



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Open To Public Inspection

Form **990**

## Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

**2006**

Department of the Treasury  
Internal Revenue Service

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

Open to Public  
Inspection

A For the 2006 calendar year, or tax year beginning

and ending

- B Check if applicable:
- ☐ Address change
  - ☐ Name change
  - ☐ Initial return
  - ☐ Final return
  - ☐ Amended return
  - ☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization

**INDIAN LAND TENURE FOUNDATION**

Number and street (or P.O. box if mail is not delivered to street address)

**151 E COUNTY RD B2**

City or town, state or country, and ZIP + 4

**LITTLE CANADA, MN 55117**

D Employer identification number

**41-2014273**

E Telephone number

**651-766-8999**

F Accounting method  
☐ Other (specify)

☐ Cash ☒ Accrual

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates **N/A**

H(c) Are all affiliates included? **N/A** ☐ Yes ☐ No  
(If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Group Exemption Number **N/A**

M Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: **WWW.INDIANLANDTENURE.ORG**

J Organization type (check only one) ☒ 501(c) ( 3 ) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ If the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **1,749,256.**

### Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

1 Contributions, gifts, grants, and similar amounts received:			
a Contributions to donor advised funds	1a		
b Direct public support (not included on line 1a)	1b	<b>140,621.</b>	
c Indirect public support (not included on line 1a)	1c	<b>546,000.</b>	
d Government contributions (grants) (not included on line 1a)	1d	<b>445,739.</b>	
e Total (add lines 1a through 1d) (cash \$ <b>1,132,360.</b> noncash \$ )	1e	<b>1,132,360.</b>	
2 Program service fees, including government fees and contracts (from Part VII, line 93)	2	<b>58,017.</b>	
3 Membership dues and assessments	3		
4 Interest on savings and temporary cash investments	4	<b>21,412.</b>	
5 Dividends and interest from securities	5	<b>495,044.</b>	
6 a Gross rents	6a		
b Less: rental expenses	6b		
c Net rental income or (loss). Subtract line 6b from line 6a	6c		
7 Other investment income (describe in Part VII)	7		
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other
b Less: cost or other basis and sales expenses	8a		
c Gain or (loss) (attach schedule)	8b		
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8c		
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
a Gross revenue (not including \$ <b>9,550.</b> of contributions reported on line 1a)	9a	<b>7,822.</b>	
b Less: direct expenses other than fundraising expenses	9b	<b>10,883.</b>	
c Net income or (loss) from special events. Subtract line 9b from line 9a	9c	<b>-3,061.</b>	
10 a Gross sales of inventory, less returns and allowances	10a	<b>26,942.</b>	
b Less: cost of goods sold	10b		
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	<b>26,942.</b>	
11 Other revenue (from Part VII, line 103)	11	<b>7,659.</b>	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	<b>1,738,373.</b>	
13 Program services (from line 44, column (B))	13	<b>2,100,937.</b>	
14 Management and general (from line 44, column (C))	14	<b>357,595.</b>	
15 Fundraising (from line 44, column (D))	15	<b>263,707.</b>	
16 Payments to affiliates (attach schedule)	16		
17 Total expenses. Add lines 13 and 14, column (A)	17	<b>2,722,239.</b>	
18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	<b>-983,866.</b>	
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	<b>21,151,705.</b>	
20 Other changes in net assets or fund balances (attach explanation)	20	<b>2,240,014.</b>	
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	<b>22,407,853.</b>	

832001 01-18-07 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2006)

94-17

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 noncash \$ 0) check here <input type="checkbox"/>				
22b (attach schedule)			STATEMENT 7	
22b	607,530.	607,530.		
23				
24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A STMT 6	698,817.	506,228.	80,605.	111,984.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	193,296.	97,881.	50,644.	44,771.
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27	48,271.	25,949.	9,808.	12,514.
29 Payroll taxes	59,703.	40,001.	8,955.	10,747.
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies	9,585.	6,422.	1,438.	1,725.
34 Telephone	23,176.	15,528.	3,476.	4,172.
35 Postage and shipping	24,159.	16,187.	3,623.	4,349.
36 Occupancy				
37 Equipment rental and maintenance	3,943.	2,642.	591.	710.
38 Printing and publications	24,984.	16,739.	3,748.	4,497.
39 Travel	102,861.	59,439.	34,537.	8,885.
40 Conferences, conventions, and meetings				
41 Interest	25,270.	16,931.	3,790.	4,549.
42 Depreciation, depletion, etc. (attach schedule)	42,256.	28,312.	6,338.	7,606.
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 5	858,388.	661,148.	150,042.	47,198.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	2,722,239.	2,100,937.	357,595.	263,707.

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;

(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

**Part III** Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 8</u>		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		
<b>a</b>	<u>TO EDUCATE INDIAN AND NON-INDIAN PEOPLE ON LAND TENURE ISSUES; TO REDUCE POVERTY AND DETERIORATION AMONG INDIAN COMMUNITIES; AND TO PRESERVE TRIBAL CULTURE, HISTORY AND NATURAL RESOURCES BY ASSISTING INDIAN PEOPLE IN ACQUIRING AND MANAGING THEIR LAND.</u>	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	2,100,937.
<b>b</b>		
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>c</b>		
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b>		
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e</b>	Other program services (attach schedule)	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f</b>	<b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ►	<b>2,100,937.</b>

Form 990 (2006)

**Part IV Balance Sheets** (See the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing	78,790.	71,806.
	46 Savings and temporary cash investments	1,486,519.	1,942,465.
	47 a Accounts receivable	175,956.	
	b Less: allowance for doubtful accounts	12,127.	175,956.
	48 a Pledges receivable		
	b Less: allowance for doubtful accounts		
	49 Grants receivable	50,365.	361,365.
	50 a Receivables from current and former officers, directors, trustees, and key employees		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		
	51 a Other notes and loans receivable		
	b Less: allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges	33,955.	3,490.
	54 a Investments - publicly-traded securities		
	b Investments - other securities		
55 a Investments - land, buildings, and equipment: basis			
b Less: accumulated depreciation			
56 Investments - other	SEE STATEMENT 9	20,596,088.	20,609,279.
57 a Land, buildings, and equipment: basis	624,293.		
b Less: accumulated depreciation	194,830.	413,064.	429,463.
58 Other assets, including program-related investments (describe ▶ <b>INTEREST RECEIVABLE</b> )	54,002.	60,238.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58	22,724,910.	23,654,062.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	71,454.	83,139.
	61 Grants payable	1,001,751.	663,070.
	62 Deferred revenue		
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable	500,000.	500,000.
	65 Other liabilities (describe ▶ )		
66 <b>Total liabilities</b> . Add lines 60 through 65	1,573,205.	1,246,209.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	265,908.	238,965.
	68 Temporarily restricted	20,885,797.	22,168,888.
	69 Permanently restricted		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
	73 <b>Total net assets or fund balances</b> . Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	21,151,705.	22,407,853.
	74 <b>Total liabilities and net assets/fund balances</b> . Add lines 66 and 73	22,724,910.	23,654,062.

Form 990 (2006)

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	4,003,537.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1	2,254,281.	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	2,254,281.
c	Subtract line b from line a		c	1,749,256.
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): <b>SPECIAL EVENT EXPENSES</b>	d2	-10,883.	
	Add lines d1 and d2		d	-10,883.
e	Total revenue (Part I, line 12). Add lines c and d		e	1,738,373.

Part IV-B		Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
-----------	--	--	--

a	Total expenses and losses per audited financial statements		2,733,122.
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify): <u>SPECIAL EVENT EXPENSES</u>	b4	10,883.
	Add lines b1 through b4	b	10,883.
c	Subtract line b from line a	c	2,722,239.
d	Amounts included on Part I, line 17, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	0.
e	Total expenses (Part I, line 17). Add lines c and d	e	2,722,239.

**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

[illegible]

Part V-A	Current Officers, Directors, Trustees, and Key Employees (continued)
----------	--

Yes	No
-----	----

<p><b>75 a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings <span style="float: right;"><u>11</u></span></p>		
<p><b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)</p>	75b	X
<p><b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."</p> <p>If "Yes," attach a statement that includes the information described in the instructions.</p>	75c	X
<p><b>d</b> Does the organization have a written conflict of interest policy?</p>	75d	X

Part V-B	Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other
----------	---

**Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

<b>Part VI</b>	<b>Other Information</b> (See the instructions.)
----------------	--

Yes	No
-----	----

76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization N/A and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures. (See line 81 instructions.) 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X

Form **990** (2006)

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? .....	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) .....	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications? .....	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? .....	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? .....	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? .....	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	85b	N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members .....	85c	N/A
d	Section 162(e) lobbying and political expenditures .....	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices .....	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) .....	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? .....	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? .....	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 .....	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities .....	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders .....	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX .....	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI .....	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0. ....		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction .....	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 .....		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization .....		0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? .....	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? .....	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .....	89g	X
90 a	List the states with which a copy of this return is filed ▶ MN .....		
b	Number of employees employed in the pay period that includes March 12, 2006 .....	90b	11
91 a	The books are in care of ▶ MR. CRIS STAINBROOK .....		
	Located at ▶ 151 EAST COUNTY ROAD B2, LITTLE CANADA, MN .....		
	Telephone no. ▶ 651-766-8999 .....		
	ZIP + 4 ▶ 55117 .....		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? .....	91b	X
	If "Yes," enter the name of the foreign country ▶ N/A .....		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		



**Part VI Other Information** (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States?

91c

X

If "Yes," enter the name of the foreign country **N/A**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here

☐

and enter the amount of tax-exempt interest received or accrued during the tax year

92

N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

93 Program service revenue:

a **PROGRAM FEES**

b

c

d

e

f Medicare/Medicaid payments

g Fees and contracts from government agencies

94 Membership dues and assessments

95 Interest on savings and temporary cash investments

96 Dividends and interest from securities

97 Net rental income or (loss) from real estate:

a debt-financed property

b not debt-financed property

98 Net rental income or (loss) from personal property

99 Other investment income

100 Gain or (loss) from sales of assets

other than inventory

101 Net income or (loss) from special events

102 Gross profit or (loss) from sales of inventory

103 Other revenue:

a **MISCELLANEOUS**

b

c

d

e

104 Subtotal (add columns (B), (D), and (E))

105 Total (add line 104, columns (B), (D), and (E))

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

SEE STATEMENT 12

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
INDIAN LAND CAPITAL	%			
COMPANY, LLC - 151 E	%			
COUNTY RD B2, LITTLE	%			
CANADA, MN 55117	75.10%	LAND FINANCING	-78,269.	23,626.

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

☐ Yes☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). **N/A**

**106** Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

**107** Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

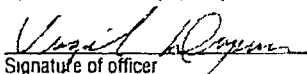
Yes	No


	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

**108** Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

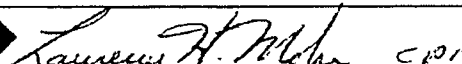
Yes	No

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.

Please Sign Here:  8/10/07  
 Signature of officer Date

 **VIRGIL DUPUIS, BOARD CHAIR**  
 Type or print name and title

---

Paid Preparer's Use Only: Preparer's signature  Date **07/10/07** Check if self-employed ☐ Preparer's SSN or PTIN (See Gen. Inst. X) **P00447603**

Firm's name (or yours if self-employed) address, and ZIP + 4: **VIRCHOW, KRAUSE & COMPANY, LLP**  
**7900 KEXXES AVE. SO., SUITE 2400**  
**MINNEAPOLIS, MN 55431-1115**

EIN **39-0859910**  
 Phone no. **(952) 835-1344**

Form 990 (2006)

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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

**2006**

Name of the organization

**INDIAN LAND TENURE FOUNDATION**

Employer identification number

**41-2014273**

**Part I**

**Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

Total number of other employees paid over \$50,000 ▶

0

**Part II-A**

**Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶

0

**Part II-B**

**Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of other contractors receiving over \$50,000 for other services ▶

0

**Part III Statements About Activities** (See page 2 of the instructions.)

Yes No

<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1		X
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
<b>a</b> Sale, exchange, or leasing of property?	2a		X
<b>b</b> Lending of money or other extension of credit?	2b		X
<b>c</b> Furnishing of goods, services, or facilities?	2c		X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V-A, FORM 990.</b>	2d	X	
<b>e</b> Transfer of any part of its income or assets?	2e		X
<b>3 a</b> Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) <b>SEE STATEMENT 13</b>	3a	X	
<b>b</b> Did the organization have a section 403(b) annuity plan for its employees?	3b		X
<b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
<b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
<b>4 a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X	
<b>b</b> Did the organization make any taxable distributions under section 4966?	4b		X
<b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X
<b>d</b> Enter the total number of donor advised funds owned at the end of the tax year ▶			1
<b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶			66,182.
<b>f</b> Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶			1.
<b>g</b> Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year ▶			66,182.

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶**
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	

Total **▶**

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.  
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	219,702.	396,916.	270,848.	172,480.	1,059,946.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	16,742.	13,343.	3,892.		33,977.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	383,656.	308,177.	284,317.	243,729.	1,219,879.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	620,100.	718,436.	559,057.	416,209.	2,313,802.
24 Line 23 minus line 17	603,358.	705,093.	555,165.	416,209.	2,279,825.
25 Enter 1% of line 23	6,201.	7,184.	5,591.	4,162.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					45,597.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					536,511.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					2,279,825.
d Add: Amounts from column (e) for lines: 18 1,219,879. 19					
22 536,511.					1,756,390.
e Public support (line 26c minus line 26d total)					523,435.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					22.9594%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2005) (2004) (2003) (2002)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2005) (2004) (2003) (2002)					
c Add: Amounts from column (e) for lines: 15 16					
17 20 21					
d Add: Line 27a total and line 27b total					N/A
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire** (See page 9 of the instructions.)**N/A**(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....	<b>31</b>	
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
<b>32</b> Does the organization maintain the following:		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? .....	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? .....	<b>32d</b>	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<b>33</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? .....	<b>33a</b>	
<b>b</b> Admissions policies? .....	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff? .....	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance? .....	<b>33d</b>	
<b>e</b> Educational policies? .....	<b>33e</b>	
<b>f</b> Use of facilities? .....	<b>33f</b>	
<b>g</b> Athletic programs? .....	<b>33g</b>	
<b>h</b> Other extracurricular activities? .....	<b>33h</b>	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency? .....	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? .....	<b>34b</b>	
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....	<b>35</b>	

Schedule A (Form 990 or 990-EZ) 2006

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☐ a ☐ if the organization belongs to an affiliated group.Check ☐ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying) .....	37		
38 Total lobbying expenditures (add lines 36 and 37) .....	38		
39 Other exempt purpose expenditures .....	39		
40 Total exempt purpose expenditures (add lines 38 and 39) .....	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000 .....	20% of the amount on line 40 .....		
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 .....		
42 Grassroots nontaxable amount (enter 25% of line 41) .....	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount .....					0.
46 Lobbying ceiling amount (150% of line 45(e)) .....					0.
47 Total lobbying expenditures .....					0.
48 Grassroots nontaxable amount .....					0.
49 Grassroots ceiling amount (150% of line 48(e)) .....					0.
50 Grassroots lobbying expenditures .....					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers .....		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.) .....		X	
c Media advertisements .....		X	
d Mailings to members, legislators, or the public .....		X	
e Publications, or published or broadcast statements .....		X	
f Grants to other organizations for lobbying purposes .....		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body .....		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....		X	
i Total lobbying expenditures (Add lines c through h.) .....			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



**Part VII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a Transfers from the reporting organization to a noncharitable exempt organization of:**

(i) Cash

(li) Other assets

**b Other transactions:**

**(i) Sales or exchanges of assets with a noncharitable exempt organization**

**(ii) Purchases of assets from a noncharitable exempt organization**

(iii) Rental of facilities, equipment, or other assets

**(iv) Reimbursement arrangements**

**(v) Loans or loan guarantees**

(vi) Performance of services or membership or fundraising solicitations

**c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

N/A

[illegible]

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b If "Yes," complete the following schedule:**

N/A

[illegible]

## 2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
11	LAND		L			43,125.			43,125.			0.
12	BUILDINGS AND IMPROVEMENTS		SL	.000	16	373,822.			373,822.	66,978.		15,356.
13	FURNITURE AND FIXTURES		SL	.000	16	22,648.			22,648.	13,659.		2,882.
14	EQUIPMENT		SL	.000	16	149,983.			149,983.	113,036.		22,861.
15	MOTOR VEHICLES		SL	.000	16	34,715.			34,715.	1,157.		1,157.
	* TOTAL 990 PAGE 2 DEPR					624,293.		0.	624,293.	194,830.	0.	42,256.

028102  
07-28-00

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

19

## FOOTNOTES

STATEMENT 1

## PART IV LINE 64A:

NOTES PAYABLE AT DECEMBER 31, 2006:

500,000.

TOTAL NOTES PAYABLE

500,000.

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME	
GOLF TOURNAMENT	17,372.	9,550.	7,822.	10,883.	-3,061.	
TO FM 990, PART I, LINE 9	17,372.	9,550.	7,822.	10,883.	-3,061.	

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 3

## INCOME

1. GROSS RECEIPTS . . . . .	26,942	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		26,942
<hr/>		
4. COST OF GOODS SOLD (LINE 13) . . . . .		
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		26,942
<hr/>		

## COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	
7. MERCHANDISE PURCHASED . . . . .	
8. COST OF LABOR . . . . .	
9. MATERIALS AND SUPPLIES . . . . .	
10. OTHER COSTS . . . . .	
11. ADD LINES 6 THROUGH 10 . . . . .	
<hr/>	
12. INVENTORY AT END OF YEAR . . . . .	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) . . . . .	
<hr/>	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	4
----------	--	-----------	---

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	2,254,281.
CHANGE IN PRIOR YEAR NET ASSETS	-14,267.
TOTAL TO FORM 990, PART I, LINE 20	2,240,014.

FORM 990	OTHER EXPENSES	STATEMENT	5
----------	----------------	-----------	---

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING AND PROMOTION	43,958.	29,452.	6,594.	7,912.
INSURANCE	11,992.	8,034.	1,799.	2,159.
DUES AND SUBSCRIPTIONS	9,776.	6,550.	1,466.	1,760.
OFFICE EXPENSES	6,300.	4,221.	945.	1,134.
PROFESSIONAL FEES	14,786.	6,315.	3,851.	4,620.
CONTRACTED SERVICES	563,565.	481,041.	54,974.	27,550.
RENTAL	5,337.	3,576.	800.	961.
UTILITIES	5,303.	3,553.	796.	954.
BOARD DEVELOPMENT	34,889.		34,889.	
OTHER EXPENSES	821.	551.	122.	148.
INDIAN LAND CAPITAL COMPANY	117,855.	117,855.		
MINORITY INTEREST LOSS	43,806.		43,806.	
TOTAL TO FM 990, LN 43	858,388.	661,148.	150,042.	47,198.

FORM 990

OFFICER COMPENSATION ALLOCATION  
PART II, LINE 25A

STATEMENT 6

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
CRIS STAINBROOK	125,000.	24,560.	-	149,560.
A. PROGRAM SERVICES	53,750.	10,561.		64,311.
B. MANAGEMENT AND GENERAL	57,500.	11,298.		68,798.
C. FUNDRAISING	13,750.	2,701.		16,451.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
HOWARD VALANDRA	92,000.	19,181.		111,181.
A. PROGRAM SERVICES	92,000.	19,181.		111,181.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JO-ANNE STATELY	94,000.	13,340.		107,340.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL	10,340.	1,467.		11,807.
C. FUNDRAISING	83,660.	11,873.		95,533.

## INDIAN LAND TENURE FOUNDATION

41-2014273

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
TERRY JANIS	70,000.	15,553.		85,553.
A. PROGRAM SERVICES	70,000.	15,553.		85,553.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DOUGLAS NASH	145,600.	19,002.		164,602.
A. PROGRAM SERVICES	145,600.	19,002.		164,602.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
CECELIA BURKE	70,000.	10,581.		80,581.
A. PROGRAM SERVICES	70,000.	10,581.		80,581.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

TOTAL PROGRAM SERVICES				506,228.
TOTAL MANAGEMENT AND GENERAL				80,605.
TOTAL FUNDRAISING				111,984.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				698,817.



FORM 990	CASH GRANTS AND ALLOCATIONS TO OTHERS	STATEMENT 7
----------	--	-------------

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	AMOUNT
UNIVERSITY OF NEW MEXICO 2414 CENTRAL AVE SE ALBUQUERQUE, NM 87106	5,000.
BLACKFEET TRIBE PO BOX 2809 BROWNING, MT 59417	66,893.
SOKAOGON CHIPPEWA 3051 SAND LAKE ROAD CRANDON, WI 54520	27,972.
CHIPPEWA CREE INDIANS RR 1, BOX 800 BOX ELDER, MT 59521	45,401.
COLUMBIA RIVER 529 NE OREGON, 2ND FLOOR PORTLAND, OR 97232	30,277.
INDIAN LAW RESOURCE CENTER 602 NORTH EWING STREET HELENA, MT 59601	194,309.
UNIVERSITY OF WISCONSIN-MADISON 975 BASCOM MALL MADISON, WI 53706-1491	57,700.
GRANT PORTAGE PO BOX 428 GRAND PORTAGE, MN 55605	31,243.
PALOMAR 1140 WEST MISSION ROAD SAN MARCOS, CA 92069	3,000.

INDIAN LAND TENURE FOUNDATION

41-2014273

POKAGON BAND OF POTAWATOMI INDIANS PO BOX 180 DOWAGIAC, MI 49047	9,300.
GRAND TRAVERSE BAND OF OTTAWA 2605 NW BAYSHORE DRIVE SUTTONS BAY, MI 49682	13,000.
NATIVE WOMEN IN AGRICULTURE 100 NORTH 27TH STREET, SUITE 500 BILLINGS, MT 59101	15,000.
WAMPANOAG TRIBE 20 BLACK BROOK ROAD AQUINNAH, MA 02535	9,469.
SNOQUALMIE INDIAN TRIBE PO BOX 280 CARNATION, WA 98014	20,000.
WHITE EARTH COMMUNITY COLLEGE PO BOX 478 MAHNOMEN, MN 56557	17,360.
HERITAGE UNIVERSITY 3240 FORT ROAD TOPPENISH, WA 98948	4,730.
HANNAHVILLE N14911 HANNAHVILLE B1 ROAD WILSON, MI 49896	15,655.
FOND DU LAC TRIBAL & COMMUNITY COLLEGE 1113 EAST FRANKLIN AVE, SUITE 108 MINNEAPOLIS, MN 55404	36,718.
MINNEAPOLIS COMMUNITY & TECHNICAL COLLEGE 1501 HENNEPIN AVE MINNEAPOLIS, MN 55403	3,750.

AUGSBURG COLLEGE  
2211 RIVERSIDE AVE  
MINNEAPOLIS, MN 55454

TOTAL INCLUDED ON FORM 990, PART II, LINE 22B

607,530.

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE	STATEMENT	8
	PART III		

## EXPLANATION

INDIAN LAND TENURE FOUNDATION IS A FOUNDATION ORGANIZED TO EDUCATE EVERY INDIAN LANDOWNER ABOUT INDIAN LAND TENURE ISSUES SO THAT KNOWLEDGE BECOMES POWER WHEN DECISIONS TO CREATE POSITIVE FUTURES ARE MADE. THE ORGANIZATION HAS BEEN ORGANIZED ADDITIONALLY TO INCREASE ECONOMIC ASSETS OF INDIAN LANDOWNERS BY GAINING CONTROL OF INDIAN LANDS AND BY CREATING FINANCIAL MODELS THAT CONVERT LAND INTO LEVERAGE.

FORM 990	OTHER INVESTMENTS	STATEMENT
DESCRIPTION	VALUATION METHOD	AMOUNT
US TREASURY DEBT SECURITIES	MARKET VALUE	2,213,311.
CORPORATE DEBT SECURITIES	MARKET VALUE	1,710,118.
EQUITY SECURITIES	MARKET VALUE	10,257,563.
MUTUAL FUNDS	MARKET VALUE	4,283,794.
INDIAN LAND CAPITAL COMPANY LLC	COST	0.
LIMITED PARTNERSHIPS	COST	2,144,493.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		20,609,279.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	10
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND	43,125.	0.	43,125.
BUILDINGS AND IMPROVEMENTS	373,822.	82,334.	291,488.
FURNITURE AND FIXTURES	22,648.	16,541.	6,107.
EQUIPMENT	149,983.	135,897.	14,086.
MOTOR VEHICLES	34,715.	2,314.	32,401.
TOTAL TO FORM 990, PART IV, LN 57	624,293.	237,086.	387,207.

FORM 990      PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS,      STATEMENT 11  
TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CRIS STAINBROOK 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	PRESIDENT 40.00	125,000.	24,560.	0.
HOWARD VALANDRA 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	VP OF GRANTS & PROGRAMS 40.00	92,000.	19,181.	0.
JO-ANNE STATELY 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	VP OF DEVELOPMENT 40.00	94,000.	13,340.	0.
TERRY JANIS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	PROGRAM OFFICER 40.00	70,000.	15,553.	0.
DOUGLAS NASH 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	EXECUTIVE DIRECTOR 40.00	145,600.	19,002.	0.
CECELIA BURKE 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	DEPUTY DIRECTOR 40.00	70,000.	10,581.	0.
BEN BLACK BEAR, JR. 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	CHAIRMAN 40.00	0.	0.	0.
THERESA CARMODY 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	VICE-CHAIRPERSON 40.00	0.	0.	0.
ERIC J GILES 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
BRIAN COLLINS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
VIRGIL DUPUIS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.

## INDIAN LAND TENURE FOUNDATION

41-2014273

ARVEL HALE 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
MARGIE HUTCHINSON 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
ROSS RACINE 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
DAVID TOVEY 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	SECRETARY/TREASURER 40.00	0.	0.	0.
JOHN SIROIS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		596,600.	102,217.	0.

FORM 990      PART VIII - RELATIONSHIP OF ACTIVITIES TO      STATEMENT 12  
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE      EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93A      THE MISSION OF THE INSTITUTE FOR INDIAN ESTATE PLANNING AND PROBATE, A PROGRAM OF THE INDIAN LAND TENURE FOUNDATION IS TO ASSIST INDIAN PEOPLE IN MAKING INFORMED DECISIONS ABOUT THEIR PROPERTY BY:

1. ESTABLISHING LEGAL SERVICE PROJECTS THAT PROVIDE FREE AND REDUCED COST ESTATE PLANNING SERVICES TO INDIVIDUAL TRIBAL MEMBERS.
2. PROVIDING TRAINING TO TRIBAL MEMBERS, GOVERNMENTAL OFFICIALS AND THE LEGAL COMMUNITY.
3. SERVING AS A CLEARINGHOUSE FOR THE LATEST INFORMATION ON THE AMERICAN INDIAN PROBATE REFORM ACT.

SCHEDULE A      EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS      STATEMENT 13  
PART III, LINE 3A

INDIAN LAND TENURE FOUNDATION (ILTF) DISBURSES GRANTS AND CONTRACTS TO MEET ITS MISSION AND STRATEGIES. THE MAJORITY OF GRANT AWARDS ARE ACCORDING TO STIPULATIONS CONTAINED IN REQUEST FOR PROPOSAL (RFP), WHICH ARE SUBMITTED AT THE QUARTERLY MEETINGS. THE STIPULATIONS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS. THE RFP'S ARE ADVERTISED ON THE ILTF WEB SITE AND THROUGH DIRECT MAILING TO TRIBES AND ORGANIZATIONS IN ILTF'S DATABASE. ALL PROPOSALS FROM RFP'S ARE PRESENTED TO THE BOARD FOR CONSIDERATION AND FINAL DETERMINATION TO FUND OR NOT FUND.

UNSOLICITED REQUEST FOR FUNDS WHEN RECEIVED ARE REVIEWED FOR APPLICABILITY TO MISSION AND STRATEGIES AND HAVE NOT BEEN COVERED UNDER A RFP. THE

STATEMENT(S) 11, 12, 13

CONCEPT IN THE FUND REQUEST IS SUMMARIZED AND PRESENTED TO THE BOARD FOR DETERMINATION TO GO FORWARD OR STOP. IF DECISION BY THE BOARD IS TO GO FORWARD A GRANT APPLICATION IS PROVIDED TO THE PETITIONER FOR PROPOSAL DEVELOPMENT AND COMPLETION. THE PROPOSAL IS SUBMITTED TO THE BOARD FOR CONSIDERATION AND FINAL DETERMINATION TO FUND OR NOT FUND.