

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE TRUST FOR PUBLIC LAND		D Employer identification number 23-7222333
	Doing business as		E Telephone number 415-495-4014
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 187,847,749.
	101 MONTGOMERY STREET		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94104		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: DIANE C REGAS SAME AS C ABOVE			H(c) Group exemption number ▶
I 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			
J Website: ▶ WWW.TPL.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1972 M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CREATES PARKS AND PROTECTS LAND FOR PEOPLE, ENSURING HEALTHY, LIVABLE COMMUNITIES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	367
	6 Total number of volunteers (estimate if necessary)	6	359
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	98,453,912.	110,279,044.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	39,782,033.	30,267,792.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,255,351.	2,924,038.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-194,686.	1,001,937.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	141,296,610.	144,472,811.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	58,256,249.	37,896,333.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	36,581,282.	38,288,514.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 13,378,761.	960,014.	1,149,361.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	55,145,752.	40,265,432.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	150,943,297.	117,599,640.
19 Revenue less expenses. Subtract line 18 from line 12	-9,646,687.	26,873,171.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	232,386,284.	286,454,400.
	22 Net assets or fund balances. Subtract line 21 from line 20	98,961,095.	116,592,872.
		133,425,189.	169,861,528.

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.

Sign Here	Signature of officer		Date		
	▶ JAMES H OBENDORF, CHIEF FINANCIAL ADMIN OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	MAGA E. KISRIV				P01008919
Firm's name ▶ HOOD & STRONG LLP			Firm's EIN ▶ 94-1254756		
Firm's address ▶ 275 BATTERY STREET, STE 900 SAN FRANCISCO, CA 94111			Phone no. 415.781.0793		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

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

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

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

MICHELLE PANDORI

- The books are in the care of ▶ **101 MONTGOMERY STREET, STE 900 - SAN FRANCISCO, CA 94104**
Telephone No. ▶ **415-495-4014** Fax No. ▶ **415-495-4103**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 16, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**.

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

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

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

Part III Statement of Program Service Accomplishments

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

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

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

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

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

4a (Code:) (Expenses \$ 55,590,608. including grants of \$ 37,456,451.) (Revenue \$ 15,451,081.) PROTECT - WE COMPLETED 56 CONSERVATION TRANSACTIONS THAT PROTECTED 76,136 ACRES FOR RECREATION, TO PROTECT DRINKING WATER, AND TO PRESERVE CRITICALLY IMPORTANT WILDLIFE HABITAT.

4b (Code:) (Expenses \$ 28,195,704. including grants of \$ 237,481.) (Revenue \$ 13,618,767.) CREATE - WE COMPLETED 16 PROJECTS, INCLUDING 12 NEW PLAYGROUNDS AND 2 FITNESS ZONES.

4c (Code:) (Expenses \$ 2,720,905. including grants of \$ 28,750.) (Revenue \$ 619,781.) PLAN - WE COMPLETED 7 PROJECTS TO HELP AGENCIES AND COMMUNITIES DEFINE CONSERVATION PRIORITIES, IDENTIFY LANDS TO BE PROTECTED, AND PLAN AND DESIGN PARKS AND NATRUAL SPACES.

4d Other program services (Describe on Schedule O.) (Expenses \$ 2,387,551. including grants of \$ 173,651.) (Revenue \$ 578,163.)

4e Total program service expenses 88,894,768.

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 <i>Schedule B, Schedule of Contributors</i> ?	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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
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, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in 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 and XII</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 and XII 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <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 other assistance to or for foreign individuals? <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 hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30 X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36 X	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 345	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		367
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year		10
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	X	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 27; 1b Enter the number of voting members included on line 1a... 26; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records MICHELLE PANDORI - 415-495-4014 101 MONTGOMERY STREET, STE 900, SAN FRANCISCO, CA 94104

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DIANE C REGAS PRESIDENT	38.00 2.00	X		X				475,971.	0.	22,714.
(2) LING I THOMPSON SVP, CHIEF COMM & MARKETING OFFICER	40.00 0.00					X		282,800.	0.	32,163.
(3) JAMES H OBENDORF SVP/CHIEF FINANCIAL & ADMIN OFFICER	38.00 2.00			X				276,744.	0.	33,015.
(4) KENNETH J DANTER SVP, FIELD PROGRAMS	40.00 0.00					X		248,116.	0.	40,608.
(5) ADRIAN BENEPE SVP, NATIONAL PRGRMS (THRU 10/13/20)	40.00 0.00					X		251,226.	0.	27,661.
(6) WILLIAM LEE SVP, POLICY, ADV, & GOVT RELATIONS	38.00 2.00					X		235,524.	0.	40,042.
(7) DAVID M CARSON SVP, GENERAL COUNSEL/CORP SECRETARY	40.00 0.00			X				213,352.	0.	25,113.
(8) PATRICIA WATSON SVP/CHIEF PHILANTHROPY OFFICER	40.00 0.00					X		223,438.	0.	13,052.
(9) KATHERINE M PANDORI VP, DIR OF FINANCE & ACCOUNTING	38.00 2.00			X				207,174.	0.	17,110.
(10) CARTER STRICKLAND ASSISTANT SECRETARY	40.00 0.00			X				184,781.	0.	34,503.
(11) TILY SHUE ASSISTANT SECRETARY	40.00 0.00			X				185,406.	0.	25,855.
(12) MARGARET MADDEN VP, ASSOCIATE GENERAL COUNSEL	40.00 0.00			X				186,822.	0.	19,387.
(13) THOMAS TYNER ASSISTANT SECRETARY	40.00 0.00			X				174,848.	0.	24,618.
(14) PETE FODOR ASSISTANT SECRETARY	40.00 0.00			X				165,277.	0.	26,251.
(15) DENISE MULLANE ASSISTANT SECRETARY	40.00 0.00			X				160,019.	0.	23,524.
(16) SUSAN SCHMIDT ASSISTANT SECRETARY	40.00 0.00			X				144,955.	0.	35,218.
(17) ANTHONY A. TRAVERSO ASSISTANT SECRETARY	40.00 0.00			X				158,951.	0.	17,733.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GILMAN MILLER ASSISTANT SECRETARY	40.00 0.00			X				146,733.	0.	29,086.
(19) PEGGY CHIU ASSISTANT SECRETARY	38.00 2.00			X				136,383.	0.	32,591.
(20) J. ALEX GHIO ASSISTANT SECRETARY	40.00 0.00			X				136,093.	0.	7,400.
(21) JANE KIM ASSISTANT SECRETARY	40.00 0.00			X				122,296.	0.	20,796.
(22) STACY GAYHART ASSISTANT SECRETARY	40.00 0.00			X				84,352.	0.	21,224.
(23) MIMI FALLER HELVIE ASSISTANT SECRETARY	40.00 0.00			X				83,823.	0.	10,086.
(24) CECILIA BLAKE ASSISTANT SECRETARY	38.00 2.00			X				81,722.	0.	8,590.
(25) TOM REEVE CHAIR	1.00 1.00	X		X				0.	0.	0.
(26) WHITNEY HATCH VICE CHAIR	1.00 1.00	X		X				0.	0.	0.
1b Subtotal								4,566,806.	0.	588,340.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								4,566,806.	0.	588,340.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **104**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
FLANAGAN'S CONTRACTING GROUP, INC., 1932 1ST AVE SUITE 700, HILLSBOROUGH, NJ 08844	CONSTRUCTION SERVICES	6,357,575.
MSM EMPIRE CONSTRUCTION 260 BROADWAY, GARDEN CITY PARK, NY 11040	CONSTRUCTION SERVICES	3,610,001.
GUSTAFSON GUTHRIE 1586 SEVEN BRIDGES RD, SEATTLE, WA 98101	CONSTRUCTION SERVICES	3,263,369.
ASTRA GROUP, INC. 300 CHURCHILL COURT, WOODSTOCK, GA 30308	CONSTRUCTION SERVICES	2,134,150.
TWO OCEAN BUILDERS P.O. BOX 11424, JACKSON, WY 83002	CONSTRUCTION SERVICES	1,870,950.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **56**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JODY GILL SECRETARY	1.00 0.00	X		X				0.	0.	0.
(28) JOE LIPSCOMB TREASURER (STARTING 10/29/20)	1.00 0.00	X		X				0.	0.	0.
(29) STEPHEN BAIRD TREASURER (THRU 10/29/20)	1.00 1.00	X		X				0.	0.	0.
(30) ALLEGRA HAYNES DIRECTOR	1.00 0.00	X						0.	0.	0.
(31) BEN JEALOUS DIRECTOR	1.00 0.00	X						0.	0.	0.
(32) CAROLINE NIEMCZYK DIRECTOR	1.00 1.00	X						0.	0.	0.
(33) CHRIS LEA DIRECTOR	1.00 0.00	X						0.	0.	0.
(34) DAVID POPPE DIRECTOR	1.00 0.00	X						0.	0.	0.
(35) FLORENCE WILLIAMS DIRECTOR	1.00 0.00	X						0.	0.	0.
(36) GEORGE BELL DIRECTOR	1.00 0.00	X						0.	0.	0.
(37) IGNACIA MORENO DIRECTOR	1.00 0.00	X						0.	0.	0.
(38) JEFFREY RESNICK DIRECTOR	1.00 0.00	X						0.	0.	0.
(39) JERRY TONE DIRECTOR	1.00 0.00	X						0.	0.	0.
(40) KEITH WEAVER DIRECTOR	1.00 0.00	X						0.	0.	0.
(41) LAURA RICHARDS DIRECTOR	1.00 0.00	X						0.	0.	0.
(42) LEX SANT DIRECTOR	1.00 0.00	X						0.	0.	0.
(43) LUCAS ST. CLAIR DIRECTOR	1.00 0.00	X						0.	0.	0.
(44) LUIS BENITEZ DIRECTOR	1.00 0.00	X						0.	0.	0.
(45) MICHAEL PARRISH DIRECTOR	1.00 0.00	X						0.	0.	0.
(46) MICKEY FEARN DIRECTOR	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for SHERYL CROCKETT TISHMAN, SUSAN WHITING, TAYLOR TOYNES, PAGE KNUDSEN COWLES, WILLIAM CRONIN, and MICHAEL PATTERSON.

Total to Part VII, Section A, line 1c

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	16,938,711.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	93,340,333.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 46,182,595.				
	h Total. Add lines 1a-1f			110,279,044.			
Program Service Revenue	2 a GOVT COST REIMBURSEMENTS	Business Code	900099	13,338,480.	13,338,480.		
	b MITIGATION PROJECTS		541900	8,905,190.	8,905,190.		
	c LANDOWNER FEE		531190	4,284,626.	4,284,626.		
	d GOVT CONTRACT FEES		900099	2,731,912.	2,731,912.		
	e PROJECT REIMBURSEMENTS		900099	397,467.	397,467.		
	f All other program service revenue		900099	610,117.	610,117.		
	g Total. Add lines 2a-2f			30,267,792.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,171,793.		2,171,793.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	1,001,937.			
			(ii) Personal				
	b Less: rental expenses ...	6b		0.			
	c Rental income or (loss)	6c		1,001,937.			
	d Net rental income or (loss)			1,001,937.		1,001,937.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	44,127,183.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b		43,374,938.			
c Gain or (loss)	7c		752,245.				
d Net gain or (loss)			752,245.		752,245.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			144,472,811.	30,267,792.	0.	3,925,975.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	37,891,333.	37,891,333.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	5,000.	5,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,385,741.	2,447,656.	1,459,133.	1,478,952.
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	26,201,992.	13,523,226.	6,067,426.	6,611,340.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,136,005.	587,479.	261,875.	286,651.
9 Other employee benefits	3,129,076.	1,593,737.	731,283.	804,056.
10 Payroll taxes	2,435,700.	1,233,183.	578,796.	623,721.
11 Fees for services (nonemployees):				
a Management				
b Legal	186,403.	131,863.	53,044.	1,496.
c Accounting	275,129.	7,865.	267,264.	
d Lobbying	166,113.	166,113.		
e Professional fundraising services. See Part IV, line 17	1,149,361.			1,149,361.
f Investment management fees	369,905.		369,905.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	4,431,320.	2,691,895.	1,266,654.	472,771.
12 Advertising and promotion	923,379.	25,381.	890,322.	7,676.
13 Office expenses	2,108,752.	1,019,555.	572,968.	516,229.
14 Information technology	698,891.	107,387.	550,076.	41,428.
15 Royalties				
16 Occupancy	3,857,508.	2,013,784.	893,135.	950,589.
17 Travel	225,119.	148,080.	27,951.	49,088.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	103,510.	60,556.	5,925.	37,029.
20 Interest	467,207.	467,207.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	136,229.	33,292.	86,099.	16,838.
23 Insurance	432,722.	219,085.	102,828.	110,809.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DESIGN & CONSTRUCTION	22,084,347.	22,075,542.	8,805.	
b APPRAISAL SERVICES	984,204.	984,204.		
c ENV ASSMNT & CLEANUP	909,429.	175,237.	730,447.	3,745.
d LAND SURVEYS	634,128.	634,128.		
e All other expenses	1,271,137.	651,980.	402,175.	216,982.
25 Total functional expenses. Add lines 1 through 24e	117,599,640.	88,894,768.	15,326,111.	13,378,761.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	9,780,636.	1	12,201,329.
	2 Savings and temporary cash investments	3,895,346.	2	40,700,080.
	3 Pledges and grants receivable, net	15,852,011.	3	14,867,267.
	4 Accounts receivable, net	15,858,340.	4	11,672,879.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	406,561.	9	688,931.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,511,344.		
	b Less: accumulated depreciation	10b 5,295,244.	352,331.	10c 216,100.
	11 Investments - publicly traded securities	74,480,861.	11	92,868,822.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	111,760,198.	15	113,238,992.
16 Total assets. Add lines 1 through 15 (must equal line 33)	232,386,284.	16	286,454,400.	
Liabilities	17 Accounts payable and accrued expenses	13,479,568.	17	62,092,429.
	18 Grants payable		18	
	19 Deferred revenue	5,404,286.	19	3,839,188.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	33,938,258.	24	11,763,353.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	46,138,983.	25	38,897,902.
	26 Total liabilities. Add lines 17 through 25	98,961,095.	26	116,592,872.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	9,827,140.	27	27,696,088.
	28 Net assets with donor restrictions	123,598,049.	28	142,165,440.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	133,425,189.	32	169,861,528.
	33 Total liabilities and net assets/fund balances	232,386,284.	33	286,454,400.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	144,472,811.
2	Total expenses (must equal Part IX, column (A), line 25)	2	117,599,640.
3	Revenue less expenses. Subtract line 2 from line 1	3	26,873,171.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	133,425,189.
5	Net unrealized gains (losses) on investments	5	9,684,283.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-121,115.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	169,861,528.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2020)

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.

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

OMB No. 1545-0047

2020

Open to Public Inspection

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

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 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	112085166	50411481.	102736229	98453912.	110279044	473965832
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	112085166	50411481.	102736229	98453912.	110279044	473965832
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						16366547.
6 Public support. Subtract line 5 from line 4.						457599285

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	112085166	50411481.	102736229	98453912.	110279044	473965832
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2606668.	616,973.	3606856.	2810518.	2171793.	11812808.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	157,249.		132,107.	101,271.		390,627.
11 Total support. Add lines 7 through 10						486169267
12 Gross receipts from related activities, etc. (see instructions)					12	141,316,707.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	94.12 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	95.17 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. 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 - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

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

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

SPECIAL EVENT REVENUE

2016 AMOUNT: \$ 157,249.

2017 AMOUNT: \$ 0.

2018 AMOUNT: \$ 132,107.

2019 AMOUNT: \$ 101,271.

2020 AMOUNT: \$ 0.

Multiple horizontal lines for providing additional information.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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

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

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

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

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>4,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>4,980,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>3,757,550.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>2,706,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>2,685,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>6,484,335.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization THE TRUST FOR PUBLIC LAND	Employer identification number 23-722333
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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

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

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

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

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

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

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

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 campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2020**

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	37,096.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	578,057.													
c	Total lobbying expenditures (add lines 1a and 1b)	615,153.													
d	Other exempt purpose expenditures	115465222.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	116080375.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	616,847.	433,668.	569,847.	615,153.	2,235,515.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	71,242.	15,615.	48,119.	37,096.	172,072.

Schedule C (Form 990 or 990-EZ) 2020

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
1 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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d 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
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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

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

Part IV Supplemental Information

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020
Open to Public Inspection

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply):

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	8
b Total acreage restricted by conservation easements	1,418.00
c Number of conservation easements on a certified historic structure included in (a)	1
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 17

4 Number of states where property subject to conservation easement is located ▶ 8

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, handling of violations, and enforcing conservation easements during the year ▶ 27

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 1,442.

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

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 make 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 program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	21,022,700.	19,322,298.	17,916,861.	17,221,784.	13,968,785.
b Contributions	2,195,833.	2,274,589.	1,192,791.	611,292.	2,445,355.
c Net investment earnings, gains, and losses	5,528,078.	-574,187.	212,646.	83,785.	807,644.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	28,746,611.	21,022,700.	19,322,298.	17,916,861.	17,221,784.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 32.6940 %
 - b Permanent endowment 50.1670 %
 - c Term endowment 17.1390 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|-------------------------------------|
| (i) Unrelated organizations | | <input checked="" type="checkbox"/> |
| (ii) Related organizations | | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		2,729,041.	2,681,714.	47,327.
c Leasehold improvements		356,670.	278,961.	77,709.
d Equipment		2,022,488.	2,018,731.	3,757.
e Other		403,145.	315,838.	87,307.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				216,100.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DEPOSITS ON LAND TRANSACTIONS	1,478,510.
(2) INVESTMENT IN AFFILIATES	609,162.
(3) OTHER DEPOSITS	286,686.
(4) OPEN SPACE HOLDINGS	40,398,757.
(5) ASSETS HELD IN CHARITABLE TRUSTS	70,380,547.
(6) INTEREST RECEIVABLE	75,322.
(7) ESCROW CLEARING	10,008.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	113,238,992.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITIES TO BENEFICIARIES OF	
(3) CHARITABLE TRUSTS	38,673,196.
(4) MITIGATION ADVANCES	224,706.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	38,897,902.

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

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

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

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

Part XIII Supplemental Information.

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

PART II, LINE 9:

EASEMENTS ACQUIRED BY THE TRUST FOR PUBLIC LAND ARE CONSERVATION EASEMENTS AND REPRESENT NUMEROUS RESTRICTIONS OVER THE USE AND DEVELOPMENT OF LAND NOT OWNED BY THE TRUST FOR PUBLIC LAND. THESE EASEMENTS GENERALLY PROVIDE THAT THE LAND WILL BE MAINTAINED UNIMPAIRED IN ITS CURRENT NATURAL, AGRICULTURAL, SCENIC, OR RECREATIONAL STATE. DURING THE YEARS ENDED JUNE 30, 2021, EASEMENTS VALUED AT \$22,450,300 WERE ACQUIRED AND \$34,032,625 CONVEYED.

PART V, LINE 4:

THE ENDOWMENT FUNDS WILL BE USED TO FURTHER OUR MISSION, "THE TRUST FOR PUBLIC LAND CREATES PARKS AND PROTECTS LAND FOR PEOPLE, ENSURING HEALTHY,

Part XIII Supplemental Information (continued)

LIVABLE COMMUNITIES FOR GENERATIONS TO COME".

PART X, LINE 2:

THE FINANCIAL STATEMENTS ARE PART OF THE CONSOLIDATED FINANCIAL STATEMENTS OF THE TRUST FOR PUBLIC LAND (TPL) AND THE TRUST FOR PUBLIC LAND ACTION FUND (TPLAF). THE FOLLOWING IS THE FOOTNOTE TO THE CONSOLIDATED FINANCIAL STATEMENTS.

THE TRUST FOR PUBLIC LAND IS A PUBLICLY SUPPORTED, TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND THE CALIFORNIA TAX CODE. CONTRIBUTIONS TO TPL ARE DEDUCTIBLE AS ALLOWED UNDER SECTION 170(B)(1)(A)(VI) OF THE CODE. TPLAF IS CLASSIFIED AS A 501(C)(4) ORGANIZATION. CONTRIBUTIONS TO TPLAF ARE NOT TAX DEDUCTIBLE.

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

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2020

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

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

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(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			
CHAPMAN CUBINE ALLEN + HUSSEY - 2000 15TH STREET N., SUITE	ANNUAL FUND		X	1,790,531.	518,617.	1,271,914.
KEY ACQUISITION PARTNERSHIP - 181 HARRY S. TRUMAN PARKWAY,	ANNUAL FUND		X	1,790,531.	49,154.	1,741,377.
KOS MEDIA, LLC - 436 14TH ST., SUITE 1500, OAKLAND, CA	ONLINE FUNDRAISING		X	284,891.	59,997.	224,894.
BLACKBAUD, INC - 2000 DANIEL ISLAND DR., CHARLESTON, SC	ONLINE FUNDRAISING		X	284,891.	175,096.	109,795.
CARE2, INC - 203 REDWOOD SHORES, REDWOOD CITY, CA	ONLINE FUNDRAISING		X	284,891.	105,000.	179,891.
PUBLICIS COMMUNICATIONS - 91451 COLLECTIONS CENTER	ONLINE FUNDRAISING		X	284,891.	72,500.	212,391.
THE STELTER COMPANY - P.O. BOX 5228, DES MOINES, IA	PLANNED GIVING		X	0.	52,840.	-52,840.
ALEXANDER HAAS - 3520 PIEDMONT RD NE, STE. 450,	CAMPAIGN STRATEGY STUDY		X	0.	18,750.	-18,750.
CAMPBELL & COMPANY - ONE EAST WACKER DRIVE, SUITE 2100,	CAMPAIGN STRATEGY STUDY		X	0.	65,800.	-65,800.
Total				4,720,626.	1,117,754.	3,602,872.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		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. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

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

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

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

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

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

(I) NAME OF FUNDRAISER: CHAPMAN CUBINE ALLEN + HUSSEY

(I) ADDRESS OF FUNDRAISER:

2000 15TH STREET N., SUITE 550, ARLINGTON, VA 22201

(I) NAME OF FUNDRAISER: KEY ACQUISITION PARTNERSHIP

(I) ADDRESS OF FUNDRAISER:

181 HARRY S. TRUMAN PARKWAY, SUITE 265, ANNAPOLIS, MD 21401

Part IV Supplemental Information (continued)

(I) NAME OF FUNDRAISER: KOS MEDIA, LLC

(I) ADDRESS OF FUNDRAISER: 436 14TH ST., SUITE 1500, OAKLAND, CA 94608

(I) NAME OF FUNDRAISER: BLACKBAUD, INC

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

(I) NAME OF FUNDRAISER: CARE2, INC

(I) ADDRESS OF FUNDRAISER: 203 REDWOOD SHORES, REDWOOD CITY, CA 94065

(I) NAME OF FUNDRAISER: PUBLICIS COMMUNICATIONS

(I) ADDRESS OF FUNDRAISER:

91451 COLLECTIONS CENTER DRIVE, CHICAGO, IL 60693

(I) NAME OF FUNDRAISER: THE STELTER COMPANY

(I) ADDRESS OF FUNDRAISER: P.O. BOX 5228, DES MOINES, IA 50305-5228

(I) NAME OF FUNDRAISER: ALEXANDER HAAS

(I) ADDRESS OF FUNDRAISER:

3520 PIEDMONT RD NE, STE. 450, ATLANTA, GA 30305

(I) NAME OF FUNDRAISER: CAMPBELL & COMPANY

(I) ADDRESS OF FUNDRAISER:

ONE EAST WACKER DRIVE, SUITE 2100, CHICAGO, IL 60601

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
US DEPARTMENT OF THE NAVY 1101 TAUTOG CIRCLE SILVERDALE, WA 98315-1101		US NAVY	0.	2,754,375.		DONATION OF 1945.6 ACRES OF LAND IN OR, BARGAIN SALE	PROJECT CONTRIBUTION/SUPPORT
CITY OF DESTIN 4200 INDIAN BAYOU TRAIL DESTIN, FL 32541		CITY OF DESTIN	0.	5,720,000.		BARGAIN SALE OF 3.42 ACRES OF LAND IN FL, BARGAIN SALE	PROJECT CONTRIBUTION/SUPPORT
MORROW COUNTY PARK DISTRICT 7590 NEW DELAWARE ROAD MT. VERNON, OH 43050		MORROW CNTY DISTRICT	0.	1,049,940.		BARGAIN SALE OF 215 ACRES OF LAND IN OH, BARGAIN SALE	PROJECT CONTRIBUTION/SUPPORT
MN DEPARTMENT OF NATURAL RESOURCES 500 LAFAYETTE ROAD ST. PAUL, MN 55155		MN DNR	0.	2,466,000.		BARGAIN SALE OF 64.35 ACRES OF LAND IN MN, BARGAIN SALE	PROJECT CONTRIBUTION/SUPPORT
HO'LA 'INA KPONO P.O. BOX 300304 KAAAWA, HI 96730	80-0359663	501(C)(3)	0.	40,000.		BARGAIN SALE OF 1.49 ACRES OF LAND IN HI	PROJECT CONTRIBUTION/SUPPORT
BEAR YUBA LAND TRUST 12183 AUBURN ROAD GRASS VALLEY, CA 95945	68-0256981	501(C)(3)	0.	1,075,000.		BARGAIN SALE OF 1595 ACRES OF LAND IN CA	PROJECT CONTRIBUTION/SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 72.

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

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

Schedule I (Form 990) 2020

SEE PART IV FOR COLUMN (G) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
TOWN OF HUNTINGTON 4930 MAIN RD HUNTINGTON, VT 05462-9803		TOWN OF HUNTINGT	15,000.	26,500.		DONATION OF 244.6 ACRES OF LAND IN VT	EVENT SPONSORSHIP
VERMONT LAND TRUST, INC 58 EAST STATE ST #101 MONTPELIER, VT 05602	03-0264836	501(C)(3)	0.	26,500.		DONATION OF 244.6 ACRES OF LAND IN VT	PROJECT CONTRIBUTION/SUPPORT
STATE OF HAWAII - DEPT. OF LAND NATURAL RESOURCES LAND DIVISION - 1151 PUNCHBOWL STREET, ROOM 220 - HONOLULU, HI 96813		HI DLNR	0.	770,000.		DONATION OF 3433.75 ACRES OF LAND IN HI	PROJECT CONTRIBUTION/SUPPORT
HINSDALE COUNTY P.O. BOX 277 LAKE CITY, CO 81235		HINSDALE COUNTY	0.	1,450,000.	APPRAISAL	BARGAIN SALE OF 10.33 ACRES OF LAND IN CO	PROJECT CONTRIBUTION/SUPPORT
WASHINGTON COUNTY 14949 62ND STREET NORTH STILLWATER, MN 55082		WASHINGTON COUNT	0.	240,000.	APPRAISAL	BARGAIN SALE OF 37.17 ACRES OF LAND IN MN	PROJECT CONTRIBUTION/SUPPORT
MONTANA DEPARTMENT OF FISH, WILDLIFE & PARKS - P.O. BOX 200701 - HELENA, MT 59620-0701		MN DFWP	0.	450,000.	APPRAISAL	BARGAIN SALE OF 7255.7 ACRES OF LAND IN MT	PROJECT CONTRIBUTION/SUPPORT
TOWN OF HANOVER 41 SOUTH MAIN STREET HANOVER, NH 03755		TOWN OF HANOVER	100,000.	1,153,750.	APPRAISAL	BARGAIN SALE OF 253.16 ACRES OF LAND IN NH, BARGAIN	PROJECT CONTRIBUTION/SUPPORT
FEATHER RIVER LAND TRUST 75 COURT STREET QUINCY, CA 95971	68-0449687	501(C)(3)	150,000.	1,600,000.	APPRAISAL	DONATION OF 2477.72 ACRES OF LAND IN CA	PROJECT CONTRIBUTION/SUPPORT
CITY OF LYNN HAVEN, FLORIDA 825 OHIO AVENUE LYNN HAVEN, FL 32444		CITY OF LYNN HAV	0.	3,800,000.	APPRAISAL	DONATION OF 90.7 ACRES OF LAND IN FL	PROJECT CONTRIBUTION/SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
UTAH DEPARTMENT OF NATURAL RESOURCES, DIVISION OF FORESTRY, FIRE & STATE LANDS - 1594 W. NORTH TEMPLE, SUITE 3520, BOX 145703 -		UT DNR	0.	537,000.	APPRAISAL	BARGAIN SALE OF 1790 ACRES OF LAND IN UT	PROJECT CONTRIBUTION/SUPPORT
VIRGINIA OUTDOORS FOUNDATION P.O. BOX 909 TAPPAHANNOCK, VT 22560		VOF	55,000.	1,239,875.	APPRAISAL	BARGAIN SALE OF 468.18 ACRES OF LAND IN VA, BARGAIN	PROJECT CONTRIBUTION/SUPPORT
MENDOCINO LAND TRUST 330 N FRANKLIN ST FORT BRAGG, CA 95437	94-2362450	501(C)(3)	150,000.	805,000.	APPRAISAL	GENERAL SUPPORT, BARGAIN SALE OF 1412 ACRES	PROJECT CONTRIBUTION/SUPPORT
SHASTA LAND TRUST 1918 WEST STREET REDDING, CA 96900	68-0441184	501(C)(3)	0.	80,000.	APPRAISAL	BARGAIN SALE OF 665 ACRES OF LAND IN CA	PROJECT CONTRIBUTION/SUPPORT
MOUNTAINS RECREATION AND CONSERVATION AUTHORITY - 570 WEST AVENUE 26, SUITE 100 - LOS ANGELES, CA 90065		MRCA	0.	2,335,000.	APPRAISAL	BARGAIN SALE OF 18.17 ACRES OF LAND IN CA, BARGAIN SALE	PROJECT CONTRIBUTION/SUPPORT
BOARD OF PARK COMMISSIONERS OF SUMMIT METRO PARKS - 975 TREATY LINE ROAD - AKRON, OH 44313		SUMMIT METRO PAR	0.	1,050,000.	APPRAISAL	DONATION OF 14.57 ACRES OF LAND IN OH, BARGAIN SALE	PROJECT CONTRIBUTION/SUPPORT
US DEPARTMENT OF THE NAVY - NAVAL FACILITIES ENGINEERING COMMAND, MID-ATLANTIC - 9324 VIRGINIA AVENUE - NORFOLK, VA 23511		US NAVY	0.	87,500.	APPRAISAL	DONATION OF 8523 ACRES OF LAND IN ME	PROJECT CONTRIBUTION/SUPPORT
SHASTA LAND TRUST 1918 WEST STREET REDDING, CA 96900	68-0441184	501(C)(3)	65,000.	0.			PROJECT CONTRIBUTION/SUPPORT
ECOAMERICA 1730 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036	20-3895611	501(C)(3)	25,000.	0.			PROJECT CONTRIBUTION/SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
JEFFERSON LAND TRUST 1033 LAWRENCE STREET PORT TOWNSEND, WA 98368	91-1465078	501(C)(3)	7,000.	0.			EVENT SPONSORSHIP, PROJECT CONTRIBUTION/SUPPORT
COOPER'S FERRY ONE PORT CENTER 2 RIVERSIDE DRIVE CAMDEN, NJ 08103			20,400.	0.			PROJECT CONTRIBUTION/SUPPORT
PARTNERSHIP PROJECT PO BOX 65826 WASHINGTON, DC 20035	52-2192070	501(C)(3)	10,000.	0.			PROJECT CONTRIBUTION/SUPPORT
GREAT PENINSULA CONSERVANCY 423 PACIFIC AVENUE BREMERTON, WA 98337	91-1110978	501(C)(3)	22,787.	0.			EVENT SPONSORSHIP
UNITED PARKS AS ONE P O BOX 1372 NEWARK, NJ 07101	47-3148873	501(C)(3)	22,129.	0.			PROJECT CONTRIBUTION/SUPPORT
TOWN OLD SAYBROOK 302 MAIN ST. OLD SAYBROOK, CT 06475		TOWN OLD SAYBROO	155,491.	0.			PROJECT CONTRIBUTION/SUPPORT
WEST COMMUNITY ECONOMIC DEVELOPMENT CORPORATION - 4200 MORRISON ROAD - DENVER, CO 80219	84-1135942	501(C)(3)	25,000.	0.			EVENT SPONSORSHIP
THE TRUST FOR PUBLIC LAND ACTION FUND - 101 MONTGOMERY STREET, STE 900 - SAN FRANCISCO, CA 94104	04-3515341	501(C)(4)	232,150.	0.			EVENT SPONSORSHIP
VERMONT HUTS ASSOCIATION LTD PO BOX 745 STOWE, VT 05672	81-3630363	501(C)(3)	50,000.	0.			PROJECT CONTRIBUTION/SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
GROUNDWORK BRIDGEPORT 1001 MAIN ST. STE 20 BRIDGEPORT, CT 06604	06-1556949	501(C)(3)	21,250.	0.			PROJECT CONTRIBUTION/SUPPORT
BICYCLE COLORADO 1525 MARKET STREET DENVER, CO 80202	84-1201078	501(C)(3)	50,000.	0.			EVENT SPONSORSHIP
URBAN SUSTAINABILITY DIRECTORS NETWORK - 700 12TH ST NW - WASHINGTON, DC 20005	82-5015863	501(C)(3)	28,750.	0.			PROJECT CONTRIBUTION/SUPPORT
RECESS CLEVELAND 2400 ORANGE AVENUE #6462 CLEVELAND, OH 44101	82-1892040	501(C)(3)	30,000.	0.			EVENT SPONSORSHIP
PARTNERSHIP FOR PROVIDENCE PARKS 71 CATLIN AVE. RUMFORD, RI 02916	46-1154583	501(C)(3)	10,000.	0.			EVENT SPONSORSHIP
MT. MANSFIELD UNIFIED UNION 10 RIVER RD. JERICHO, VT 05465		MMUUSD	15,000.	0.			EVENT SPONSORSHIP
KERN COMMUNITY FOUNDATION 3300 TRUXTUN AVENUE BAKERSFIELD, CA 93301	77-0555874	501(C)(3)	100,000.	0.			PROJECT CONTRIBUTION/SUPPORT
GREATER EASTSIDE 1365 PROSPERITY ST. ST. PAUL, MN 55106		ST. PAUL	10,000.	0.			PROJECT CONTRIBUTION/SUPPORT
URBAN THINK FOUNDATION P.O. BOX 533709 ORLANDO, FL 32853	26-2534274	501(C)(3)	25,000.	0.			PROJECT CONTRIBUTION/SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
BLOOM INC. 516 TENNESSEE STREET MEMPHIS, TN 38103	82-4493285	501(C)(3)	50,000.	0.			PROJECT CONTRIBUTION/SUPPORT
TRI-COUNTY COMMUNITY NETWORK 724 NORTH ADAMS STREET POTTSTOWN, PA 19464		TRI-COUNTY	50,000.	0.			PROJECT CONTRIBUTION/SUPPORT
OAKLAND PARKS P.O. BOX 13267 OAKLAND, CA 94661		OAKLAND PARKS	30,000.	0.			PROJECT CONTRIBUTION/SUPPORT
EL PASO COUNTY PARKS 2002 CREEK CROSSING STREET COLORADO SPRINGS, CO 80905		EL PASO COUNTY P	50,000.	0.			PROJECT CONTRIBUTION/SUPPORT
ORLANDO COMMUNITY & YOUTH TRUST INC. - 595 N. PRIMROSE DR. - ORLANDO, FL 32803	65-0572536	501(C)(3)	25,000.	0.			EVENT SPONSORSHIP
ONEPGH FUND 414 GRANT STREET PITTSBURGH, PA 15219	20-4077513	501(C)(3)	50,000.	0.			EVENT SPONSORSHIP
AUDUBON NATURALIST SOCIETY 8940 JONES MILL ROAD CHEVY CHASE, MD 20815	53-0233715	501(C)(3)	10,000.	0.			EVENT SPONSORSHIP
SOUTHERN OFF-ROAD BICYCLE ASSOCIATION ATLANTA - 10660 HUTCHESON FERRY ROAD - PALMETTO, GA 30268	90-0252558	501(C)(3)	7,500.	0.			PROJECT CONTRIBUTION/SUPPORT
MONTPELIER ALIVE 39 MAIN STREET MONTPELIER, VT 05602		CITY OF MONTPELI	40,000.	0.			PROJECT CONTRIBUTION/SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
STREAMS & VALLEYS INC. 2918 WINGATE STREET FORTH WORTH, TX 76107	23-7109965	501(C)(3)	30,000.	0.			PROJECT CONTRIBUTION/SUPPORT
URBAN AGRICULTURE COOPERATIVE 58 CRAWFORD ST NEWARK, NJ 07102	82-1079237	501(C)(3)	41,465.	0.			PROJECT CONTRIBUTION/SUPPORT
HINSDALE COUNTY P.O. BOX 277 LAKE CITY, CO 81235		HINSDALE COUNTY	18,087.	0.			PROJECT CONTRIBUTION/SUPPORT
MONTBELLO ORGANIZING COMMITTEE 12000 E. 47TH AVE. DENVER, CO 80239	81-4339690	501(C)(3)	40,000.	0.			PROJECT CONTRIBUTION/SUPPORT
BOSTON UNIVERSITY P.O. BOX 28763 NEW YORK, NY 10087-8763		BOSTON UNIVERSIT	20,000.	0.			EVENT SPONSORSHIP
HEALTHYBR 222 SAINT LOUIS STREET BATON ROUGE, LA 70802			40,000.	0.			PROJECT CONTRIBUTION/SUPPORT
OAHU INTERTRIBAL COUNCIL 1409 KAPALAMA AVE. HONOLULU, HI 96817	46-3291466	501(C)(3)	25,000.	0.			EVENT SPONSORSHIP
LOWER PHALEN CREEK PROJECT 60 PLATO BLVD. E SAINT PAUL, MN 55107	27-5469929	501(C)(3)	25,000.	0.			EVENT SPONSORSHIP
NORTH LAWDALE EMPLOYMENT NETWORK 906 S HOMAN AVE CHICAGO, IL 60624	36-4295189	501(C)(3)	25,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
WHITE OAK BICYCLE COOPERATIVE PO BOX 15102 RED BANK, TN 37415	85-2667105	501(C)(3)	10,000.	0.			PROJECT CONTRIBUTION/SUPPORT
SOMALI HEALTH BOARD 545 ANDOVER PARK TUKWILA, WA 98188	46-5114580	501(C)(3)	20,000.	0.			GENERAL SUPPORT
GREEN DIVERSITY INITIATIVE 6218 GEORGIA AVE NW WASHINGTON, DC 20011-5125	46-5220283	501(C)(3)	10,000.	0.			GENERAL SUPPORT
CENTER FOR FAMILY SERVICES INC. 1 ALPHA AVENUE VOORHEES, NJ 08043	22-3669704	501(C)(3)	40,000.	0.			GENERAL SUPPORT - LOBBYING
THE OREGON RANGELAND TRUST P.O. BOX 67 MITCHELL, OR 97750	47-0877475	501(C)(3)	242,156.	0.			PROJECT CONTRIBUTION/SUPPORT
LAND TRUST ALLIANCE 1250 H ST. WASHINGTON, DC 20005	04-2751357	501(C)(3)	18,500.	0.			EVENT SPONSORSHIP
PARK PRIDE, INC. 233 PEACHTREE ST. ATLANTA, GA 30303	58-1883895	501(C)(3)	79,000.	0.			EVENT SPONSORSHIP
EARTH ISLAND INSTITUTE 2150 ALLSTONE WAY BERKELEY, CA 94704	94-2889684	501(C)(3)	40,000.	0.			EVENT SPONSORSHIP
FLATHEAD LAND TRUST INC. 690 N MERIDIAN KALISPELL, MT 59903	36-3479966	501(C)(3)	49,500.	0.			PROJECT CONTRIBUTION/SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
VERMONT LAND TRUST INC. 8 BAILEY AVENUE MONTPELIER, VT 05602	03-0264836	501(C)(3)	40,000.	0.			GENERAL SUPPORT
HUNTINGTON COMMUNITY FOREST MANAGEMENT FUND - 4930 MAIN ROAD - HUNTINGTON, VT 05462		TOWN OF HUNTINGT	40,000.	0.			GENERAL SUPPORT
HIGH PEAKS ALLIANCE PO BOX 987 FARMINGTON, ME 04938	27-3160688	501(C)(3)	45,000.	0.			GENERAL SUPPORT
MORRIS COUNTY PARK COMMISSION 300 MENDHAM RD MORRISTOWN, NJ 07960		MORRIS COUNTY	326,040.	0.			GENERAL SUPPORT
ALA KAHAKAI TRAIL ASSOCIATION P.O. BOX 2338 KAMUELA, HI 96743	27-1398470	501(C)(3)	650,000.	0.			GENERAL SUPPORT
ROCKY MOUNTAIN ELK FOUNDATION 5705 GRANT CREEK MISSOULA, MT 59808	81-0421425	501(C)(3)	4,980,000.	0.			GENERAL SUPPORT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
COMMUNITY ART	2	5,000.	0.		GRANT

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

PART I, LINE 2:

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

PART II, LINE 1, COLUMN (G):

NAME OF ORGANIZATION OR GOVERNMENT: US DEPARTMENT OF THE NAVY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: DONATION OF 1945.6 ACRES OF LAND
IN OR, BARGAIN SALE OF 5194.2 ACRES OF LAND IN

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: CITY OF DESTIN

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 3.42 ACRES OF LAND IN FL, BARGAIN SALE OF 0.44 ACRES OF LAND IN

NAME OF ORGANIZATION OR GOVERNMENT: MORROW COUNTY PARK DISTRICT

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 215 ACRES OF LAND IN OH, BARGAIN SALE OF 124 ACRES OF LAND IN OH

NAME OF ORGANIZATION OR GOVERNMENT: MN DEPARTMENT OF NATURAL RESOURCES

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 64.35 ACRES OF LAND IN MN, BARGAIN SALE OF 76.93 ACRES OF LAND I

NAME OF ORGANIZATION OR GOVERNMENT: TOWN OF HANOVER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 253.16 ACRES OF LAND IN NH, BARGAIN SALE OF 0.28 ACRES OF LAND I

NAME OF ORGANIZATION OR GOVERNMENT: VIRGINIA OUTDOORS FOUNDATION

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 468.18 ACRES OF LAND IN VA, BARGAIN SALE OF 100.3 ACRES OF LAND

NAME OF ORGANIZATION OR GOVERNMENT: MENDOCINO LAND TRUST

(G) DESCRIPTION OF NON-CASH ASSISTANCE: GENERAL SUPPORT, BARGAIN SALE OF 1412 ACRES OF LAND IN CA

NAME OF ORGANIZATION OR GOVERNMENT:

MOUNTAINS RECREATION AND CONSERVATION AUTHORITY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 18.17 ACRES OF LAND IN CA, BARGAIN SALE OF 1171.34 ACRES OF LAND

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

BOARD OF PARK COMMISSIONERS OF SUMMIT METRO PARKS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: DONATION OF 14.57 ACRES OF LAND
IN OH, BARGAIN SALE OF 27 ACRES OF LAND IN OH

SCHEDULE I, PART IV

JENNA ROBB & JOSE ORTIZ ARE RELATED TO PARTNERS WHO EACH RECEIVED
\$2,500 FOR A COMMUNITY ART GRANT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input 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 (such as maid, chauffeur, chef) |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DIANE C REGAS PRESIDENT	(i)	475,971.	0.	0.	14,250.	8,464.	498,685.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LING I THOMPSON SVP, CHIEF COMM & MARKETING OFFICER	(i)	282,800.	0.	0.	13,371.	18,792.	314,963.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JAMES H OBENDORF SVP/CHIEF FINANCIAL & ADMIN OFFICER	(i)	276,744.	0.	0.	14,223.	18,792.	309,759.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KENNETH J DANTER SVP, FIELD PROGRAMS	(i)	248,116.	0.	0.	12,896.	27,712.	288,724.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ADRIAN BENEPE SVP, NATIONAL PRGRMS (THRU 10/13/20)	(i)	251,226.	0.	0.	12,915.	14,746.	278,887.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) WILLIAM LEE SVP, POLICY, ADV, & GOVT RELATIONS	(i)	234,024.	1,500.	0.	12,330.	27,712.	275,566.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DAVID M CARSON SVP, GENERAL COUNSEL/CORP SECRETARY	(i)	213,352.	0.	0.	11,023.	14,090.	238,465.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) PATRICIA WATSON SVP/CHIEF PHILANTHROPY OFFICER	(i)	223,438.	0.	0.	8,060.	4,992.	236,490.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KATHERINE M PANDORI VP, DIR OF FINANCE & ACCOUNTING	(i)	207,174.	0.	0.	8,954.	8,156.	224,284.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) CARTER STRICKLAND ASSISTANT SECRETARY	(i)	184,781.	0.	0.	8,919.	25,584.	219,284.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) TILY SHUE ASSISTANT SECRETARY	(i)	185,406.	0.	0.	8,948.	16,907.	211,261.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MARGARET MADDEN VP, ASSOCIATE GENERAL COUNSEL	(i)	186,822.	0.	0.	9,692.	9,695.	206,209.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) THOMAS TYNER ASSISTANT SECRETARY	(i)	174,848.	0.	0.	5,922.	18,696.	199,466.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) PETE FODOR ASSISTANT SECRETARY	(i)	165,277.	0.	0.	7,582.	18,669.	191,528.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) DENISE MULLANE ASSISTANT SECRETARY	(i)	160,019.	0.	0.	8,027.	15,497.	183,543.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) SUSAN SCHMIDT ASSISTANT SECRETARY	(i)	144,955.	0.	0.	7,709.	27,509.	180,173.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) ANTHONY A. TRAVERSO ASSISTANT SECRETARY	(i)	158,951.	0.	0.	8,166.	9,567.	176,684.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) GILMAN MILLER ASSISTANT SECRETARY	(i)	146,733.	0.	0.	7,522.	21,564.	175,819.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) PEGGY CHIU ASSISTANT SECRETARY	(i)	136,383.	0.	0.	7,203.	25,388.	168,974.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

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

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	148	34,842,375.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other	X	22	11,340,220.	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 V, Donee Acknowledgement **29** **10**

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't 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 nonstandard 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 didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2020

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

SCHEDULE M, PART I, COLUMN (B):

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

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

FUND - WE HELPED PASS 29 STATE AND LOCAL BALLOT MEASURES--A 93 PERCENT
SUCCESS RATE-- THAT GENERATED \$3,080,283,000 IN PUBLIC FUNDS FOR PARKS
AND NATURAL SPACES.

EXPENSES \$ 2,387,551. INCLUDING GRANTS OF \$ 173,651. REVENUE \$ 578,163.

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

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

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

THE ORGANIZATION HAS A COMPREHENSIVE CONFLICT OF INTEREST POLICY (POLICY)
THAT REQUIRES POTENTIAL CONFLICTS OF INTEREST TO BE BROUGHT TO THE
ATTENTION OF THE GENERAL COUNSEL. IF THE GENERAL COUNSEL DETERMINES THAT A
POTENTIAL CONFLICT OF INTEREST EXISTS, THE MATTER IS REVIEWED BY THE
CONFLICT REVIEW COMMITTEE, A COMMITTEE COMPOSED OF DESIGNATED SENIOR STAFF,
OR, IF THE MATTER INVOLVES A MEMBER OF THE BOARD OF DIRECTORS OR THEIR
FAMILY OR AFFILIATED ENTITY, IT IS REVIEWED BY THE FULL BOARD. POTENTIAL
CONFLICTS INVOLVING THE PURCHASE OF GOODS AND SERVICES WITH A VALUE THAT
DOES NOT EXCEED \$5,000 MAY BE REVIEWED BY THE GENERAL COUNSEL. THE POLICY

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

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

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

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

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

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

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

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

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

FORM 990, PART VII, SECTION A:

THE TRUST FOR PUBLIC LAND BOARD MEMBERS DIANE C REGAS, STEPHEN BAIRD, WHITNEY HATCH, PAGE KNUDSEN-COWLES, CAROLINE P NIEMCZYK, THOMAS REEVE ALSO SERVE ON THE BOARD OF THE TRUST FOR PUBLIC LAND ACTION FUND.

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

CHANGE IN VALUE OF SPLIT INTEREST TRUSTS	56,520.
UNCOLLECTIBLE GRANTS	-104,120.

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

INVESTMENT IN AFFILIATES

-73,515.

TOTAL TO FORM 990, PART XI, LINE 9

-121,115.

Multiple horizontal lines for additional entries.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

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

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

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

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

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

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

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

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

Table with 10 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Type of entity; (f) Share of total income; (g) Share of end-of-year assets; (h) Percentage ownership; (i) Section 512(b)(13) controlled entity?.

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

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

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
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE TRUST FOR PUBLIC LAND ACTION FUND	B	232,150.	CASH
(2) THE TRUST FOR PUBLIC LAND ACTION FUND	O	67,207.	TIMESHEETS
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) <small>Are all partners sec. 501(c)(3) orgs.?</small>		(f) Share of total income	(g) Share of end-of-year assets	(h) <small>Dispropor- tionate allocations?</small>		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) <small>General or managing partner?</small>		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	