

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# Form 990

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

# 2023

Open to Public Inspection

**A** For the 2023 calendar year, or tax year beginning **JUL 1, 2023** and ending **JUN 30, 2024**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE TRUST FOR PUBLIC LAND</b>		<b>D</b> Employer identification number <b>23-7222333</b>
	Doing business as		<b>E</b> Telephone number <b>415-495-4014</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>336,488,989.</b>
	<b>23 GEARY STREET</b>	<b>1000</b>	<b>H(a)</b> 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 <b>SAN FRANCISCO, CA 94108</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>F</b> Name and address of principal officer: <b>DIANE C REGAS</b> <b>SAME AS C ABOVE</b>			<b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: <b>WWW.TPL.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			<b>L</b> Year of formation: <b>1972</b>
			<b>M</b> State of legal domicile: <b>CA</b>

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>CREATES PARKS AND PROTECTS LAND FOR PEOPLE, ENSURING HEALTHY, LIVABLE COMMUNITIES.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>33</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>32</b>
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)	<b>5</b>	<b>420</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>404</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>251,423,147.</b>	<b>175,780,974.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>41,035,654.</b>	<b>56,029,135.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>4,597,012.</b>	<b>5,382,830.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>323,732.</b>	<b>85,567.</b>
		<b>297,379,545.</b>	<b>237,278,506.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>182,179,357.</b>	<b>62,323,477.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>48,376,866.</b>	<b>52,517,258.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>941,646.</b>	<b>1,701,587.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>18,012,351.</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>59,442,015.</b>	<b>80,936,816.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>290,939,884.</b>	<b>197,479,138.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>6,439,661.</b>	<b>39,799,368.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>324,349,767.</b>	<b>396,538,094.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>137,693,260.</b>	<b>163,538,758.</b>
		<b>186,656,507.</b>	<b>232,999,336.</b>

## Part II Signature Block

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

<b>Sign Here</b>	Signature of officer		Date		
	<b>JAMES H OBENDORF, CHIEF FINANCIAL ADMIN OFFICER</b>				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	<b>MAGA E. KISRIV</b>	<i>Maga Ksiriv</i>	<b>4/25/2025</b>	<input type="checkbox"/>	<b>P01008919</b>
<b>Preparer Use Only</b>	Firm's name	Firm's EIN		Phone no.	
	<b>HOOD &amp; STRONG LLP</b>	<b>94-1254756</b>		<b>408.998.8400</b>	
	Firm's address				
	<b>2580 N 1ST ST, STE 460</b>				
	<b>SAN JOSE, CA 95131</b>				

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

**Application for Extension of Time To File an Exempt Organization  
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury  
Internal Revenue Service

File a separate application for each return.  
Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.

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

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

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.

**Part I - Identification**

<b>Type or Print</b>	Name of exempt organization, employer, or other filer, see instructions. <b>THE TRUST FOR PUBLIC LAND</b>	Taxpayer identification number (TIN) <b>23-7222333</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>23 GEARY STREET, 1000</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SAN FRANCISCO, CA 94108</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name \_\_\_\_\_  
 Plan Number \_\_\_\_\_  
 Plan Year Ending (MM/DD/YYYY) \_\_\_\_\_

**Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)**

The books are in the care of **MICHELLE PANDORI**  
**23 GEARY STREET, 1000 - SAN FRANCISCO, CA 94108**  
 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 15**, 20 **25**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 calendar year 20 \_\_\_\_ or  
 tax year beginning **JUL 1**, 20 **23**, and ending **JUN 30**, 20 **24**

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

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

**For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

Part III Statement of Program Service Accomplishments

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

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 No

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

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 \$ 128,077,990. including grants of \$ 59,401,053. ) (Revenue \$ 43,937,184. ) LAND - WE COMPLETED 49 CONSERVATION TRANSACTIONS THAT PROTECTED 67,430 ACRES.

4b (Code: ) (Expenses \$ 29,820,758. including grants of \$ 2,881,924. ) (Revenue \$ 11,891,662. ) PARK AND SCHOOLYARD - WE COMPLETED 17 NEW SCHOOLYARDS AND 3 NEW PARKS.

4c (Code: ) (Expenses \$ 1,280,667. including grants of \$ 40,500. ) (Revenue \$ 200,289. ) FUND - WE HELPED PASS 5 STATE AND LOCAL BALLOT MEASURES--A 83 PERCENT SUCCESS RATE-- THAT GENERATED \$1,145,163,509 IN PUBLIC FUNDS FOR PARKS AND NATURAL SPACES.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 159,179,415.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules A through I.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes rows for employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

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... 33; 1b Enter the number of voting members included... 32; 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 on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 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 on 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
23 GEARY STREET, 1000, SAN FRANCISCO, CA 94108

**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 the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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	40.00	X		X			547,638.	0.	32,496.	
(2) PATRICIA WATSON SVP/CHIEF PHILANTHROPY OFFICER	40.00				X		398,954.	0.	33,185.	
(3) KENNETH J. DANTER SVP, FIELD PROGRAMS	40.00				X		306,325.	0.	49,751.	
(4) JAMES H. OBENDORF SVP/CHIEF FINANCIAL & ADMIN OFFICER	40.00			X			307,783.	0.	42,953.	
(5) HOWARD FRUMKIN SVP, LAND AND PEOPLE LAB	40.00				X		289,736.	0.	21,883.	
(6) WILLIAM LEE SVP, POLICY, ADVOCACY, & GOV'T RELAT	38.00				X		247,312.	0.	46,263.	
(7) I LING THOMPSON SVP, CCMO (THRU 8/31/23)	40.00				X		252,338.	0.	31,776.	
(8) DAVID M. CARSON SVP, GENERAL COUNSEL/CORP SECRETARY	40.00			X			240,444.	0.	27,780.	
(9) KATHERINE M. PANDORI VP, DIRECTOR OF FINANCE & ACTG	40.00			X			233,220.	0.	24,679.	
(10) MARGARET MADDEN VP, ASSOCIATE GENERAL COUNSEL	40.00			X			211,932.	0.	25,894.	
(11) TILY SHUE ASSISTANT SECRETARY	40.00			X			206,692.	0.	30,624.	
(12) THOMAS TYNER ASSISTANT SECRETARY	40.00			X			195,851.	0.	26,919.	
(13) ANTHONY A. TRAVERSO ASSISTANT SECRETARY	40.00			X			187,997.	0.	32,259.	
(14) DENISE MULLANE ASSISTANT SECRETARY	40.00			X			182,439.	0.	30,456.	
(15) PEGGY CHIU ASSISTANT SECRETARY	40.00			X			166,877.	0.	40,448.	
(16) GILMAN MILLER ASSISTANT SECRETARY	40.00			X			167,269.	0.	35,902.	
(17) GORDON OKAWA ASSISTANT SECRETARY	40.00			X			141,576.	0.	30,874.	

**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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) ALEX GHIO ASSISTANT SECRETARY	40.00			X				155,298.	0.	12,850.
(19) JANE KIM ASSISTANT SECRETARY	40.00			X				136,810.	0.	22,905.
(20) MIMI FALLER HELVIE ASSISTANT SECRETARY	40.00			X				129,460.	0.	29,516.
(21) PETER FODOR ASSISTANT SECRETARY	40.00			X				138,949.	0.	19,854.
(22) CATHERINE BROWN ASSISTANT SECRETARY	40.00			X				122,074.	0.	18,898.
(23) JUSTIN YOST ASSISTANT SECRETARY	40.00			X				120,805.	0.	18,546.
(24) JENNIFER KOLTO ASSISTANT SECRETARY	40.00			X				108,426.	0.	27,324.
(25) JOY LEGGET-MURPHY ASSISTANT SECRETARY	40.00			X				116,894.	0.	17,274.
(26) CARTER STRICKLAND ASSISTANT SECRETARY (THRU 5/12/23)	40.00			X				107,360.	0.	18,010.
<b>1b Subtotal</b>								5,420,459.	0.	749,319.
<b>c Total from continuation sheets to Part VII, Section A</b>								252,903.	0.	43,565.
<b>d Total (add lines 1b and 1c)</b>								5,673,362.	0.	792,884.

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 150

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>	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
MSM EMPIRE CONSTRUCTION 260 BROADWAY, GARDEN CITY PARK, NY 11040	CONSTRUCTION SERVICES	10,833,475.
DOYLE-BALDANTE, INC. 535 BROADHOLLOW ROAD, MELVILLE, NY 11747	CONSTRUCTION SERVICES	3,796,971.
ROBERT A. BOTHMAN 2690 SCOTT BLVD, SANTA CLARA, CA 95050	CONSTRUCTION SERVICES	2,428,633.
FREDANTE CONSTRUCTION, 18 WOODLEE ROAD, COLD SPRING HARBOR, NJ 11724	CONSTRUCTION SERVICES	2,135,050.
L.A. ENGINEERING 633 N. BARRANCA AVE, COVINA, CA 91723	CONSTRUCTION SERVICES	1,978,218.

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 62

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) STACY GAYHART ASSISTANT SECRETARY	40.00			X				95,856.	0.	26,191.
(28) POLLY POWELL ASSISTANT SECRETARY	40.00			X				87,363.	0.	15,053.
(29) ELIZABETH FEE ASSISTANT SECRETARY	40.00			X				69,684.	0.	2,321.
(30) LUCAS ST. CLAIR CHAIR	1.00	X		X				0.	0.	0.
(31) DAVID POPPE VICE CHAIR	1.00	X		X				0.	0.	0.
(32) FLORENCE WILLIAMS SECRETARY	1.00	X		X				0.	0.	0.
(33) JOE LIPSCOMB TREASURER	1.00	X		X				0.	0.	0.
(34) ALEX MARTIN JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(35) ALEXIS G. SANT DIRECTOR	1.00	X						0.	0.	0.
(36) ALLEGRA HAPPY HAYNES DIRECTOR	1.00	X						0.	0.	0.
(37) ALVIN WARREN DIRECTOR	1.00	X						0.	0.	0.
(38) ANITA GRAHAM DIRECTOR	1.00	X						0.	0.	0.
(39) L. ANTON SEALS JR. DIRECTOR	1.00	X						0.	0.	0.
(40) BEN JEALOUS DIRECTOR (THRU 10/25/23)	1.00	X						0.	0.	0.
(41) CAROLINE NIEMCZYK DIRECTOR (THRU 10/25/23)	1.00	X						0.	0.	0.
(42) CHRISTOPHER G. LEA DIRECTOR	1.00	X						0.	0.	0.
(43) CHRISTOPHER KNIGHT DIRECTOR	1.00	X						0.	0.	0.
(44) ELIOT MERRILL DIRECTOR	1.00	X						0.	0.	0.
(45) F. JEROME TONE DIRECTOR	1.00	X						0.	0.	0.
(46) IGNACIA S. MORENO DIRECTOR	1.00	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)

(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			
(47) J. FRANKLIN FARROW DIRECTOR	1.00	X					0.	0.	0.	
(48) JENNIFER JONES DIRECTOR	1.00	X					0.	0.	0.	
(49) JEROME VASCELLARO DIRECTOR	1.00	X					0.	0.	0.	
(50) JODI ARCHAMBAULT DIRECTOR	1.00	X					0.	0.	0.	
(51) JODY S. GILL DIRECTOR	1.00	X					0.	0.	0.	
(52) KEITH WEAVER DIRECTOR	1.00	X					0.	0.	0.	
(53) KENNETH WONG DIRECTOR	1.00	X					0.	0.	0.	
(54) LAURA RICHARDS DIRECTOR	1.00	X					0.	0.	0.	
(55) LINDI VON MUTIUS DIRECTOR	1.00	X					0.	0.	0.	
(56) LUIS BENITEZ DIRECTOR (THRU 10/9/23)	1.00	X					0.	0.	0.	
(57) MICHAEL PARISH DIRECTOR	1.00	X					0.	0.	0.	
(58) MICKEY FEARN DIRECTOR	1.00	X					0.	0.	0.	
(59) PHILIP JUNE DIRECTOR	1.00	X					0.	0.	0.	
(60) SHERYL TISHMAN DIRECTOR	1.00	X					0.	0.	0.	
(61) SUSAN D. WHITING DIRECTOR	1.00	X					0.	0.	0.	
(62) TAYLOR TOYNES DIRECTOR	1.00	X					0.	0.	0.	
(63) THEODORE ROOSEVELT V DIRECTOR	1.00	X					0.	0.	0.	
(64) THOMAS S. REEVE DIRECTOR	1.00	X					0.	0.	0.	
(65) WHITNEY HATCH DIRECTOR (THRU 10/25/23)	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c .....							252,903.		43,565.	

**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	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	544,030.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	35,853,496.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	139,383,448.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 20,020,626.				
	<b>h Total.</b> Add lines 1a-1f .....		175780974.				
Program Service Revenue	<b>2 a</b> GOVT COST REIMBURSEMENTS	Business Code					
		237990	47,631,115.	47631115.			
	<b>b</b> GOVT CONTRACT FEES	541300	4,047,278.	4,047,278.			
	<b>c</b> LANDOWNER FEE	813312	2,364,316.	2,364,316.			
	<b>d</b> CONTRACT REVENUE	541300	1,491,290.	1,491,290.			
	<b>e</b> PROJECT REIMBURSEMENTS	237990	334,968.	334,968.			
	<b>f</b> All other program service revenue .....	900099	160,168.	160,168.			
<b>g Total.</b> Add lines 2a-2f .....		56,029,135.					
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		3,793,089.			3793089.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
				621,043.			
	<b>b</b> Less: rental expenses ...	<b>6b</b>	0.				
	<b>c</b> Rental income or (loss)	<b>6c</b>	621,043.				
	<b>d</b> Net rental income or (loss) .....		621,043.			621,043.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
				99,756,526.	427,000.		
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	98,587,902.	5,883.			
	<b>c</b> Gain or (loss) .....	<b>7c</b>	1,168,624.	421,117.			
	<b>d</b> Net gain or (loss) .....		1,589,741.			1589741.	
<b>8 a</b> Gross income from fundraising events (not including \$ 544,030. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
			81,222.				
			616,698.				
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....		-535,476.			-535,476.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue	<b>11 a</b> _____	Business Code					
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....						
<b>12 Total revenue.</b> See instructions .....		237278506.	56029135.	0.	5468397.		

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	62,323,477.	62,323,477.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	6,251,435.	2,938,480.	1,636,665.	1,676,290.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	35,897,938.	19,033,157.	8,061,658.	8,803,123.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,023,073.	1,074,073.	452,569.	496,431.
<b>9</b> Other employee benefits	5,002,754.	2,622,286.	1,134,412.	1,246,056.
<b>10</b> Payroll taxes	3,342,058.	1,744,455.	766,975.	830,628.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	175,594.	107,411.	68,183.	
<b>c</b> Accounting	336,287.		336,287.	
<b>d</b> Lobbying	492,358.	492,358.		
<b>e</b> Professional fundraising services. See Part IV, line 17	1,701,587.			1,701,587.
<b>f</b> Investment management fees	379,311.		379,311.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	4,980,876.	3,601,437.	976,244.	403,195.
<b>12</b> Advertising and promotion	1,950,012.	231,358.	1,664,748.	53,906.
<b>13</b> Office expenses	2,435,386.	1,228,112.	633,917.	573,357.
<b>14</b> Information technology	999,915.	255,565.	697,698.	46,652.
<b>15</b> Royalties				
<b>16</b> Occupancy	4,062,196.	2,388,649.	809,117.	864,430.
<b>17</b> Travel	2,197,141.	1,369,722.	398,407.	429,012.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	744,472.	291,026.	95,332.	358,114.
<b>20</b> Interest	3,215,962.	3,215,962.		
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	73,244.		73,244.	
<b>23</b> Insurance	981,930.	512,538.	225,345.	244,047.
<b>24</b> 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.)				
<b>a</b> DESIGN & CONSTRUCTION	52,534,850.	52,534,250.		600.
<b>b</b> APPRAISAL SERVICES	1,591,275.	1,591,275.		
<b>c</b> HR AND PAYROLL SERVICES	1,323,124.		1,323,124.	
<b>d</b> ENVIRONMENTAL ASSESSMEN	1,199,753.	1,199,753.		
<b>e</b> All other expenses	1,263,130.	424,071.	554,136.	284,923.
<b>25</b> Total functional expenses. Add lines 1 through 24e	197,479,138.	159,179,415.	20,287,372.	18,012,351.
<b>26</b> 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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	390,272.	<b>1</b>	3,478,768.
	<b>2</b> Savings and temporary cash investments .....	21,439,137.	<b>2</b>	27,782,026.
	<b>3</b> Pledges and grants receivable, net .....	15,652,635.	<b>3</b>	26,509,781.
	<b>4</b> Accounts receivable, net .....	21,068,759.	<b>4</b>	25,232,140.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	4,000,000.	<b>7</b>	4,000,000.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	1,038,551.	<b>9</b>	1,622,059.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 2,564,319.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,336,639.	258,861.	<b>10c</b> 227,680.
	<b>11</b> Investments - publicly traded securities .....	91,391,811.	<b>11</b>	115,840,222.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	169,109,741.	<b>15</b>	191,845,418.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	324,349,767.	<b>16</b>	396,538,094.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	19,375,661.	<b>17</b>	26,460,492.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	12,377,513.	<b>19</b>	29,223,191.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	62,855,917.	<b>24</b>	58,402,077.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	43,084,169.	<b>25</b>	49,452,998.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	137,693,260.	<b>26</b>	163,538,758.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	36,842,383.	<b>27</b>	53,519,133.
	<b>28</b> Net assets with donor restrictions .....	149,814,124.	<b>28</b>	179,480,203.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	186,656,507.	<b>32</b>	232,999,336.
	<b>33</b> Total liabilities and net assets/fund balances .....	324,349,767.	<b>33</b>	396,538,094.

**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	237,278,506.
2	Total expenses (must equal Part IX, column (A), line 25)	2	197,479,138.
3	Revenue less expenses. Subtract line 2 from line 1	3	39,799,368.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	186,656,507.
5	Net unrealized gains (losses) on investments	5	7,170,648.
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	-627,187.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	232,999,336.

**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 on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	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 (2023)



**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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	98453912.	110279044	151611898	251423147	175780974	787548975
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	98453912.	110279044	151611898	251423147	175780974	787548975
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						45427644.
<b>6 Public support.</b> Subtract line 5 from line 4.						742121331

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 .....	98453912.	110279044	151611898	251423147	175780974	787548975
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	2810518.	3173730.	4349024.	5886281.	4414132.	20633685.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	101,271.		39,112.	110,890.	81,222.	332,495.
<b>11 Total support.</b> Add lines 7 through 10						808515155
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12 199,662,378.	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	91.79 %
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 .....	<b>15</b>	90.23 %
<b>16a 33 1/3% support test - 2023.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

(Complete only if you checked the box on line 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

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

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

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2022 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2022 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2023. 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 - 2022. 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 on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
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 - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

**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

2019 AMOUNT: \$ 101,271.

2020 AMOUNT: \$ 0.

2021 AMOUNT: \$ 39,112.

2022 AMOUNT: \$ 110,890.

2023 AMOUNT: \$ 81,222.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

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), 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), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>9,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>7,987,890.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>6,040,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>5,202,350.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>5,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>5,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number  <b>23-7222333</b>
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**Part 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
7	<hr/> <hr/> <hr/>	\$ <u>13,497,339.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>6,200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>5,495,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>5,355,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ <u>3,777,928.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

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

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

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2023**

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political 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-.

**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												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 70%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**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)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....	X		3,785.
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....	X		38,500.
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		887,910.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....	X		28,654.
<b>j</b> Total. Add lines 1c through 1i .....			958,849.
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

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

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

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

**Part IV Supplemental Information**

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

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

118TH CONGRESS, 1ST SESSION

JULY 1, 2023 DECEMBER 31, 2023

BUDGET / APPROPRIATIONS

H.R. 4821, S.2605 DEPARTMENT OF THE INTERIOR, ENVIRONMENT, AND RELATED

**Part IV** Supplemental Information (continued)

AGENCIES APPROPRIATIONS ACT OF 2024

H.R. 4820, S.2437 TRANSPORTATION, HOUSING, AND URBAN DEVELOPMENT, AND

RELATED AGENCIES APPROPRIATIONS ACT, 2024

H.R. 4368, S.2131 AGRICULTURE, RURAL DEVELOPMENT, FOOD AND DRUG

ADMINISTRATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2024

H.R. 4365, S.2587 DEPARTMENT OF DEFENSE APPROPRIATIONS ACT, 2024

H.R. 4366 THE CONSOLIDATED APPROPRIATIONS ACT, 2024

DEFENSE

H.R. 2670 S.2226 NATIONAL DEFENSE AUTHORIZATION ACT, 2024

NATURAL RESOURCES AND WILDLIFE

S.1149 RECOVERING AMERICA'S WILDLIFE ACT

H.R. 913, S.373 REINVESTING IN SHORELINE ECONOMIES AND ECOSYSTEMS  
(RISEE) ACT OF 2023

H.R. 3437, S.COLORADO OUTDOOR RECREATION AND ECONOMY (CORE) ACT

H.R. 1317, S.594 CONTINENTAL DIVIDE TRAIL COMPLETION ACT

H.R. RIM OF THE VALLEY CORRIDOR PRESERVATION ACT

H.R. BERRYESSA SNOW MOUNTAIN NATIONAL MONUMENT EXPANSION ACT

S. 1776 PROTECTING UNIQUE AND BEAUTIFUL LANDSCAPES BY INVESTING IN  
CALIFORNIA (PUBLIC) LANDS ACT

H.R. 3424, S.2631 FOREST CONSERVATION EASEMENT PROGRAM ACT OF 2023

S. 1366 FOREST INCENTIVES PROGRAM ACT OF 2023

LOCAL PARKS AND SCHOOLYARDS

H.R. 1065, S.448 OUTDOORS FOR ALL ACT

H.R. 6925 EVERY KID OUTDOORS REAUTHORIZATION ACT

H.R. 1705, S.919 A. DONALD MCEACHIN ENVIRONMENTAL JUSTICE FOR ALL ACT

**Part IV** Supplemental Information *(continued)*

S1538 LIVING SCHOOLYARDS ACT

S.873 AMERICA'S OUTDOOR RECREATION ACT

H.R. 6492 EXPLORE ACT

118TH CONGRESS, 2ND SESSION

JANUARY 1, 2024 - JUNE 30, 2024

BUDGET / APPROPRIATIONS

H.R. 4821, S.2605 DEPARTMENT OF THE INTERIOR, ENVIRONMENT, AND RELATED  
AGENCIES APPROPRIATIONS ACT OF 2024H.R. 4820, S.2437 TRANSPORTATION, HOUSING, AND URBAN DEVELOPMENT, AND  
RELATED AGENCIES APPROPRIATIONS ACT, 2024H.R. 4368, S.2131 AGRICULTURE, RURAL DEVELOPMENT, FOOD AND DRUG  
ADMINISTRATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2024

H.R. 4365, S.2587 DEPARTMENT OF DEFENSE APPROPRIATIONS ACT, 2024

H.R. 4366 THE CONSOLIDATED APPROPRIATIONS ACT, 2024

DEFENSE

H.R. 2670 S.2226 NATIONAL DEFENSE AUTHORIZATION ACT, 2024

NATURAL RESOURCES AND WILDLIFE

S.1149 RECOVERING AMERICA'S WILDLIFE ACT

H.R. 913, S.373 REINVESTING IN SHORELINE ECONOMIES AND ECOSYSTEMS  
(RISEE) ACT OF 2023

H.R. 3437, S.COLORADO OUTDOOR RECREATION AND ECONOMY (CORE) ACT

H.R. 1317, S.594 CONTINENTAL DIVIDE TRAIL COMPLETION ACT

H.R. RIM OF THE VALLEY CORRIDOR PRESERVATION ACT

H.R. BERRYESSA SNOW MOUNTAIN NATIONAL MONUMENT EXPANSION ACT

**Part IV** Supplemental Information *(continued)*

S. 1776 PROTECTING UNIQUE AND BEAUTIFUL LANDSCAPES BY INVESTING IN CALIFORNIA (PUBLIC) LANDS ACT

H.R. 3424, S.2631 FOREST CONSERVATION EASEMENT PROGRAM ACT OF 2023

S. 1366 FOREST INCENTIVES PROGRAM ACT OF 2023

LOCAL PARKS AND SCHOOLYARDS

H.R. 1065, S.448 OUTDOORS FOR ALL ACT

H.R. 6925 EVERY KID OUTDOORS REAUTHORIZATION ACT

H.R. 1705, S.919 A. DONALD MCEACHIN ENVIRONMENTAL JUSTICE FOR ALL ACT

S1538 LIVING SCHOOLYARDS ACT

S.873 AMERICA'S OUTDOOR RECREATION ACT

H.R. 6492 EXPLORE ACT

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

2023

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two questions about donor property and grant fund usage.

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checked: Preservation of land for public use, natural habitat, open space, historically important land area, certified historic structure). 2. Conservation contribution details table. 3. Number of easements modified. 4. Number of states. 5. Written policy. 6. Staff and volunteer hours. 7. Expenses incurred. 8. Section 170(h) requirements. 9. Reporting requirements.

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.

Form with sections 1a, 1b, and 2 regarding reporting requirements for art and historical treasures collections.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

**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 in 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	29,826,690.	26,632,833.	28,746,611.	21,022,700.	19,322,298.
b Contributions	4,419,208.	2,239,740.	2,418,374.	2,195,833.	2,274,589.
c Net investment earnings, gains, and losses	2,612,779.	954,117.	-4,532,152.	5,528,078.	-574,187.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	36,858,677.	29,826,690.	26,632,833.	28,746,611.	21,022,700.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 39.1200 %
  - b Permanent endowment 49.6300 %
  - c Term endowment 11.2500 %
- 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"/> | <b>3b</b> |                                     |
- 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		453,008.	453,008.	0.
c Leasehold improvements		308,310.	207,484.	100,826.
d Equipment		1,445,521.	1,395,571.	49,950.
e Other		357,480.	280,576.	76,904.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				227,680.

**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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**Part VIII Investments - Program Related.**

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

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

**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	2,317,993.
(2) OTHER DEPOSITS	322,184.
(3) OPEN SPACE HOLDINGS	105,622,051.
(4) ASSETS HELD IN CHARITABLE TRUSTS	71,278,261.
(5) INTEREST RECEIVABLE	476,705.
(6) ESCROW CLEARING	2,666,629.
(7) OPERATING LEASE ASSETS	9,161,595.
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	191,845,418.

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITIES TO BENEFICIARIES OF CHARITABLE TRUSTS	38,935,994.
(4) MITIGATION ADVANCES	479,247.
(5) OPTION PAYMENTS RECEIVED	200,000.
(6) OPERATING LEASE LIABILITIES	9,837,757.
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	49,452,998.

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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	244,842,602.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	7,170,648.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	403,937.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	7,574,585.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	237,268,017.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	10,489.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	10,489.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	237,278,506.

**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.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	198,499,773.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	403,937.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	616,698.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	1,020,635.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	197,479,138.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	197,479,138.

**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, 2024, EASEMENTS VALUED AT \$51,489,000 WERE ACQUIRED AND \$51,489,000 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 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.

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 FINANCIAL STATEMENTS. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES RECLASSIFIED TO REVENUE	-616,698.
UNCOLLECTIBLE GRANTS	181,263.
RETURNED GRANTS	445,924.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	10,489.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES RECLASSIFIED TO REVENUE	616,698.
--	----------

**SCHEDULE G  
(Form 990)**

**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.

**2023**

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](http://www.irs.gov/Form990) for instructions and the latest information.

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

**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			
M&R STRATEGIC SERVICES - 1101 CONNECTICUT AVE NW,	ANNUAL FUND		X	1,985,462.	791,675.	1,193,787.
CORDER AND WALLER CONSULTING - 232 COLLEGE BLVD, SAN	5 MILE CREEK GREENBELT PLAN		X	1,099,436.	52,201.	1,047,235.
MAL WARWICK & ASSOCIATES, INC - 2550 9TH STREET, SUITE 103,	ANNUAL FUND		X	1,012,367.	403,667.	608,700.
MARBLE BRIDGE FUNDING GROUP - P.O. BOX 8195, WALNUT CREEK,	ONLINE FUNDRAISING		X	843,401.	70,000.	773,401.
RWT PRODUCTION, LLC - 8932 ORANGE HUNT LANE, ANNANDALE,	ANNUAL FUND		X	446,127.	177,887.	268,240.
KEY ACQUISITION PARTNERS - 181 HARRY S. TRUMAN PARKWAY,	ANNUAL FUND		X	215,840.	86,063.	129,777.
CHAPMAN CUBINE ALLEN + HUSSEY - 2000 15TH STREET N., SUITE	ANNUAL FUND		X	176,543.	70,394.	106,149.
THE STELTER COMPANY - P.O. BOX 5228, DES MOINES, IA	PLANNED GIVING		X	0.	42,883.	-42,883.
<b>Total</b>				5,779,176.	1,694,770.	4,084,406.

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 (add col. (a) through col. (c))
		50TH CLOSING EVENT	GA ANNUAL	1	
	Revenue	(event type)	(event type)	(total number)	
1	Gross receipts .....	288,587.	243,169.	93,496.	625,252.
2	Less: Contributions .....	249,139.	224,149.	70,742.	544,030.
3	Gross income (line 1 minus line 2) .....	39,448.	19,020.	22,754.	81,222.
<b>Direct Expenses</b>					
4	Cash prizes .....				
5	Noncash prizes .....	3,286.	762.		4,048.
6	Rent/facility costs .....	65,721.	14,656.	15,908.	96,285.
7	Food and beverages .....	119,451.	36,707.	25,950.	182,108.
8	Entertainment .....	33,300.	2,000.		35,300.
9	Other direct expenses .....	246,542.	47,071.	5,344.	298,957.
10	Direct expense summary. Add lines 4 through 9 in column (d) .....				616,698.
11	Net income summary. Subtract line 10 from line 3, column (d) .....				-535,476.

**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 .....				
<b>Direct Expenses</b>					
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: M&R STRATEGIC SERVICES

(I) ADDRESS OF FUNDRAISER: 1101 CONNECTICUT AVE NW, WASHINGTON, DC 20036

(I) NAME OF FUNDRAISER: CORDER AND WALLER CONSULTING

(I) ADDRESS OF FUNDRAISER: 232 COLLEGE BLVD, SAN ANTONIO, TX 78209

(I) NAME OF FUNDRAISER: MAL WARWICK & ASSOCIATES, INC

**Part IV** Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 2550 9TH STREET, SUITE 103, BERKELEY, CA 94710

(I) NAME OF FUNDRAISER: MARBLE BRIDGE FUNDING GROUP

(I) ADDRESS OF FUNDRAISER: P.O. BOX 8195, WALNUT CREEK, CA 94596

(I) NAME OF FUNDRAISER: RWT PRODUCTION, LLC

(I) ADDRESS OF FUNDRAISER: 8932 ORANGE HUNT LANE, ANNANDALE, VA 22003

(I) NAME OF FUNDRAISER: KEY ACQUISITION PARTNERS

(I) ADDRESS OF FUNDRAISER:

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

(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: THE STELTER COMPANY

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

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

**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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
COMMUNITY FOUNDATION SANTA CRUZ COUNTY - 7807 SOQUEL DRIVE - APTOS, CA 95003	94-2808039	501(C)(3)	1,425,000.	0.			GRANTS
LOS ANGELES NEIGHBORHOOD LAND TRUST - 1689 BEVERLY BOULEVARD - LOS ANGELES, CA 90026	38-3687836	501(C)(3)	400,000.	0.			GRANTS
MAINE COMMUNITY FOUNDATION 245 MAIN ST. ELLSWORTH, ME 04605	01-0391479	501(C)(3)	355,455.	0.			GRANTS
FLATHEAD LAND TRUST 33 2ND ST., E. #5 KALISPELL, MT 59903	36-3479966	501(C)(3)	175,000.	0.			GRANTS
FEATHER RIVER LAND TRUST P.O. BOX 1826 QUINCY, CA 95971	68-0449687	501(C)(3)	159,750.	950,000.	APPRAISAL	BARGAIN SALE OF 1826 ACRES OF LAND IN CA	GRANTS, LAND CONSERVATION
FARIBAULT PUBLIC SCHOOLS 710 17TH ST SW FARIBAULT, MN 55021	41-6003618	FARIBAULT SCHOOLS	155,000.	0.			GRANTS

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 77.

**3** Enter total number of other organizations listed in the line 1 table 6.

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

Schedule I (Form 990) 2023

**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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY AND COUNTY OF DENVER 201 W COLFAX AVENUE DENVER, CO 80202	84-6000580	CITY OF DENVER	150,000.	0.			GRANTS
BOULDER COUNTY, COLORADO PO BOX 471 BOULDER, CO 80306	84-6000748	BOULDER COUNTY	150,000.	0.			GRANTS
BROOKLYN CTR COMMUNITY SCHOOLS 5910 SHINGLE CREEK PKWY BROOKLYN CENTER, MN 55430	41-6009038	BROOKLYN SCHOOLS	143,194.	0.			PARK CONSTRUCTION GRANT
OREGON RANGELAND TRUST P.O. BOX 2000 PENDLETON, OR 97801	47-0877475	501(C)(3)	94,786.	0.			GRANTS
CARROLL COUNTY BOARD OF COMMISSIONERS - PO BOX 338 - CARROLLTON, GA 30112	58-6000794	CARROLL COUNTY	94,157.	0.			PARK CONSTRUCTION GRANT
SEATTLE CHILDREN'S RESEARCH INSTITUTE - 4800 SAND POINT WAY NE - SEATTLE, WA 98105	91-0564748	501(C)(3)	88,000.	0.			GRANTS
COLORADO FFA LEWIS FARM PO BOX 1000 GREELEY CO, CO 80632	88-3252268		77,515.	0.			GRANTS
THE NATURE CONSERVANCY 2424 SPRUCE STREET BOULDER, CO 80302	53-0242652	501(C)(3)	74,314.	8,334,634.	APPRAISAL	DONATION OF 11906.62 ACRES OF LAND IN CO	GRANTS, LAND CONSERVATION
CHINATOWN 808 EVENTS PO BOX 37224 HONOLULU, HI 96837	92-1147969	501(C)(3)	65,000.	0.			CONTRIBUTIONS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLORADO CATTLEMAN'S AGRICULTURAL LAND TRUST - 8833 RALSTON ROAD - ARVADA, CO 80002	84-1317592	501(C)(3)	62,500.	952,400.	APPRAISAL	BARGAIN SALE OF 1550.43 ACRES OF LAND IN CO	GRANTS, LAND CONSERVATION
HUNTER CREEK HISTORICAL FOUNDATION 211 E HALLAM STREET ASPEN, CO 81611	86-1726264	501(C)(3)	62,418.	0.			GRANTS
GROUNDWORK BRIDGEPORT INC. 1001 MAIN ST., #20 BRIDGEPORT, CT 06604	06-1556949	501(C)(3)	45,000.	0.			GRANTS
DUCKS UNLIMITED, INC. 1220 EISENHOWER PLACE ANN ARBOR, MI 48108	13-5643799	501(C)(3)	37,184.	0.			GRANTS
URBAN AGRICULTURE COOPERATIVE 58 CRAWFORD ST, #1 NEWARK, NJ 07102	82-1079237	501(C)(3)	36,663.	0.			PARK CONSTRUCTION GRANT
GREENLATINOS 1919 14TH ST SUITE 700 BOULDER, CO 80302	26-3386082	501(C)(3)	30,000.	0.			CONTRIBUTIONS
CITY OF RALEIGH PO BOX 590 RALEIGH, NC 27602		CITY OF RALEIGH	28,600.	0.			GRANTS
LAND TRUST ALLIANCE 1250 H ST., NW, SUITE 600 WASHINGTON, DC 20005	04-2751357	501(C)(3)	27,500.	0.			CONTRIBUTIONS
SANTA CRUZ COUNTY RESIDENTS 555 CAPITOL MALL, SUITE 400 SACRAMENTO, CA 95814	93-3966197	527	25,000.	0.			CONTRIBUTIONS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARTH ISLAND INSTITUTE LLC 2150 ALLSTON WAY STE 460 BERKELEY, CA 94704	94-2889684	501(C)(3)	25,000.	0.			CONTRIBUTIONS
FRIENDS OF THE SEARS SUNKEN GARDEN 4559 SOUTH FORRESTVILLE CHICAGO, IL 60653	87-3629629	501(C)(3)	25,000.	0.			GRANTS
FIRST MISSIONARY BAPTIST CHURCH OF NICODEMUS - 421 WASHINGTON AVE - BOGUE, KS 67625	85-3493462	501(C)(3)	23,956.	0.			GRANTS
RALPH WILSON PARK CONSERVANCY ONE SENECA STREET SUITE 2969 BUFFALO, NY 14213	86-1541384	501(C)(3)	23,600.	0.			GRANTS
UNITED PARKS AS ONE P.O. BOX 1372 NEWARK, NJ 07101	47-3148873	501(C)(3)	22,311.	0.			GRANTS
ROYAL RIVER CONSERVATION TRUST P.O. BOX 90 YARMOUTH, ME 04096	01-0472430	501(C)(3)	20,000.	0.			GRANTS
CITY PARKS ALLIANCE 1777 CHURCH ST., NW WASHINGTON, DC 20036	80-0015566	501(C)(3)	20,000.	0.			CONTRIBUTIONS
WWRC ACTION FUND 1402 THIRD AVENUE, SUITE 507 SEATTLE, WA 98101	91-1445276	501(C)(4)	20,000.	0.			CONTRIBUTIONS
UNIVERSITY OF WISCONSIN FOUNDA 1848 UNIVERSITY AVE MADISON, WI 53726	39-0743975	501(C)(3)	20,000.	0.			CONTRIBUTIONS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF DES MOINES, IOWA 400 ROBERT D. RAY DRIVE DES MOINES, IA 50309	42-6004514	CITY OF DES MOIN	20,000.	0.			GRANTS
THE BOSTON PROJECT MINISTRIES 15 ELMHURST ST. DORCHESTER, MA 02124	04-3395307	501(C)(3)	18,000.	0.			GRANTS
ASALH - ASSOCIATION FOR STUDY OF AFRICAN AMERICAN LIFE HISTORY - 301 RHODE ISLAND AVE NW #2204 - WASHINGTON, DC 20001	53-0219640	501(C)(3)	15,000.	0.			CONTRIBUTIONS
OUTSIDE INTERACTIVE INC 1600 PEARL ST STE 300 BOULDER, CO 80302	84-2875265		15,000.	0.			CONTRIBUTIONS
VIRGINIA OUTDOORS FOUNDATION 900 S MAIN STREET BLACKSBURG, VA 24060	54-1038487	VOF	15,000.	1,002,950.	APPRAISAL	BARGAIN SALE OF 749.95 ACRES OF LAND IN VA	GRANTS, LAND CONSERVATION
ROARING FORK MOUNTAIN BIKE ASSOCIATION - PO BOX 2635 - ASPEN, CO 81612	46-5412595	501(C)(3)	15,000.	0.			GRANTS
ROARING FORK OUTDOOR VOLUNTEER 520 SOUTH THIRD STREET #32 CARBONDALE, CO 81623	84-1302819	501(C)(3)	15,000.	0.			GRANTS
SUMMIT-UNIVERISTY PLANNING 165 WESTERN AVE N SUITE 8 SAINT PAUL, MN 55102	41-1278449	501(C)(3)	14,000.	0.			GRANTS
I9 SPORTS ASSOCIATION 6650 HAWAII KAI DR #110 HONOLULU, HI 96825	46-2920829	501(C)(3)	13,299.	0.			GRANTS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD CO BIKE CLUB LLC 495 FLATBUSH AVE #55 BROOKLYN, NY 11225	85-1622189		12,000.	0.			CONTRIBUTIONS
THE WAIPA FOUNDATION P.O. BOX 1189 HANAIEI, HI 96714	99-0313224	501(C)(3)	10,000.	200,000.	APPRAISAL	BARGAIN SALE OF 0.25 ACRES OF LAND IN HI	GRANTS, LAND CONSERVATION
KEYSTONE POLICY CENTER 1628 STS. JOHN ROAD KEYSTONE, CO 80435	84-0688506	501(C)(3)	10,000.	0.			CONTRIBUTIONS
GREEN 2.0 1730 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036	46-5220283	501(C)(3)	10,000.	0.			CONTRIBUTIONS
AAAM - ASSOCIATION OF AFRICAN AMERICAN MUSEUMS - PO BOX 23698 - WASHINGTON, DC 20026	31-1609577	501(C)(3)	10,000.	0.			CONTRIBUTIONS
BOSTON FOOD FOREST COALITION INC 23 EGGLESTON ST. JAMAICA PLAIN, MA 02130	46-5327936	501(C)(3)	10,000.	0.			GRANTS
FOR OAK CLIFF 907 EAST LEDBETTER DR DALLAS, TX 75216	81-3768369	501(C)(3)	10,000.	0.			GRANTS
PARQUE PADRINOS 504 S CHELAN AVE WENATCHEE, WA 98801	86-3225539		10,000.	0.			GRANTS
TRINIDAD COMMUNITY FOUNDATION PO BOX 186 TRINIDAD, CO 81082	20-5077446	501(C)(3)	10,000.	0.			GRANTS

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IN A LANDSCAPE 5331 S MACADAM AVE # 258-1007 PORTLAND, OR 97239	82-4203573	501(C)(3)	9,000.	0.			CONTRIBUTIONS
THE CONNECTICUT LAND CONSERVATION COUNCIL, INC - 27 WASHINGTON ST. - MIDDLETOWN, CT 06457	82-2683386	501(C)(3)	8,000.	0.			CONTRIBUTIONS
PARK PRIDE, INC. 233 PEACHTREE ST., STE 1600 ATLANTA, GA 30303	58-1883895	501(C)(3)	7,760.	0.			CONTRIBUTIONS
CRABTREE FARMS 1000 E 30TH ST. CHATTANOOGA, TN 37409	62-1760383	501(C)(3)	6,300.	0.			GRANTS
ELLA LIBRARY P.O. BOX 3034 CHATTANOOGA, TN 37404	83-1892994	501(C)(3)	6,300.	0.			GRANTS
NET RESOURCE FOUNDATION 4001 HUGHES AVE SUITE 205 CHATTANOOGA, TN 37410	81-1168775	501(C)(3)	6,300.	0.			GRANTS
PACOIMA BEAUTIFUL 13520 VAN NUYS BLVD. PACOIMA, CA 91331	95-4770745	501(C)(3)	6,000.	0.			CONTRIBUTIONS
ECOADAPT P.O. BOX 11195 BAINBRIDGE ISLAND, WA 98110	26-3303629	501(C)(3)	5,500.	0.			CONTRIBUTIONS
OSWIT LAND TRUST P.O. BOX 4020 PALM SPRINGS, CA 92263	83-2006672	501(C)(3)	0.	3,570,000.	APPRAISAL	BARGAIN SALE OF 4430.97 ACRES OF LAND IN CA	LAND CONSERVATION

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEPARTMENT OF NAVY 750 PACIFIC HIGHWAY SAN DIEGO , CA 92132-5190		US NAVY	0.	5,599,050.	APPRAISAL	BARGAIN SALE OF 4430.97 ACRES OF LAND IN CA, 1598.82	LAND CONSERVATION
SANTA ROSA COUNTY, FLORIDA 6495 CAROLINE STREET, SUITE M MILTON, FL 32570		SANTA ROSA COUNT	0.	530,351.	APPRAISAL	BARGAIN SALE OF 963.52 ACRES OF LAND IN FL	LAND CONSERVATION
STATE OF ARIZONA - BY & THROUGH THE ARIZONA STATE PARKS BOARD - 1110 W. WASHINGTON STREET, STE. 100 - PHOENIX, AZ 85007		STATE OF AZ	0.	2,040,000.	APPRAISAL	BARGAIN SALE OF 734.37 ACRES OF LAND IN AZ	LAND CONSERVATION
STATE OF NEW HAMPSHIRE 172 PEMBROKE ROAD CONCORD , NH 03301		STATE OF NH	0.	331,207.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 1250.07 ACRES OF LAND IN NH	LAND CONSERVATION
UPPER SACO VALLEY LAND TRUST PO BOX 2233 CONWAY, NH 03818	02-0521030	501(C)(3)	0.	331,207.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 1250.07 ACRES OF LAND IN NH	LAND CONSERVATION
MN DEPT OF NATURAL RESOURCES, DIVISION OF FISH AND WILDLIFE - 500 LAFAYETTE ROAD - ST. PAUL, MN 55155		MN DNR	0.	9,259,268.	APPRAISAL	BARGAIN SALE OF 305.27 ACRES OF LAND IN MN,	LAND CONSERVATION
MN DEPT OF NATURAL RESOURCES, DIVISION OF LANDS AND MINERALS - 500 LAFAYETTE ROAD - ST. PAUL, MN 55155		MN DNR	0.	6,106,000.	APPRAISAL	DONATION OF 2529.17 ACRES OF LAND IN MN	LAND CONSERVATION
SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT - 2379 BROAD STREET - BROOKSVILLE, FL 34604-6899		STATE OF FL	0.	30,640.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 191.92 ACRES OF LAND IN FL	LAND CONSERVATION
KNOX, INC. ATTN: PATRICK DOYLE, 75 LAUREL ST HARTFORD, CT 06106	06-0985421	501(C)(3)	0.	230,000.	APPRAISAL	DONATION OF 1.18 ACRES OF LAND IN CT	LAND CONSERVATION

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY - P.O. BOX 196300 - NASHVILLE, TN 37219		NASHVILLE COUNTY	0.	375,000.	APPRAISAL	BARGAIN SALE OF 3.95 ACRES OF LAND IN TN	LAND CONSERVATION
TENNGREEN LAND CONSERVANCY 1213A 16TH AVE S NASHVILLE, TN 37212	62-1557574	501(C)(3)	0.	375,000.	APPRAISAL	BARGAIN SALE OF 3.95 ACRES OF LAND IN TN	LAND CONSERVATION
US FISH & WILDLIFE SERVICE EASEMENT MANAGER OF THE LOST TRAIL CONSERVATION AREA, 922 BOOTLEGGERS TRAIL -		FWS	0.	1,683,560.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 13403.57 ACRES OF LAND IN MT	LAND CONSERVATION
STATE OF HAWAII - BOARD OF LAND AND NATURAL RESOURCES - ATTN: DAWN CHANG, CHAIRPERSON, ATTN: DAWN CHANG, CHAIRPERSON - HONOLULU, HI		STATE OF HI	0.	7,220,000.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 256.9 ACRES OF LAND IN HI	LAND CONSERVATION
CARROLL COUNTY, GEORGIA BOARD OF COMMISSIONERS - 323 NEWNAN STREET, ROOM 200 - CARROLLTON, GA 30117		CARROLL COUNTY	0.	1,595,000.	APPRAISAL	BARGAIN SALE OF 896 ACRES OF LAND IN GA	LAND CONSERVATION
MCKINLEYVILLE COMMUNITY SERVICES DISTRICT - 1656 SUTTER ROAD - MCKINLEYVILLE, CA 95519		MCKINLEYVILLE CS	0.	4,000,000.	APPRAISAL	DONATION OF 599 ACRES OF LAND IN CA	LAND CONSERVATION
MAINE BUREAU OF PARKS AND LANDS 22 STATE HOUSE STATION AUGUSTA, ME 04333-0022		DACF	0.	57,000.	APPRAISAL	BARGAIN SALE OF 198.61 ACRES OF LAND IN ME	LAND CONSERVATION
COUNTY OF MARIN DAVID SPEER - FACILITIES PLANNING & DEVELOPMENT MANAGER, 3501 CIVIC CENTER D		COUNTY OF MARIN	0.	346,750.	PUBLIC AGENCY VALUATION	DONATION OF 157.31 ACRES OF LAND IN CA; DONATION OF	LAND CONSERVATION
CITY OF CHATTANOOGA ATTN: GAIL HART, REAL PROEPRTY MANAGER, 101 E. 11TH STREET, SUITE G-18 - CHA		CITY OF CHATTANO	0.	164,000.	APPRAISAL	BARGAIN SALE OF 1.39 ACRES OF LAND IN TN	LAND CONSERVATION

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISANTI COUNTY, MINNESOTA ATTN: BARRY WENDORF, 555 18TH AVENUE CAMBRIDGE, MN 55008		ISANTI COUNTY	0.	1,365,000.	APPRAISAL	BARGAIN SALE OF 732.75 ACRES OF LAND IN MN	LAND CONSERVATION
FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION, DIVISION OF STATE LANDS - 3900 COMMONWEALTH BLVD., MAIL STATION 115 -		STATE OF FLORIDA	0.	685,442.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 1543.62 ACRES OF LAND IN FL	LAND CONSERVATION
NATURAL RESOURCES CONSERVATION SERVICE - 356 MOUNTAIN VIEW DRIVE, SUITE 105 - COLCHESTER, VT 05446		NRCS	0.	74,303.	PUBLIC AGENCY VALUATION	BARGAIN SALE OF 592.41 ACRES OF LAND IN VT	LAND CONSERVATION
NORTHERN NECK LAND CONSERVANCY P.O. BOX 697, 483 MAIN STREET, SUITE WARSAW, VA 22572	41-2140631	501(C)(3)	0.	342,850.	APPRAISAL	BARGAIN SALE OF 351.66 ACRES OF LAND IN VA	LAND CONSERVATION
PARK COUNTY - MT 414 E. CALLENDER ST. LIVINGSTON LIVINGSTON, MT 59047		PARK COUNTY	0.	205,000.	APPRAISAL	DONATION OF 21.96 ACRES OF LAND IN MT	LAND CONSERVATION

**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

**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: DEPARTMENT OF NAVY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 4430.97 ACRES OF  
LAND IN CA, 1598.82 ACRES OF LAND IN OR AND 110

**Part IV** Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

MN DEPT OF NATURAL RESOURCES, DIVISION OF FISH AND WILDLIFE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: BARGAIN SALE OF 305.27 ACRES OF LAND IN MN, DONATION OF 615.95 ACRES OF LAND IN

NAME OF ORGANIZATION OR GOVERNMENT: COUNTY OF MARIN

(G) DESCRIPTION OF NON-CASH ASSISTANCE: DONATION OF 157.31 ACRES OF LAND IN CA; DONATION OF EQUIPMENT & FIXTURE

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

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		

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

Schedule J (Form 990) 2023

**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 and/or 1099-NEC 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)	547,638.	0.	0.	23,100.	9,396.	580,134.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PATRICIA WATSON SVP/CHIEF PHILANTHROPY OFFICER	(i)	398,954.	0.	0.	23,100.	10,085.	432,139.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KENNETH J. DANTER SVP, FIELD PROGRAMS	(i)	306,325.	0.	0.	18,780.	30,971.	356,076.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JAMES H. OBENDORF SVP/CHIEF FINANCIAL & ADMIN OFFICER	(i)	307,783.	0.	0.	21,991.	20,962.	350,736.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) HOWARD FRUMKIN SVP, LAND AND PEOPLE LAB	(i)	289,736.	0.	0.	20,287.	1,596.	311,619.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) WILLIAM LEE SVP, POLICY, ADVOCACY, & GOV'T RELAT	(i)	247,312.	0.	0.	15,292.	30,971.	293,575.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) I LING THOMPSON SVP, CCMO (THRU 8/31/23)	(i)	252,338.	0.	0.	17,819.	13,957.	284,114.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DAVID M. CARSON SVP, GENERAL COUNSEL/CORP SECRETARY	(i)	240,444.	0.	0.	12,136.	15,644.	268,224.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KATHERINE M. PANDORI VP, DIRECTOR OF FINANCE & ACTG	(i)	232,720.	500.	0.	14,250.	10,429.	257,899.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MARGARET MADDEN VP, ASSOCIATE GENERAL COUNSEL	(i)	211,932.	0.	0.	15,100.	10,794.	237,826.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) TILY SHUE ASSISTANT SECRETARY	(i)	206,692.	0.	0.	11,739.	18,885.	237,316.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) THOMAS TYNER ASSISTANT SECRETARY	(i)	195,851.	0.	0.	5,975.	20,944.	222,770.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ANTHONY A. TRAVERSO ASSISTANT SECRETARY	(i)	187,997.	0.	0.	12,555.	19,704.	220,256.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) DENISE MULLANE ASSISTANT SECRETARY	(i)	182,439.	0.	0.	13,023.	17,433.	212,895.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) PEGGY CHIU ASSISTANT SECRETARY	(i)	166,877.	0.	0.	11,832.	28,616.	207,325.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) GILMAN MILLER ASSISTANT SECRETARY	(i)	167,269.	0.	0.	11,808.	24,094.	203,171.	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 and/or 1099-NEC 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) GORDON OKAWA	(i)	141,576.	0.	0.	10,143.	20,731.	172,450.	0.
ASSISTANT SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) ALEX GHIO	(i)	155,298.	0.	0.	10,952.	1,898.	168,148.	0.
ASSISTANT SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) JANE KIM	(i)	136,810.	0.	0.	4,259.	18,646.	159,715.	0.
ASSISTANT SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) MIMI FALLER HELVIE	(i)	129,460.	0.	0.	9,228.	20,288.	158,976.	0.
ASSISTANT SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) PETER FODOR	(i)	138,949.	0.	0.	9,308.	10,546.	158,803.	0.
ASSISTANT SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2023**

Open to Public Inspection

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](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

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	70	8,449,711.	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	29	11,570,915.	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** **1**

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 3 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
33		

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

Schedule M (Form 990) 2023

**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.

Horizontal lines for supplemental information input.

**SCHEDULE O  
(Form 990)**

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 Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

THE TRUST FOR PUBLIC LAND

Employer identification number

23-7222333

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  
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

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

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

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.

Name of the organization <b>THE TRUST FOR PUBLIC LAND</b>	Employer identification number <b>23-7222333</b>
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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 XI, LINE 9, CHANGES IN NET ASSETS:

UNCOLLECTIBLE GRANTS	-181,263.
RETURNED GRANTS	-445,924.
TOTAL TO FORM 990, PART XI, LINE 9	-627,187.

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**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



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

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

