NM 87501		GOVT	0.	1,500,000.	APPRAISAL	DONATION OF 11.11 ACRES OF LAND	LAND CONSERVATION
CITY OF WINTER GARDEN 300 W. PLANT ST WINTER GARDEN, FL 34787		GOVT	0.	1,300,000.	APPRAISAL	BARGAIN SALE OF 208.56 ACRES OF LAND	LAND CONSERVATION

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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
COMMONWEALTH OF PUERTO RICO, DEPT. OF NATURAL & ENVIRO. RESOURCES - POB 366147 - SAN JUAN, PR 00936-6147		GOVT	0.	4,500,000.	APPRAISAL	BARGAIN SALE OF 113.91 ACRES OF LAND	LAND CONSERVATION
COUNTY OF ANOKA 2100 3RD AVE ANOKA, MN 55303		GOVT	0.	652,000.	APPRAISAL	BARGAIN SALE OF 378 ACRES OF LAND	LAND CONSERVATION
COUNTY OF GALVESTON, PARKS & SENIOR SERVICES DEPT - 4102 MAIN (FM 519) - LA MARQUE, TX 77568		GOVT	0.	617,123.	APPRAISAL	BARGAIN SALE OF 86.9 ACRES OF LAND	LAND CONSERVATION
GA DEPT. OF NATURAL RESOURCES 2 MARTIN LUTHER KING DR SE, STE 125 ATLANTA, GA 30334		GOVT	0.	281,500.	APPRAISAL	DONATION OF 1.28 ACRES OF LAND	LAND CONSERVATION
GA DEPT. OF NATURAL RESOURCES 2 MARTIN LUTHER KING DR SE, STE 125 ATLANTA, GA 30334		GOVT	0.	22,000.	APPRAISAL	DONATION OF 0.28 ACRES OF LAND	LAND CONSERVATION
GORDON COUNTY 201 NORTH WALL ST CALHOUN, GA 30701		GOVT	0.	100,000.	APPRAISAL	BARGAIN SALE OF 473.48 ACRES EASEMENT	LAND CONSERVATION
MA DEPT. OF AGRICULTURAL RESOURCES & TOWN OF IPSWICH - 251 CAUSEWAY ST, SUITE 500 - BOSTON, MA 02214		GOVT	0.	500,000.	APPRAISAL	BARGAIN SALE OF 101.559 ACRES EASEMENT	LAND CONSERVATION
METRO PARKS SERVING SUMMIT COUNTY 975 TREATY LINE ROAD AKRON, OH 44313-5898		GOVT	0.	46,420.	APPRAISAL	BARGAIN SALE OF 69.48 ACRES OF LAND	LAND CONSERVATION
METRO PARKS SERVING SUMMIT COUNTY 975 TREATY LINE ROAD AKRON, OH 44313		GOVT	0.	10,000.	APPRAISAL	BARGAIN SALE OF 66.5 ACRES OF LAND	LAND CONSERVATION

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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
MN DEPT. OF NATURAL RESOURCES 500 LAFAYETTE ROAD, BOX 25 ST. PAUL, MN 55155-4025		GOVT	0.	2,542,000.	APPRAISAL	BARGAIN SALE OF 69 ACRES OF LAND	LAND CONSERVATION
MN DEPT. OF NATURAL RESOURCES 500 LAFAYETTE ROAD, BOX 45 ST. PAUL, MN 55155		GOVT	0.	765,000.	APPRAISAL	BARGAIN SALE OF 241.43 ACRES OF LAND	LAND CONSERVATION
MORRIS COUNTY PARKS COMMISSION 53 EAST HANOVER AVE MORRISTOWN, NJ 07962		GOVT	0.	1,095,000.	APPRAISAL	BARGAIN SALE OF 60.97 ACRES OF LAND	LAND CONSERVATION
NPS 222 MERRIMACK ST, 4TH FL LOWELL, MA 01982		GOVT	0.	350,000.	APPRAISAL	BARGAIN SALE OF 10 ACRES OF LAND	LAND CONSERVATION
OHIO DEPT OF NATURAL RESOURCES 2045 MORSE ROAD D-4 COLUMBUS, OH 43329		GOVT	0.	135,000.	APPRAISAL	BARGAIN SALE OF 523.4 ACRES OF LAND	LAND CONSERVATION
STARK COUNTY PARK DISTRICT 5300 TYNER AVE NE CANTON, OH 44708		GOVT	0.	390,000.	APPRAISAL	BARGAIN SALE OF 108.47 ACRES OF LAND	LAND CONSERVATION
STATE OF GEORGIA DEPT OF NATURAL RESOURCES - 2 MLK JR DRIVE SE SUITE 1454 EAST - ATLANTA, GA 30334		GOVT	0.	293,000.	APPRAISAL	BARGAIN SALE OF 36.68 ACRES OF LAND	LAND CONSERVATION
STATE OF NJ & BOROUGH OF ALLENTOWN 401 E. STATE ST / 8 N. MAIN ST TRENTON / ALLENTOWN, NJ 08625/0850		GOVT	0.	81,129.	APPRAISAL	BARGAIN SALE OF 46.09 ACRES OF LAND	LAND CONSERVATION
STATE OF UTAH DEPT OF NATURAL RESOURCES - 1595 WEST NORTH TEMPLE, SUITE 3520 - SALT LAKE CITY, UT 84116		GOVT	0.	1,112,504.	APPRAISAL	BARGAIN SALE OF 2590.68 ACRES EASEMENT	LAND CONSERVATION

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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 UTAH DEPT OF NATURAL RESOURCES - 1594 WEST NORTH TEMPLE, SUITE 3520 - SALT LAKE CITY, UT 84116		GOVT	0.	142,497.	APPRAISAL	BARGAIN SALE OF 20.76 ACRES EASEMENT	LAND CONSERVATION
TOWN OF BAYVIEW 32800 BURLAGER ROAD WASHBURN, WI 54891		GOVT	0.	1,166,500.	APPRAISAL	BARGAIN SALE OF 76.35 ACRES OF LAND	LAND CONSERVATION
TOWN OF CRESTED BUTTE POB 29 CRESTED BUTTE, CO 81224		GOVT	0.	2,590,000.	APPRAISAL	BARGAIN SALE OF 166.65 ACRES OF LAND	LAND CONSERVATION
TOWN OF CRESTED BUTTE POB 29 CRESTED BUTTE, CO 81224		GOVT	0.	5,000.	APPRAISAL	BARGAIN SALE OF 107 ACRES OF LAND	LAND CONSERVATION
US DEPT. OF INTERIOR, BLM POB 1828 CHEYENNE, WY 82003-1828		GOVT	0.	1,425,000.	APPRAISAL	BARGAIN SALE OF 2969.04 ACRES OF LAND	LAND CONSERVATION
USDA FOREST SERVICE POB 130 BOZEMAN, MT 59771		GOVT	0.	456,000.	APPRAISAL	BARGAIN SALE OF 666.55 ACRES OF LAND	LAND CONSERVATION
USFWS 1875 CENTURY BLVD ATLANTA, GA 30345		GOVT	0.	31,550.	APPRAISAL	BARGAIN SALE OF 325.01 ACRES OF LAND	LAND CONSERVATION
WA STATE PARKS & RECREATION COMMISSION - 1111 ISRAEL ROAD, SW - TUMWATER, WA 98504-2650		GOVT	0.	1,150,000.	APPRAISAL	BARGAIN SALE OF 96 ACRES OF LAND	LAND CONSERVATION
BLACK SWAMP CONSERVANCY 132 W. SECOND ST PERRYSBURG, OH 43551-7632	34-1746749	501(C)(3)	0.	300,000.	APPRAISAL	BARGAIN SALE OF 7.82 ACRES OF LAND	LAND CONSERVATION

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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 CATTLEMAN'S AGRIC. LAND TRUST - 8833 RALSTON ROAD - ARVADA, CO 80002	84-1317592	501(C)(3)	0.	1,690,000.	APPRAISAL	DONATION OF 235.1 ACRES EASEMENT	LAND CONSERVATION
COLORADO CATTLEMAN'S AGRIC. LAND TRUST - 8833 RALSTON ROAD - ARVADA, CO 80002	84-1317592	501(C)(3)	0.	1,500,000.	APPRAISAL	DONATION OF 472 ACRES EASEMENT	LAND CONSERVATION
MADISON LAND CONSERVATION TRUST POB 561 MADISON, CT 06443	06-6070866	501(C)(3)	0.	647,000.	APPRAISAL	BARGAIN SALE OF 79.49 ACRES OF LAND	LAND CONSERVATION
MAINE FARMLAND TRUST 97 MAIN ST BELFAST, ME 04915	01-0528014	501(C)(3)	0.	85,000.	APPRAISAL	BARGAIN SALE OF 217 ACRES OF LAND	LAND CONSERVATION
MT LAND RELIANCE POB 355 HELENA, MT 59644	84-1317592	501(C)(3)	0.	604,000.	APPRAISAL	DONATION OF 794 ACRES EASEMENT	LAND CONSERVATION
NORTH CUYAHOGA VALLEY CORRIDOR, INC. - POB 609420 - CLEVELAND, OH 44109	34-1470989	501(C)(3)	0.	1,600,000.	APPRAISAL	BARGAIN SALE OF 4.18 ACRES OF LAND	LAND CONSERVATION
NORTH CUYAHOGA VALLEY CORRIDOR, INC. - POB 609420 - CLEVELAND, OH 44109	34-1470989	501(C)(3)	0.	955,000.	APPRAISAL	BARGAIN SALE OF 4.76 ACRES OF LAND	LAND CONSERVATION
RIDGE & VALLEY CONSERVANCY, INC. POB 146 BLAIRSTOWN, NJ 07825	22-3181864	501(C)(3)	0.	112,500.	APPRAISAL	BARGAIN SALE OF 133.7 ACRES OF LAND	LAND CONSERVATION
SHASTA LAND TRUST 1918 WEST ST, STE D REDDING, CA 96099	68-0441184	501(C)(3)	0.	41,000.	APPRAISAL	BARGAIN SALE OF 5082 ACRES EASEMENT	LAND CONSERVATION

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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.)

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SIERRA COUNTY LAND TRUST POB 404, 310 NEVADA ST SIERRA CITY, CA 95959	20-5923109	501(C)(3)	0.	465,000.	APPRAISAL	DONATION OF 160 ACRES OF LAND	LAND CONSERVATION
THE LAND CONSERVANCY OF NEW JERSEY 19 BOONTON AVE BOONTON, NJ 07005	22-2378868	501(C)(3)	0.	2,011,000.	APPRAISAL	BARGAIN SALE OF 136.46 ACRES OF LAND	LAND CONSERVATION
TRUCKEE DONNER LAND TRUST POB 8816 TRUCKEE, CA 96162	68-0245327	501(C)(3)	0.	1,815,000.	APPRAISAL	DONATION OF 1181.27 ACRES EASEMENT	LAND CONSERVATION
TRUCKEE DONNER LAND TRUST POB 8816 TRUCKEE, CA 96162	68-0245327	501(C)(3)	0.	19,000.	APPRAISAL	BARGAIN SALE OF 3183.56 ACRES EASEMENT	LAND CONSERVATION
TOWN OF MADISON 8 CAMPUS DR. MADISON, CT 06443		GOVT	1,704,000.	0.			GRISWOLD AIRPORT
VIRGINIA DEPARTMENT OF GAME & INLAND FISHERIES - 4010 WEST BROAD ST. - RICHMOND, VA 23203		GOVT	1,479,645.	0.			FLORIDA ROCK
PLACER COUNTY 175 FULWEILER AVE # 206 AUBURN, CA 95603		GOVT	220,000.	0.			WADDLE RANCH
CITY OF CHATTANOOGA ADMIN, SUITE 216, CITY HALL CHATTANOOGA, TN 37405		GOVT	200,000.	0.			BRENTWOOD FND PASS THROUGH GRANT
STATE OF WASHINGTON, DEPT. FISH & WILDLIFE - 1111 WASHINGTON ST., SE - OLYMPIA, WA 98501		GOVT	190,000.	0.			GRANT TOWARDS PURCHASED PRICE OF DAGNON RANCH

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Schedule I (Form 990)

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(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 ALBUQUERQUE 1 CIVIC PLAZA NW, 9TH FLOOR ALBUQUERQUE, NM 87102		GOVT	100,000.	0.			WEST TIJERAS CANYON
BEAUFORT COUNTY PO DRAWER 1228 BEAUFORT, SC 29901		GOVT	75,000.	0.			RURAL & CRITICAL LANDS CONTRACT
THE TOWN OF HOLLIS 34 TOWN FARM ROAD HOLLIS, ME 04042		GOVT	50,000.	0.			GRANT TO SUPPORT SACORIVER INDIAN CELLAR
CITY OF PORTLAND, MAINE 389 CONGRESS ST. PORTLAND, ME 04101		GOVT	30,000.	0.			MATCH TO EPA GRANT
CITY OF TIGARD 13125 SW HALL BLVD. TIGARD, OR 97223		GOVT	30,000.	0.			ENVIRONMENTAL EDUCATION
THE BOROUGH OF ALLENTOWN 98 NORTH MAIN ST. ALLENTOWN, NJ 08501		GOVT	10,000.	0.			VANCLEEF PHASE II
AUDUBON SOCIETY OF PORTLAND 5151 NW CORNELL RD. PORTLAND, OR 97210	93-6026088	501C(3)	6,000.	0.			SPONSORSHIP OF THE INTERTWINE ALLIANCE
BLACK SWAMP CONSERVANCY 132 W. SECOND ST. PERRYSBURG, OH 43551	34-1746749	501C(3)	7,000.	0.			MIDDLE BASS ISLAND PRESERVE
BROOKLYN QUEENS LAND TRUST 677 LAFAYETTE AVE. BROOKLYN, NY 11216	61-1441052	501C(3)	25,000.	0.			START UP GRANT

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CALIFORNIA CONSERVATION TRUST 101 MONTGOMERY ST., 9TH FLOOR SAN FRANCISCO, CA 94104	32-0151535	501C(3)	10,000.	0.			OPERATING GRANT
CHELAN-DOUGLAS LAND TRUST P.O. BOX 4461 WENATCHEE, WA 98807	91-1331348	501C(3)	37,000.	0.			STEWARDSHIP ENDOWMENT/CAPITAL CAMPAIGN
COLORADO CATTLEMEN'S AGRICULTURAL LAND TRUST - 8833 RALSTON ROAD - ARVADA, CO 80002	84-1317592	501C(3)	31,000.	0.			STEWARDSHIP GRANT
CONSERVATION BIOLOGY INSTITUTE 136 SW WASHINGTON AVE., SUITE 202 CORVALLIS, OR 97333	91-1840582	501C(3)	119,926.	0.			SUB-GRANTEE US ENDOWMENT
DEFENDERS OF WILDLIFE 1130 17TH ST., NW WASHINGTON, DC 20036	53-0183181	501C(3)	65,675.	0.			SUB-GRANTEE US ENDOWMENT
DUCKS UNLIMITED, INC. 1 WATERFOWL WAY MEMPHIS, TN 38120	13-5643799	501C(3)	137,232.	0.			SUB-GRANTEE US ENDOWMENT
ESSEX COUNTY GREENBELT ASSOCIATION 82 EASTERN AVE. ESSEX, MA 01929	04-2664297	501C(3)	20,000.	0.			STEWARDSHIP GRANT
FOREST SOCIETY OF MAINE 115 FRANKLIN ST., 3RD FLR. BANGOR, ME 04401	02-0413555	501C(3)	17,500.	0.			ENDOWMENT GRANT
GROW FOOD NORTHAMPTON, INC. PO BOX 849 NORTHAMPTON, MA 01061	01-0959428	501C(3)	50,000.	0.			ALLARD FARM

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LAND TRUST ALLIANCE 1660 L ST., N.W., SUITE 1100 WASHINGTON, DC 20036	04-2751357	501C(3)	13,600.	0.			PROJECT AND OPERATING SUPPORT
MADISON LAND CONSERVATION TRUST PO BOX 561 MADISON, CT 06443	06-6070866	501C(3)	25,000.	0.			SUMMER HILL
MAINE ASSOCIATION OF CONSERVATION COMMISSIONS - 451 BLACKSTRAP RD. - FALMOUTH, ME 04105	01-6035847	501C(3)	10,000.	0.			CONTRIBUTION TO THE CONSERVATION RESOURCE ADVISORY PROGRAM
MILL RIVER COLLABORATIVE, LLC 888 WASHINGTON BLVD. STANFORD, CT 06904	06-1507648	501C(3)	50,000.	0.			PROJECT GRANTS PER DONORS INSTRUCTION/MILL RIVER
MONTANA LAND TRUST RELIANCE P.O. BOX 355 HELENA, MT 59624	81-0369262	501C(3)	10,000.	0.			STEWARDSHIP GRANT/BOLTZ PROPERTY
NATURESERVE 1101 WILSON BLVD., 15TH FL ARLINGTON, VA 22299	52-1884438	501C(3)	122,061.	0.			SUB-GRANTEE US ENDOWMENT
NORTH CUYAHOGA VALLEY CORRIDOR, INC. - PO BOX 609420 - CLEVELAND, OH 44109	34-1470989	501C(3)	112,843.	0.			CANAL BASIN FERCHILL
OPENLANDS 25 E. WASHINGTON ST., STE. 650 CHICAGO, IL 60602	36-2649603	501C(3)	18,750.	0.			HACKMATAACK/DONNELLEY FOUNDATION GRANT FUNDING
PARK PRIDE ATLANTA, INC. 233 PEACHTREE ST., STE. 1600 ATLANTA, GA 30303	58-1883895	501C(3)	100,000.	0.			DEVELOPMENT OF CITY PARK AND PLAYGROUND

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PLACER LAND TRUST 11661 BLOCKER DR., STE. 110 AUBURN, CA 95603	68-0223143	501C(3)	524,898.	0.			GENERAL SUPPORT - BRUIN RANCH AND NEARBY LANDS
RIDGE & VALLEY CONSERVANCY, INC. PO BOX 1468 BLAIRSTON, NJ 07825	22-3181864	501C(3)	10,000.	0.			GNOME HOLLOW - KID'S CAMP
RIVER NETWORK 520 SW 6TH AVE., SUITE 1130 PORTLAND, OR 97204	93-0969979	501C(3)	9,050.	0.			GENERAL SUPPORT
SHASTA LAND TRUST 1918 WEST ST., STE. D REDDING, CA 96099	68-0441184	501C(3)	184,468.	0.			COW CREEK - RICKART RANCH
SIERRA COUNTY LAND TRUST 310 NEVADA ST., PO BOX 404 SIERRA CITY, CA 95959	20-5923109	501C(3)	10,000.	0.			SIERRA BUTTES - ANDERSON
SIERRA FOOTHILL CONSERVANCY PO BOX 529 PRATHER, CA 93651	93-6301478	501C(3)	129,314.	0.			ENDOWMENT GRANT
SOUTHEAST ALASKA LAND TRUST 119 SEWARD, STE 15 JUNEAU, AK 99801	92-0156402	501C(3)	22,000.	0.			SHELDON JACKSON PROJECT OPERATING FUNDS
THE CONSERVATION CAMPAIGN 33 UNION ST FL 4 BOSTON, MA 02108	04-3515341	501C(4)	332,525.	0.			GENERAL OPERATING SUPPORT - LOBBYING
THE NATURE CONSERVANCY 4245 N. FAIRFAX DR., STE. 100 ARLINGTON, VA 22203	53-0242652	501C(3)	1,248,665.	0.			MONTANA LEGACY AND DUKE

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THE NATURE CONSERVANCY - MONTANA 32 S. EWING ST. HELENA, MT 59601	53-0242652	501C(3)	1,000,501.	0.			MONTANA LEGACY PROJECT
THE OPEN SPACE COUNCIL PO BOX 1468 BALLWIN, MO 63022	43-6065329	501C(3)	9,000.	0.			MERAMEC RIVER LAND PROTECTION PLAN
TRUCKEE DONNER LAND TRUST PO BOX 8816 TRUCKEE, CA 96162	68-0245327	501C(3)	237,681.	0.			SIERRA PROJECT SUPPORT
NPS POB 710 ST JOHN, VI 00831		GOVT	0.	2,200,000.	APPRAISAL	DONATION OF 2.21 ACRES OF LAND	LAND CONSERVATION
NPS POB 710 ST JOHN, VI 00831		GOVT	0.	1,761,000.	APPRAISAL	BARGAIN SALE OF 48.68 ACRES OF LAND	LAND CONSERVATION

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: GRANTEES ADHERE TO MONITORING AND REPORTING REQUIREMENTS ASSOCIATED WITH GRANTS FROM THE TRUST FOR PUBLIC LAND.

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**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

Open to Public Inspection

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input 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)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input 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)									
<p><b>b</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 .....</p>	<b>1b</b>									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....</p>	<b>2</b>									
<p><b>3</b> Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" 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				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" 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									
<p><b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p><b>a</b> Receive a severance payment or change-of-control payment from the organization or a related organization? .....</p>	<b>4a</b>	X								
<p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....</p>	<b>4b</b>	X								
<p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	<b>4c</b>	X								
<p><b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b></p>										
<p><b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p><b>a</b> The organization? .....</p>	<b>5a</b>	X								
<p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>	<b>5b</b>	X								
<p><b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization? .....</p>	<b>6a</b>	X								
<p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>	<b>6b</b>	X								
<p><b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....</p>	<b>7</b>	X								
<p><b>8</b> Were any amounts reported in 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 .....</p>	<b>8</b>	X								
<p><b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....</p>	<b>9</b>									

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

Schedule J (Form 990) 2010



**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 in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(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 reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 WILLIAM ROGERS	(i)	271,890.	0.	0.	5,832.	21,845.	299,567.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 NELSON LEE	(i)	164,188.	0.	0.	3,459.	21,926.	189,573.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 CYNTHIA SCHERER	(i)	169,882.	0.	0.	3,554.	18,806.	192,242.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 ERNEST COOK	(i)	162,162.	10,000.	0.	3,417.	21,926.	197,505.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 JAY DEAN	(i)	162,362.	10,000.	0.	0.	15,830.	188,192.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 ROGER HOESTEREY	(i)	162,582.	0.	0.	3,367.	21,926.	187,875.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 ROBERT MCCLYMONDS	(i)	150,666.	0.	0.	3,056.	204.	153,926.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 MARGIE BERMEO	(i)	184,159.	0.	0.	0.	18,724.	202,883.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 CYNTHIA WHITEFORD	(i)	157,736.	0.	0.	3,301.	15,748.	176,785.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 GREGORY CHELIUS	(i)	140,411.	0.	0.	2,870.	8,509.	151,790.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 TILY SHUE	(i)	133,999.	0.	0.	2,856.	15,830.	152,685.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 KATHY DECOSTER	(i)	128,854.	0.	0.	2,679.	21,926.	153,459.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 DON MORROW	(i)	131,884.	0.	0.	2,392.	21,926.	156,202.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2010**

**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.**

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		3,990,656.	ACTIVELY TRADED
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....	X		18,484,036.	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**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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) (2010)

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): THE NUMBER OF CONTRIBUTORS IS THE NUMBER OF INDIVIDUALS CONTRIBUTING NON-CASH CONTRIBUTIONS, NOT THE NUMBER OF TRANSACTIONS.

Multiple horizontal lines for supplemental information.

**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.

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WHICH WERE CREATED TO SERVE THE PUBLIC'S NEED FOR OPEN SPACE

PRESERVATION IN METROPOLITAN, RURAL AND NATURAL AREAS. THE TRUST'S

PRINCIPAL OBJECTIVE IS TO FACILITATE THE TRANSFER OF PRIVATELY HELD

LAND INTO PROTECTIVE PUBLIC AND NOT-FOR-PROFIT OWNERSHIP.

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

OTHER PROGRAM SERVICES INCLUDE MISCELLANEOUS TECHNICAL SERVICES,

REIMBURSEMENTS, AND ROYALTIES ON CONSERVATION PUBLICATIONS.

EXPENSES \$ 2,368,306. INCLUDING GRANTS OF \$ 16,304. REVENUE \$ 421,963.

FORM 990, PART VI, SECTION B, LINE 11: THE DRAFT 990 IS INITIALLY REVIEWED  
BY THE ORGANIZATION'S CFO AND TREASURER, CONTROLLER AND GENERAL COUNSEL.

AFTER ANY CLARIFICATIONS OR QUESTIONS ARE RESOLVED THE DRAFT 990 IS THEN  
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 AND CLEAR WRITTEN CONFLICT OF INTEREST POLICY THAT REQUIRES  
POTENTIAL CONFLICTS OF INTEREST TO BE BROUGHT TO THE ATTENTION OF THE  
GENERAL COUNSEL, AND, IF NECESSARY, TO BE REVIEWED BY ONE OF TWO INTERNAL  
COMMITTEES HAVING RESPONSIBILITY OVER CONFLICT OF INTEREST ISSUES. THIS  
POLICY IS PROVIDED TO ALL STAFF, AND REMINDERS OF THE POLICY ARE ISSUED

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

PERIODICALLY. THE CONFLICT OF INTEREST POLICY IS DISCUSSED IN ORIENTATION MEETINGS WITH NEW STAFF, 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 EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS OR THE TRANSACTIONS COMMITTEE FOR THE APPROVAL OF CONSERVATION REAL ESTATE TRANSACTIONS. THE POLICY IS PROVIDED TO ALL BOARD MEMBERS, AND IS ADDRESSED SPECIFICALLY IN ORIENTATION MEETINGS WITH NEW BOARD MEMBERS. ONCE A YEAR ALL BOARD MEMBERS ARE POLLED ABOUT TRANSACTIONS AND ARRANGEMENTS WITH THE ORGANIZATION AND OTHER PARTIES. AWARENESS OF THE POLICY IS HIGH, AS EVIDENCED BY QUESTIONS PRESENTED TO THE OFFICE OF GENERAL COUNSEL. MOST POTENTIAL CONFLICTS ARE REVIEWED BY A CONFLICT COMMITTEE, A COMMITTEE OF SENIOR STAFF MEMBERS, WHICH MEETS WHENEVER A POTENTIAL CONFLICT ARISES.

FORM 990, PART VI, SECTION B, LINE 15: BENEFITS ARE FURNISHED BASED UPON ESTABLISHED POLICY AND ARE STANDARD FOR ALL EMPLOYEES. COMPENSATION IS BASED UPON POSITION RANGES UPDATED ANNUALLY WITH MARKET DATA. A DETAILED AND COMPREHENSIVE COMPENSATION STUDY WAS COMPLETED IN JANUARY 2008 BY AN OUTSIDE CONSULTANT. ANNUALLY, COMPENSATION FOR OFFICERS AND KEY EMPLOYEES ARE REVIEWED FOR COMPARABILITY WITH OTHER SIMILAR NON-PROFIT ORGANIZATIONS.

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

FORM 990, PART VI, SECTION C, LINE 19: ANNUAL AUDITED FINANCIAL STATEMENTS ARE POSTED ON THE TRUST FOR PUBLIC LAND'S WEBSITE. ARTICLES OF

Name of the organization <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number <b>23-7222333</b>
--------------------------------------------------------------	-----------------------------------------------------

INCORPORATION ARE AVAILABLE ON THE CALIFORNIA SECRETARY OF STATE WEBSITE.  
 BOTH ARE ALSO MADE AVAILABLE UPON REQUEST. THE CONFLICT OF INTEREST POLICY  
 IS NOT MADE AVAILABLE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:	236,062.
IMPAIRMENT LOSS	-2,928,903.
CHANGE IN VALUE OF SPLIT INTEREST	1,219,397.
INVESTMENT IN AFFILIATES AND OTHER ADJUSTMENTS	-32,526.
TOTAL TO FORM 990, PART XI, LINE 5	-1,505,970.

FORM 990, PART XII, LINE 2C

THE ROLE OF THE AUDIT COMMITTEE

THE ROLE AND PROCESS OF THE AUDIT COMMITTEE HAVE NOT CHANGED FROM THE  
 PRIOR YEAR.

**Related Organizations and Unrelated Partnerships**

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

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" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN 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" to 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
CALIFORNIA CONSERVATION TRUST - 32-0151535 101 MONTGOMERY STREET, STE 900 SAN FRANCISCO, CA 94104	TO SUPPORT THE TRUST FOR PUBLIC LAND	CALIFORNIA	501(C)(3)	11A, TYPE I			X
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			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)				X
TPL-MISSISSIPPI - 94-2526746 101 MONTGOMERY STREET, STE 900 SAN FRANCISCO, CA 94104	TO SUPPORT THE TRUST FOR PUBLIC LAND	MISSISSIPPI	501(C)(3)	11A, TYPE I			X





**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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) Disproportion- ate 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" to 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

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

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

**1** 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?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to other organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from other organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for other organization(s) .....		X
<b>e</b> Loans or loan guarantees by other organization(s) .....		X
<b>f</b> Sale of assets to other organization(s) .....		X
<b>g</b> Purchase of assets from other organization(s) .....		X
<b>h</b> Exchange of assets .....		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s) .....		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s) .....		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets .....	X	
<b>n</b> Sharing of paid employees .....	X	
<b>o</b> Reimbursement paid to other organization for expenses .....		X
<b>p</b> Reimbursement paid by other organization for expenses .....		X
<b>q</b> Other transfer of cash or property to other organization(s) .....		X
<b>r</b> Other transfer of cash or property from other 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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
<b>(1) THE CONSERVATION CAMPAIGN</b>	B	332,525.	
<b>(2)</b>			
<b>(3)</b>			
<b>(4)</b>			
<b>(5)</b>			
<b>(6)</b>			



**Part VII** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Multiple horizontal lines for supplemental information.



**Depreciation and Amortization** 990  
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

**2010**

Attachment  
 Sequence No. 67

THE TRUST FOR PUBLIC LAND

FORM 990 PAGE 10

Identifying number  
 23-7222333

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

**Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

**Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year	/	40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	0.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use..... <b>25</b>								
<b>26</b> Property used more than 50% in a qualified business use:								
	:	:	%					
	:	:	%					
	:	:	%					
<b>27</b> Property used 50% or less in a qualified business use:								
	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....								<b>28</b>
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....								<b>29</b>

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles) .....												
<b>31</b> Total commuting miles driven during the year .....												
<b>32</b> Total other personal (noncommuting) miles driven.....												
<b>33</b> Total miles driven during the year. Add lines 30 through 32 .....												
<b>34</b> Was the vehicle available for personal use during off-duty hours? .....												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? .....												
<b>36</b> Is another vehicle available for personal use? .....												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....		
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
<b>39</b> Do you treat all use of vehicles by employees as personal use? .....		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2010 tax year:					
	:	:			
	:	:			
<b>43</b> Amortization of costs that began before your 2010 tax year .....					<b>43</b>
<b>44 Total.</b> Add amounts in column (f). See the instructions for where to report .....					<b>44</b>