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SCANNED JAN 0 6 2010

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

2008

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

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_			iar year, o	r tax year beginning	7701	, 200	8, and endin	g 0/3	D Employer Identi	
В		applicable	Please use	THE TANK THE THE				I		
	Add	ress change	IRS label or print	THE LAND INSTITU		2022			48-0842	
	Nam	ne change	or type.	2440 EAST WATER				ì	E Telephone numb	per
	Initia	al return	See specific	SALINA, KS 6740:	1-9051				785-823	-5376
	Tam	nination	instruc- tions.					ľ		
	\vdash		uons.						C -	. 4 474 540
		ended return				2 677 6 637			G Gross receipts \$	
	App	lication pending		nd address of principal officer	WES J	ACKSON			group return for affi	Yes X No
			Same A	As C Above			_		affiliates included? attach a list (see ins	Yes No
ı	Tax-e	exempt statu	s X 501	(c) (3) ◄ (insert n	0.)	4947(a)(1) or	527	11 140, 4	ittacii a nat (see ins	udedonsy
J				institute.org				H(c) Group e	xemption number	
ĸ		of organization	X Corpora			Ti-	<u>.</u>			
				ition Trust Association	on J Oth	er► I	L Year of Format	ion 1970	M State of le	egal domicile No
Pa		Summa								
				anization's mission or mo						
ø		<u> FCOL</u>	<u>OGICAL</u>	STABILITY OF TH	IE PRA	<u> IRIE AND A</u>	GRAIN YI	ELD_CO	MPARABLE I	O THAT FROM
Ĕ	1	ANNUAL_C	ROPS							
Ë										·
Š	2 0	heck this bo	x • []	if the organization discont	inued its	operations or disr	nosed of mor	e than 259	6 of its assets	
ŏ			tına memi	bers of the governing bod	v (Part V	l line la)	30000 01 11101	0 (11411 20)	3	13
જ				t voting members of the g			e 1b)		4	12
jes				yees (Part V, line 2a)	overning	body (r art vi, iiii	C 10)		5	46
Ξ				eers (estimate if necessar	A.				6	20
Activities & Governance						a 12. aalumn (C)			7a	0.
٠,	1	-		usiness revenue from Par					ļ 	
	ו מ	et unrelated	business	taxable income from Forr	n 990-1,	line 34			7ь	0.
					R	ECEIVED		Pr	ior Year	Current Year
4	8 C	Contributions	and grant	ts (Part VIII, line 1h)	· ·		1	, 2	,751,715.	4,072,218.
Ę,	9 P	rogram serv	ice reveni	ue (Part VIII, line 2g)	G.		701.		17,585.	12,450.
Revenue	10 1	9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 874 and 150 1 5 2009 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10c, and 11e)							109,884.	77,263.
8	11 0	other revenue	∘ (Part VII	II, column (A), lines 5, 60,	80 90	Oc and lie	121		7,347.	12,022.
				nes 8 through 11 (must en			2021	1	,886,531.	4,173,953.
	12 1	otal revenue	- auu III	les 8 tillough 11 (must en	uai Fall	Se N	##C <u>ED4</u>)			
				ounts paid (Part IX, colum					73,694.	39,607.
	14 8	Benefits paid	to or for r	members (Part IX, column	ı (A), line	4)				
"	15 S							1	,343,237.	1,460,279.
Şe	16a F	Professional 1	fundraisine	g fees (Part IX, column (A	O line 11	e)				
Expenses			•	- ,	•	•	204 060			· · · · · · · · · · · · · · · · · · ·
꿃	b I	otal fundrais	ing expen	ises (Part IX, column (D),	line 25)	·	294,962.			
	17 C	Other expens	es (Part I)	X, column (A), lines 11a-1	1d, 11f-2	4f)			791,760.	581,850.
	18 T	otal expense	es Add Im	nes 13-17 (must equal Par	t IX. colu	mn (A), line 25)		2	,208,691.	2,081,736.
				Subtract line 18 from lin		, ,,			677,840.	2,092,217.
		10 101100 1000	<u> </u>	Cabacat into To noth in	10 12			 		
Net Assets or Fund Balances									ning of Year	End of Year
3 a a	l	otal assets (•				5	,618,069.	7,674,365.
A P	21 T	otal liabilities	s (Part X,	line 26)					120,198.	86,619.
žį	22 N	let assets or	fund bala	nces, Subtract line 21 froi	m line 20			5	,497,871.	7,587,746.
Pa	rt II		ure Bloc		77 777 20				, , , , , , , , , , , , , , , , , , , ,	
	1 (11									
		Under penaltie true, correct, a	s of perjury.	ndeclare that I have examined this Declaration of preparer (other the	s return, inc an officer) is	luding accompanying s based on all informati	chedules and sta on of which prep	itements, and arer has anv	to the best of my kn knowledge	nowledge and belief, it is
		11	$I_A = I$	1 /2 1	•				15 1 1	_
Sig	jn 💮	► <i>UU</i>	(0)	Inchan					121710	99
He	re	Signature	of officer		2			Date	,	
		► 14/4	1511	ACKSON P	DF.S	IDENT			,	
		Type or pr	int name and	d title						
		 					Date	1	Pre I Pre	parer's identifying number
О.,	:	ļ	\mathcal{L}	in a Sunotin	, CP	9		sel	f. (se	e instructions)
Pai		Preparer's	$ \bigcirc \mathcal{O}_{m} $	au a. sure			11-30-0)9 em	ployed 🟲 🔛	
Pre		signature	LINI	DA A. SUELTER				<u>' </u>	P0	0768890
	rer's	Firm's name (c	r Club	oine & Rettele,	Charte	red				
Us		yours if self-		. Box 2267				EIN	▶ 48-09	07172
On	ıy	employed), address and			67			Phone no ► 785 825-5479		
		ZIP + 4						Pho	one no - 100	
				with the preparer shown at						X Yes No
BA	A For P	rivacy Act a	nd Paperv	vork Reduction Act Notice	e, see the	separate instruc	tions.		TEEA0112L 12/22/0	os Form 990 (2008)

616

_	990 (2008) THE LAND INSTITUTE	48-0842.	156		Page 2
Par	t III Statement of Program Service Accomplishments (see instructions)				
1	Briefly describe the organization's mission:				
•	·				
	See Schedule 0	- <i></i>			
			- 		
					
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior			
	Form 990 or 990-EZ?	[Yes	X	No
		<u>L</u>	, ,,,,		
	If 'Yes,' describe these new services on Schedule O.	_		_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O.	-	•	_	
	· · · · · · · · · · · · · · · · · · ·				
4	Describe the exempt purpose achievements for each of the organization's three largest program services by examd 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations.	penses. Secti	on 501(c)(3)	
	expenses, and revenue, if any, for each program service reported	ations to othe	rs, the t	otai	
	expenses, and revenue, if any, for each program service reported				
	607.705				
4 a		venue \$			<u>46.</u>)
	THE LAND INSTITUTE IS DEVELOPING A NEW FARMING SYSTEM, NATURAL S	YSTEMS AG	RICU	LTUF	Œ
	(NSA), WITH PERENNIAL WHEAT, ETC. GROWN IN MIXTURES THAT PROVIDE				
				-	
	FERTILITY, WEED CONTROL AND WATER MANAGEMENT AND HOLD THE SOIL YE	AK-KOUND.	N <u>S</u>	<u>A</u>	
	RESPONDS TO THE URGENT NEED TO STOP SOIL EROSION WORLDWIDE.				
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	505 206				
41	· · · · · · · · · · · · · · · · · · ·	venue \$)
	CLIMATE AND ENERGY - A PROJECT TO ADDRESS GLOBAL CLIMATE CHANGE.	THE OBJE	CTIV	ES A	\RE
	TO DEPOLITICIZE CLIMATE CHANGE, REDUCE THE MIDCONTINENT'S CARBON	FOOTPRINT	AN	<u> </u>	
	ENGAGE WITH AND STAND AS AN AMERICAN EXAMPLE FOR THE GLOBAL COMMU	NTTI FI	FEGI		
	EFFICIENCY AND RENEWABLE ENERGY WILL BE PURSUED AND PROMOTED.				
		- -			
		- -			
					
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4 -	(Code))/Evenese \$ 267,539 including graphs of \$	vanuo ¢			`
40	(Code:) (Expenses \$ 267,539. including grants of \$) (Re		TCC:	n)
	EDUCATION AND PUBLIC POLICY - WORK THAT FOCUSES ON ENCOURAGING OT	HERS TO I	FCOW	E WC	KE
	ACTIVE IN WORK THAT PROMOTES ECOLOGY AND AGRICULTURE. INCLUDES P	JBLICATIO	N OF	THE	:
	LAND REPORT AND PRESENTATION OF THE PRAIRIE FESTIVAL, A PUBLIC EV				
	THE LAND REPORT REACHES APPROXIMATELY 3,000 PEOPLE AND THE PRAIRI	E FESTIVE	L HA	<u> </u>	I
	ATTENDANCE OF APPROXIMATELY 450 PEOPLE. THE PRAIRIE WRITERS CIRC	LE IS ALS	O TN	CLUE	ED
	AND PAYS FOR ESSAYS ABOUT AGRICULTURE, COMMUNITY AND ENVIRONMENT	TUVI VCC	הדסד.	CTDO	TED_
	TO MORE THAN 500 NEWSPAPERS.	- 			
4 d	Other program services. (Describe in Schedule O) See Schedule O				
	(Expenses \$ 116,308. including grants of \$ 39,607.) (Revenue \$)	
4 e	Total program service expenses ► \$ 1,606,548. (Must equal Part IX, Line 25, column (B))				

Form 990 (2008) THE LAND INSTITUTE Part IV | Checklist of Required Schedules

			Yes	No
-	le the aggregation described in each of E01/2/2) or 40/2/2/3/ (all on the end of the end		7.55	-110
ı	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	<u> </u>		
	reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
U	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X	
	Did the organization maintain an office, employees, or agents outside of the U.S ?	14a		X
ŀ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
Ī	business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	:	X
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22	X_	
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5° If 'Yes,' complete Schedule J	23		Χ_
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and	24a	i	Х
h	complete Schedule K If 'No, 'go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		43
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?	24c		
c	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25 a		Х
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
ΙΔΔ		Form	990 ((2008)

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Checklist of Required Schedules (continued) Yes No 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV 28a X b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Х 28b Schedule L, Part IV c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV 28c X X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule MX 30 31 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 X 32 Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I 33 33 X 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 X 35 Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х 36 organization? If 'Yes,' complete Schedule R, Part V, line 2

Form 990 (2008)

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Doubly Chatamanta Danading Other IDC Filippe and Tax Counting			age
Part V Statements Regarding Other IRS Filings and Tax Compliance			
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S		Yes	No
Information Returns. Enter -0- if not applicable			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 46			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	_X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			1
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b If 'Yes,' enter the name of the foreign country			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7 a	_	Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year . 7d			[
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		Х
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		Х
b Did the organization make any distribution to a donor, donor advisor, or related person?	9ь		X
10 Section 501(c)(7) organizations. Enter.			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	[]		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		

Form **990** (2008)

12Ь

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A.	Governing Body and Management					
	For each	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or es, or changes in Schedule O See instructions	9b below, de	escribe the circumstances,		Yes	No
1 a	Enter the	number of voting members of the governing body	<u>_</u>	1a 13			
t	Enter the	number of voting members that are independent	Ĺ	1b 12			
2	Did any o officer, d	officer, director, trustee, or key employee have a family relationship or a irector, trustee or key employee?	business rela	ationship with any other	2		Х
3	Did the o	rganization delegate control over management duties customarily perfori s, directors or trustees, or key employees to a management company or	med by or un other person	der the direct supervision n?	3		Х
4		rganization make any significant changes to its organizational documents prior Form 990 was filed? See Sch 0	S		4	X	
5	Did the o	. rganization become aware during the year of a material diversion of the	organization'	s assets?	5		Х
6	Does the	organization have members or stockholders?			6		X
7 a	Does the governing	organization have members, stockholders, or other persons who may elg body?	lect one or m	ore members of the	7 a		Х
t	Are any	decisions of the governing body subject to approval by members, stockho	olders, or oth	er persons?	7b		X
	the follov		ctions undert	aken during the year by			
		erning body?			8a	X	
		nmittee with authority to act on behalf of the governing body?			8b	Х	v
		organization have local chapters, branches, or affiliates?			9 a		<u>X</u>
	and bran	does the organization have written policies and procedures governing the ches to ensure their operations are consistent with those of the organiza	tion?	,	9ь		
10	describe	ppy of the Form 990 provided to the organization's governing body before in Schedule O the process, if any, the organization uses to review the Fo	orm 990 Se	ee Schedule O	10		X
11	organiza	any officer, director or trustee, or key employee listed in Part VII, Section tion's mailing address? If 'Yes,' provide the names and addresses in Sch	n A, who canr nedule O	not be reached at the	11_		X
<u> 5ec</u>	nion B.	Policies		·		Vac	No No
		organization have a written conflict of interest policy? If 'No,' go to line			12a	Yes X	140
	to conflic			-	12b	Х	
		organization regularly and consistently monitor and enforce compliance on how this is done See Schedule 0	with the police	cy? If 'Yes,' describe in	12c	X	
		organization have a written whistleblower policy?			13	X	
		organization have a written document retention and destruction policy?			14	X	
		rocess for determining compensation of the following persons include a recomparability data, and contemporaneous substantiation of the deliberation of the deliberatio	review and ap tion and decis	oproval by independent sion	,-		v
		nization's CEO, Executive Director, or top management official?			15a		$\frac{X}{X}$
t		the process in Schodule O. (see instructions)			15 b		
		the process in Schedule O (see instructions)	- د-ادمدم سم	rrongomontth a thi-			
	entity du	rganization invest in, contribute assets to, or participate in a joint venture ring the year?			16 a		<u>X</u>
t	in joint ve	nas the organization adopted a written policy or procedure requiring the centure arrangements under applicable federal tax law, and taken steps to the respect to such arrangements?	organization to safeguard th	o evaluate its participation ne organization's exempt	16b		
Sec		Disclosures					
17	List the s	tates with which a copy of this Form 990 is required to be filed Non 	e				
18	Section 6	5104 requires an organization to make its Forms 1023 (or 1024 if applicabn. Indicate how you make these available. Check all that apply	ole), 990, and	990-T (501(c)(3)s only) avai	lable f	or put	olic
	Own	website Another's website X Upon request					
19	Describe statemen	in Schedule O whether (and if so, how) the organization makes its gover its available to the public See Schedule 0	rning docume	ents, conflict of interest policy	, and	financ	cial
		name, physical address, and telephone number of the person who poss NIE HUTCHINSON 2440 EAST WATER WELL ROAD SA					5
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Form 990 (2008)

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

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

- 1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee.										
(A)	(B)			•	:)			(D)	(E)	(F)
Name and Title	Average hours			_		hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
CONN NUGENT										
Chairman	0.5	X	Ì	X				0.	0.	0.
WES JACKSON										
President	40	X		X	X			64,000.	0.	7,419.
JAN FLORA										
Secretary	0.5	X		X				0.	0.	0.
JOHN M. SIMPSON										
Treasurer	0.5	X		X				0.	0.	0.
ANNE SIMPSON BYRNE										
Director	0.5	X	_					0.	0.	0.
VIVIAN DONNELLEY										
Director	0.5	X						0.	0.	0.
STEVE ELLS										
Director	0.5	_X	[0.	0.	0.
TERRY EVANS										
Director	0.5	_X						_0.	0.	0.
PETE FERRELL										
Director	0.5	X						_0.	0.	0.
VICTORIA RANNEY			1							
Director	0.5	X						0.	0.	0.
LLOYD G. SCHERMER		ļ								
Director	0.5	X						0.	0.	0.
DONALD E. WORSTER										
Director	0.5	X						0.	0.	0.
ANGUS_WRIGHT	. 🔟									
Director	0.5	X						0.	0.	0.
KENNETH WARREN JR	.]									
MANAGING DIRECT	32	<u></u>					L	19,000.	0.	1,020.
JOHN SCHMIDT	. 🔟							ļ		
DEVELOPMENT OFFICE	40					X		111,849.	0.	12,277.
	. 🗐									
			L							
	. 🗕									

TEEA0107L 04/24/09

Part VII Section A. Officers, Directors, Trus		Key	Er			ees	, ar			ployed		ont)
(A) Name and Title	(B) Average	Posi	tion ((check	-	hat a	(vlaa	(D)	(E)	_	(F)	
Name and little	hours per week			Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	amou com fr org ar	stimated unt of oth opensation the panization of related anization	her on n d
											•	
											-	
				_								
	<u> </u>									<u> </u>		
										<u> </u>		
									1	<u> </u>		
										 -		
	1									<u> </u>		
1 b Total								194,849.	0.		20,7	16.
2 Total number of individuals (including those in 1a) w	ho rece	ıved	moi	re th	an :	\$100	0,000	0 in reportable co	mpensation from th	ie		
organization ► 1		_	-	_							Yes	No
Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	e, k	ey e	mpl	oye	e, or	hig	hest compensated	d employee	3		Х
For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual.			ipen)? If	satı F'Ye	on a s' c	nd o	othe lete	r compensation fr Schedule J for su	om uch	4		Х
Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Sch	mpensa	ation	fro	m ar	ny u	nrel	ated	l organization for :	services	5		- <u>:-</u>
Section B. Independent Contractors	ledule 3	101 3	SUCI	ı pei	5011							
Complete this table for your five highest compensate compensation from the organization.	ed indep	end	ent (cont	ract	ors	that	received more th	an \$100,000 of			
(A) Name and business addres	s							Description of) of Services	Compe	C) nsation	<u>n</u>
								# # # # # # # # # # # # # # # # # # #				
2 Total number of independent contractors (including to compensation from the organization ► 0	nose in	1) W	/no i	rece	ivec	ı mo	re t	nan \$100,000 in				

Page 9

rai	l VI	III Statement of he	vellue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>~</u>	1 a	Federated campaigns		1a					
ξŞ		· -	-	1b			1		
8 5		Membership dues	<u> </u>			}			
S, &		Fundraising events	-	1 c					
등		Related organizations	ļ	1 d					
ŞΨ	е	Government grants (contribution	ons)	1 e					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, g similar amounts not included a	rants, and above	1f	4,072,218.				
E S	g	Noncash contribns included in	Ins 1a-1f	\$_	37,002.				
용된	h	Total. Add lines 1a-1f				4,072,218.			
H.		<u></u>			Business Code				
Ę,	2a	EVENT FEES		[6	611600	12,450.	12,450.		
5	b								
Ę	c								
8	ď			-					
Σ	_								
I V	4	All other program corns					_		
§		All other program service	e revenue	L		12,450.			
-	g	Total. Add lines 2a-2f				12,430.			
	3	Investment income (incl other similar amounts)	uding divide	ends,	interest and	78,949.			78,949.
		•			and proceeds	10,515.			1
	4	Income from investment	t of tax-exe	mpt	ona proceeds				
1	5	Royalties						· · · · · · · · · · · · · · · · · · ·	
			(i) Real	· · · · · · · · · · · · · · · · · · ·	(II) Personal				
	6a	Gross Rents							
	b	Less: rental expenses							
	C	Rental income or (loss)			<u> </u>				
	d	Net rental income or (lo	ss)			1,126.			1,126.
	7.	Gross amount from sales of	(i) Securit	ties	(ii) Other				
	/ a	assets other than inventory	201,4	485.	88,000.				
	_	-							
	t	Less cost or other basis and sales expenses	201,0	024.	90,147.				
	_	: Gain or (loss)		461.	-2,147.				
		• •	<u> </u>	101.	<u> </u>	-1,686.			-1,686.
lal .		l Net gain or (loss) Gross income from fund	draising eve	ents		1,000.			
NUE		(not including \$							
Ē		of contributions reported	d on line 1c	:)					
OTHER REVEN		See Part IV, line 18		а	1				
Ħ	t	Less direct expenses.		Ŀ	·				
0	•	: Net income or (loss) fro	m fundraisi	ıng ev	v <u>ents</u>				
	9 a	Gross income from gan See Part IV, line 19	ning activitie	es.					
	t	Less: direct expenses.		Ŀ	> <u></u>				
		: Net income or (loss) fro	m gaming a	activi	ties				
		Gross sales of inventory and allowances			15,430.				
	ŀ	Less: cost of goods sole	d	t	9,425.]			
	(: Net income or (loss) fro	m sales of	<u>inv</u> er	ntory .	6,005.	6,005.		
		Miscellaneous Reven			Business Code				
	112	OTHER INCOME			900099	303.	303.		
		FARM INCOME			110000	4,588.	4,588.		
		· _ ==== ==============================							
	`	All other revenue							
			d	L	-	4,891.			
		e Total. Add lines 11a-11				3,031.			
	12	Total Revenue. Add line	es 1h, 2g, 3	3, 4, 5	o, 6d, 7d, 8c, 9c, ▶	4.173.953.	23,346.	0	. 78,389.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b,	7b, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	10,000.	10,000.	1	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	20,607.	20,607.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	9,000.	9,000.		
4					
5	Compensation of current officers, directors, trustees, and key employees	91,439.	48,857.	21,156.	21,426.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	152,177.	112,508.	13,223.	26,446.
7	Other salaries and wages	941,758.	722,241.	77,728.	141,789.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	29,687.	21,802.	3,663.	4,222.
9	Other employee benefits.	160,855.	120,383.	18,381.	22,091.
10	Payroll taxes	84,363.	62,919.	7,992.	13,452.
11	Fees for services (non-employees)	'			
	Management				
	Legal	4,784.	4,063.	326.	395.
	: Accounting	7,080.	4,885.	991.	1,204.
	Lobbying				
•	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees			"	
ç	Other	102,374.	84,161.	10,667.	7,546.
	Advertising and promotion	55,767.	35,786.	610.	19,371.
13	Office expenses	59,100.	49,425.	4,301.	5,374.
14	Information technology	11,443.	9,142.	633.	1,668.
15	Royalties				
16	Occupancy	50,820.	39,743.	5,003.	6,074.
17	Travel	56,940.	47,351.	1,213.	8,376.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	41,997.	38,399.	1,253.	<u>2,345.</u>
20	Interest				
21	Payments to affiliates				·
22	Depreciation, depletion, and amortization	90,841.	87,106.	3,735.	
	Insurance.	23,980.	16,546.	3,357.	4,077.
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a	EQUIPMENT MAINT & REPAIRS	36,689.	24,996.	5,281.	6,412.
ŧ	SUPPLIES	33,655.	33,462.	87.	106.
	BOOKS, SUBSCRIPTIONS, DUES	2,892.	2,084.	406.	402.
c	EMPLOYEE RECRUITMENT	1,920.			1,920.
•	MISCELLANEOUS	1,568.	1,082.	220.	266.
f	All other expenses				
_25	Total functional expenses Add lines 1 through 24f	2,081,736.	1,606,548.	180,226.	294,962.
26	Joint Costs. Check here ► ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			i	
BAA					Form 990 (2008)

14	-17.47	Dulance Chiest							
					(A) Beginning of year		(End (B) of yea	r
	1	Cash - non-interest-bearing			51,297.	1			392.
	2	Savings and temporary cash investments		İ	2,891,046.	2	4.0		$\frac{032.}{014.}$
	3	Pledges and grants receivable, net			609,189.	3			403.
	4	Accounts receivable, net			32,462.	4	//		879.
	5	Receivables from current and former officers, director or other related parties. Complete Part II of Schedule	s, truste L	es, key employees,		5	·		
	6	Receivables from other disqualified persons (as define							
		and persons described in section 4958(c)(3)(B). Comp	lete Pai	t II of Schedule L		6			
A S S E T S	7	Notes and loans receivable, net			9,131.	7		7,	742.
E	8	Inventories for sale or use		Ì	3,496.	8			019.
5	9	Prepaid expenses and deferred charges			33,705.	9			713.
	10 a	Land, buildings, and equipment cost basis	10 a	2,422,481.				<i>'</i>	
	Ь	Less accumulated depreciation. Complete Part VI of							
		Schedule D	106	513,557.	1,955,626.	10 c	1,9	08,	924.
	11	Investments - publicly-traded securities	-			11		·	
	12	Investments – other securities. See Part IV, line 11			12,160.	12		9,	689.
	13	Investments - program-related. See Part IV, line 11				13		·	
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11			19,957.	15		17.	590.
	16	Total assets. Add lines 1 through 15 (must equal line	34)	Ī	5,618,069.	16			365.
	17	Accounts payable and accrued expenses			120,198.	17			619.
	18	Grants payable			18	<u> </u>			
	19	Deferred revenue	Ţ		19				
Ļ	20	Tax-exempt bond liabilities				20		_	
Ä B I	21	Escrow account liability. Complete Part IV of Schedule	e D			21			
L 7 1	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	stees. ke	ey employees, omplete Part II	,				
	(of Schedule L				22			
E S	23	Secured mortgages and notes payable to unrelated th	es ,		23				
	24	Unsecured notes and loans payable				24			
	25	Other liabilities. Complete Part X of Schedule D				25			
	26	Total liabilities. Add lines 17 through 25			120,198.	26		86,	<u>619.</u>
N E T		Organizations that follow SFAS 117, check here ►	X and	complete lines	-				
Ť		27 through 29 and lines 33 and 34.							
ĄSSE	27	Unrestricted net assets		<u>[</u>	3,956,699.	27			<u>657.</u>
т.	28	Temporarily restricted net assets			1,522,172.	28			089.
Ś	29	Permanently restricted net assets			19,000.	29		19,	000.
R		Organizations that do not follow SFAS 117, check her	e ►	and complete	:	1			
FUZD]	lines 30 through 34.							
В	30	Capital stock or trust principal, or current funds				30			
B	31	Paid-in or capital surplus, or land, building, and equip	ment fur	nd _		31			
BALAZCES	32	Retained earnings, endowment, accumulated income,	or other	funds		32			
Ĕ	33	Total net assets or fund balances.		Ţ	5,497,871.	33			<u> 746.</u>
	34	Total liabilities and net assets/fund balances.			5,618,069.	34	7,6	7 <u>4,</u>	<u> 365.</u>
Pa	art XI	Financial Statements and Reporting							
,	۸ ـ .	and the second to be second to	اسداد	X Accrual	Other		F	Yes	No
			ash				2.		Х
2		re the organization's financial statements compiled or r			countaint? .		2a 2b	X	 ^
		re the organization's financial statements audited by ar			for avargable of the aver	dut	20	Λ	
5	rev	Yes' to 2a or 2b, does the organization have a committee iew, or compilation of its financial statements and select a recult of a federal award, was the organization required.	tion of a	an independent accour	ntant?		2c	Х	<u> </u>
J	Aud	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?	eu (O Ul		113 43 351 101 111 111 1116 3	" igic	3a		Х
		res,' did the organization undergo the required audit or			_		3b		
RΔ							Form	990	(2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number

THE	LAND INSTITUTE								342156			
Part	I Reason for Pu	blic Charity Statu	s (All organizations	must	comple	ete thi	s part.	<u>) (see</u>	instruc	ctions)		
The o	rganization is not a priv	ate foundation becaus	se it is (Please check on	ly one o	rganızat	ion)						
1	A church, convention	on of churches or asso	ciation of churches desc	ribed in	section	1 70(b)(1	χΑχι).					
2	X A school described	in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3			organization described in									
4	A medical research	organization operated	d in conjunction with a ho	spital de	scribed	ın secti	on 170(ьх1хах	(iii). Ente	er the hospi	tal's	
_	name, city, and sta	te'	., <u> </u>		-					3.7.F.F.F	5.5. -	
5	<u> —</u> 170(b)(1)(A)(iv). (С	omplete Part II.)	of a college or university					mental u	unit desc	ribea in se	tion	
6	A federal, state, or	local government or g	jovernmental unit describ substantial part of its sup	ed in se	ction 17	U(bX1X/	A)(V).	or from t	he dene	ral public d	eccrib	۵d
7		(A)(vi). (Complete Pa	rt II)			ennem	ar uriit t	Ji itoiii t	ne gene	rai public u	636110	cu
8			70(b)(1)(A)(vi). (Complete						-1 6			
9	from activities relations investment income June 30, 1975 See	ed to its exempt function and unrelated busines exection 509(a)(2). (Co		exception 5	ns, and 11 tax) f	(2) no r rom bus	nore tha sinesses	an 33-17. s acquire	3 % of its	s support ir e organizati	rom gr	oss
10			exclusively to test for put									
11												
	a Type I b Type II c Type III – Functionally integrated d Type III – Other											
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).											
f	The state of the s											
g	Since August 17, 2	006, has the organizat	tion accepted any gift or	contribu	ition from	n any o	f the fol	lowing p	ersons?			
·	-										Yes	No
	(i) a person who below, the go	directly or indirectly overning body of the st	controls, either alone or to apported organization?	ogether	with per	sons de	scribed	ın (ıı) ar	nd (III)	11 g (i)		
	(ii) a famıly mem	ber of a person desc	ribed in (i) above?							11g (II)	ldash	ļ
	(iii) a 35% contro	lled entity of a person	described in (i) or (ii) ab-	ove?						11 g (iii)		
h	Provide the following	ng information about the	ne organizations the orga	nization	support	s						
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat (i) listed	s the ion in col I in your rning ment?	the organ	ou notify iization in (i) of ipport?	organizati	zed in the l	(vii) Amoun	t of Sup	port
				Yes	No	Yes	No	Yes	No			
							-		-			
				-								
				<u> </u>		ļ						
Total	•											

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

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 48-0842156 Page 2 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.) Section A. Public Support Calendar year (or fiscal year (e) 2008 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants ') Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 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 Total. Add lines 1-3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Net income form unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss form the sale of čapital assets (Explain in Part IV.) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 % 15 % 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ... b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts and circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts and circumstances' test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

Sec	tion A. Public Support	ched the Box off III	10 9 011 41(1)				
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')						
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	: Add lines 7a and 7b						
8	Public support (Subtract line			· · · · · · · · · · · · · · · · · · ·			
	7c from line 6)]
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources			9			
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	: Add lines 10a and 10b						
"	Net income from unrelated business activities not included inline 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 IV.)						
13	Total support. (add ins 9, 10c 11, and 12)						
14	First five years. If the Form 990 organization, check this box and	s for the organizat	ion's first, second	d, third, fourth, or	r fifth tax year as	a section 501(c)(3) ▶□
	tion C. Computation of Pu						
	Public support percentage for 20			12 column (6)		15	%
	,, ,	•	••		•	16	%
	Public support percentage from 2 tion D. Computation of Inv				·-·		
						17	%
	Investment income percentage for	•		-	шт (I))	18	%
18	Investment income percentage fr				lling 15 is more th	<u> </u>	
	 33-1/3 support tests — 2008. If the more than 33-1/3%, check this be 33-1/3 support tests — 2007. If the 	ox and stop here.	The organization	qualifies as a pub	olicly supported or	ganization	
	is not more than 33-1/3%, check	this box and stop	here. The organiz	ation qualifies as	a publicly suppor	ted organization.	. •
20	Private foundation. If the organiz	zation did not chec	k a box on line 14	1, 19a, or 19b, ch	eck this box and s	ee instructions	<u> </u>

Part IV	Supplemental Inform	nation. Complete th	is part to provide the	e explanation required by additional information. (s	Part II, line 10;
_	Part II, line 17a or 1	/b; or Part III, line 1	2. Provide any other	additional information. (s	ee instructions)
					
					-
					
		. -			
					
					
					
<u>-</u>		·	<u> </u>		
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			- -		
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•					
			755.000	Called A 15	orm 990 or 990-EZ) 2008
BAA '			TEEA0404L 10/07/08	Scriedule A (F	JIII 330 01 330-LL/ 2000

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer Identification number

THE LAND INSTITUTE 48-0842156

Part | Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete II

Par	<u>t I</u>	Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other to Form 990. Part IV, line 6	Similar Funds	s or Account	s Complete	ı ıf
		the organization anomalou ros	(a) Donor advised fund		(b) Funds ar	nd other accou	unts
1	Tota	Il number at end of year	(a) Berrer daviesa rain		(2) (225 2	10 00107 00000	
2		regate contributions to (during year)					
	•	regate grants from (during year)					
		regate value at end of year					
5		the organization inform all donors and don is are the organization's property, subject t			advised	Yes	No
6	use	the organization inform all grantees, donor d only for charitable purposes and not for the ermissible private benefit??	s, and donor advisors in writing the benefit of the donor or donor a	nat grant funds ma idvisor or other	ay be	Yes	No
Par	t II	Conservation Easements Comple	ete if the organization ansv	wered 'Yes' to	Form 990, Pa	art IV, line	7.
1	Pur	pose(s) of conservation easements held by	the organization (check all that a	pply)			
	\Box	Preservation of land for public use (e.g , re	ecreation or pleasure)	Preservation of an	historically imp	ortant land are	ea
	П	Protection of natural habitat		Preservation of ce	ertified historic st	ructure	
	П	Preservation of open space	_				
2		plete lines 2a-2d if the organization held a ie tax year.	qualified conservation contribution	n in the form of a	conservation ea	sement on the	last day
					Held a	it the End of t	he Year
а	Tota	I number of conservation easements .			2a		
b	Tota	il acreage restricted by conservation easer	nents		2b		
		ber of conservation easements on a certif		a) [2c		
c	l Nun	nber of conservation easements included in	ı (c) acquired after 8/17/06		2 d		
		nber of conservation easements modified,		d, or terminated b	y the organization	n during the t	axable
	yea						
		nber of states where property subject to co					
5	Doe enfo	s the organization have a written policy recordent of the conservation easement it h	garding the periodic monitoring, in olds?	spection, violation	ns, and	Yes	☐ No
6	Staf	f or volunteer hours devoted to monitoring,	inspecting, and enforcing easem	ents during the ye	ear 🕨		
7	Amo	ount of expenses incurred in monitoring, in	specting, and enforcing easement	ts during the year	\$		
8		s each conservation easement reported or h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requir	ements of section		Yes	☐ No
9	In P	art XIV, describe how the organization repude, if applicable, the text of the footnote to	orts conservation easements in its	s revenue and exp	ense statement,	and balance	sheet, and
	con	servation easements	The organization's infancial state	THE TIS THAT GOSOTH			
Pai	t III	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical T wered 'Yes' to Form 990, F	reasures, or O Part IV, line 8.	ther Similar	Assets 	·
1 a	trea	e organization elected, as permitted under sures, or other similar assets held for publ text of the footnote to its financial statemen	ic exhibition, education, or resear	renue statement a ch in furtherance o	nd balance shee of public service,	t works of art, provide, in Pa	historical art XIV,
t	trea amo	e organization elected, as permitted under sures, or other similar assets held for publ ounts relating to these items:	ic exhibition, education, or resear	renue statement a ch in furtherance (nd balance shee of public service,	t works of art, provide the fo	historical ollowing
	(i)	Revenues included in Form 990, Part VIII,	line 1 .			· \$	
		Assets included in Form 990, Part X		••	•	· \$	
2	If th	e organization received or held works of ar ounts required to be reported under SFAS	t, historical treasures, or other sir 116 relating to these items:	milar assets for fin	nancial gain, prov	vide the follow	ıng
a	Rev	enues included in Form 990, Part VIII, line	1 .	•	•	\$	
Ł	Ass	ets included in Form 990. Part X			•	-\$	

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

Schedule D (Form 990) 2008

	LAND INSTITUTE			48-084		Page 2
Part III Organizations Mainta	ining Collection	s of Art, Hist	orical Treasures, o	or Other Similar As	sets (cont	tınued)
3 Using the organization's accession that apply):	n and other records,	_		gnificant use of its colle	ction items (c	heck all
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e U Other				
c Preservation for future gener	ations					
4 Provide a description of the organ Part XIV		·			nı t	
5 During the year, did the organiza assets to be sold to raise funds r.	tion solicit or receive ather than to be main	donations of art tained as part o	, historical treasures, or f the organization's coll	r other similar ection?	Yes	□No
Part IV Trust, Escrow and Cu						
IV, line 9, or reported	an amount on Fo	orm 990, Par	t X, line 21.			
1 a Is the organization an agent, trus included on Form 990, Part X?	itee, custodian, or oth	er intermediary	for contributions or other	er assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and comp	lete the following	ng table:			
					Amount	···
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a	mount on Form 990, f	Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV.					_
Part V Endowment Funds Co	mplete if organiz	ation answei	red 'Yes' to Form S	990, Part IV, line 10).	
	(a) Current year	(b) Prior year	(c) Two years bac	(d) Three years back	(e) Four ye	ears back
1 a Beginning of year balance	589,000.				1	
b Contributions	150,000.					
c Investment earnings or losses	16,047.					
d Grants or scholarships .						
Other expenditures for facilities and programs	16,047.					
f Administrative expenses					1	
g End of year balance	739,000.				1	
2 Provide the estimated percentage	e of the year end bala	nce held as:				
a Board designated or quasi-endow	•	%				
b Permanent endowment ►	20.30%					
c Term endowment ►79	.70 %					
3a Are there endowment funds not in organization by	n the possession of th	ie organization t	that are held and admin	istered for the	Yes	. No
(i) unrelated organizations					3a(i)	Х
(ii) related organizations					3a(ii)	Х
b If 'Yes' to 3a(ii), are the related of	rnanizations listed as	required on Sch	nedule R?		3b	X
4 Describe in Part XIV the intended				XTV		
Part VI Investments—Land, B	Buildings, and Eq	uipment. Se	e Form 990. Part	K. line 10.		
Description of investment	(a) Cos	t or other basis vestment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book	Value
1 a Land			909,018.		90	9,018.
b Buildings			580,690.	107,273.		3,417.
c Leasehold improvements			12,598.	12,598.		0.
d Equipment			773,375.	393,686.	37	9,689.
e Other			146,800.			6,800.
Total Add lines 1a.1a (Column (d) sho	uld equal Form 900	Part X column (•		8,924.

48-0842156

Schedule D (Form 990) 2008 THE LAND INSTITUTE	48-0842156	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial State		
1 Total revenue (Form 990, Part VIII, column (A), line 12)		4,173,953.
2 Total expenses (Form 990, Part IX, column (A), line 25)		2,081,736.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		2,092,217.
4 Net unrealized gains (losses) on investments		-2,342.
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments	<u> </u>	
8 Other (Describe in Part XIV).		0.040
9 Total adjustments (net) Add lines 4-8	ļ	-2,342.
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		2,089,875.
Part XII Reconciliation of Revenue per Audited Financial Statements With Rever		1 171 611
1 Total revenue, gains, and other support per audited financial statements	1	4,171,611.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments		
b Donated services and use of facilities 2b	 []	
	[]	
· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————	
d Other (Describe in Part XIV). e Add lines 2a through 2d		
3 Subtract line 2e from line 1	2 e 3	4,171,611.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3 -	4,1/1,011.
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV). See Part XIV 4b	2,342.	
c Add lines 4a and 4b	4c	2,342.
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		4,173,953.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		4,110,555.
Total expenses and losses per audited financial statements	1 1	2,081,736.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		<u> </u>
a Donated services and use of facilities 2a		
b Prior year adjustments . 2b		
c Losses reported on Form 990, Part IX, line 25.		
d Other (Describe in Part XIV).		
e Add lines 2a through 2d .	2e	
3 Subtract line 2e from line 1		2,081,736.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV).		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	2,081,736.
Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 line 4, Part X; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	4; Part IV, lines 1b and 2	2b; Part V,
Part_V_ Line 4 - Intended Uses Of Endowment Fund		
THE_ORGANIZATION_INTENDS_TO_USE_ITS_ENDOWMENT_FUNDS_TO_GENERAT	<u>E AN ANNUAL INC</u>	COME FOR _
USE IN OPERATIONS. THE TERM ENDOWMENT CAN BE USED FOR SPECIAL	_NEEDS	

Schedule D (Form 990) 2008	Page 5
Schedule D (Form 990) 2008 Part XIV Supplemental Information (continued)	<u></u>
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SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► To be completed by organizations that answer 'Yes' to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.

TAND INSTITUTE

Attach to Form 990 or Form 990-EZ.

Inspection

Employer identification number

48-0842156

THE	C LAND INSTITUTE	48-0842156			
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its chargoverning instrument, or in a resolution of its governing body?	rter, bylaws, other	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all catalogues, and other written communications with the public dealing with student admissions, program and scholarships?	l its brochures, ms,	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast me period of solicitation for students, or during the registration period if it had no solicitation program, in a the policy known to all parts of the general community it serves? If 'Yes,' please describe. If 'No', please	a wav that makes	3	Х	
					
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4 a	Χ_	
t	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		4b	X	
(Copies of all catalogues, brochures, announcements, and other written communications to the public of student admissions, programs, and scholarships?	dealing with	4c	Х	
•	I Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No,' to any of the above, please explain. (If you need more space, attach a separate	statement \	4d	X	
	Tryou ariswered 100, to any or the above, please explain. (If you need more space, attach a separate				
_					
5 8	Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?		5 a		Х_
ŀ	Admissions policies?		5b		X_
•	Employment of faculty or administrative staff?		5 c		Χ_
•	Scholarships or other financial assistance?		5 d		Х
•	e Educational policies?		5 e		Х
f	Use of facilities?		5 f		Х
9	g Athletic programs?		5 g		Х
ı	n Other extracurricular activities?		5h		X
	If you answered 'Yes,' to any of the above, please explain. (If you need more space, attach a separat	e statement.) 			
6	a Does the organization receive any financial aid or assistance from a governmental agency?		6a		Х
	has the organization's right to such aid ever been revoked or suspended?	•	6ъ		X
7	If you answered 'Yes,' to either line 6a or line b, please explain using an attached statement. 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		7	Х	

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service

► Attach to Form 990. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, line 15, or line 16.

Open to Public Inspection

Name of the organization Employer identification number THE LAND INSTITUTE 48-0842156 Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes'

	to Form 990, Part	t IV, line 14b.		•	•	
1	For grantmakers. Does the grantees' eligibility for the g	organization mair grants or assistant	ntain records to si ce, and the select	ubstantiate the amount of the gion criteria used to award the g	rants or assistance, the rants or assistance?	Yes No
2	For grantmakers. Describe	in Part IV the org	anızatıon's proced	dures for monitoring the use of	grant funds outside the	United States.
3	Activities per Region (Use	Schedule F-1 (For	rm 990) if addition	nal space is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
						, ,
	-					
						<u></u>
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Totals BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule F (Form 990) (2008)

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48-0842156

Page 2

THE LAND INSTITUTE

Schedule F (Form 990) 2008

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other			N/A	l)
(h) Description of non-cash assistance			N/A					,								1(c)(3)
(g) Amount of non-cash assistance																rovided a section 50
(f) Manner of cash disbursement		REEMENT	9,000. WIRE TRANSFER													or counsel has pr
(e) Amount of cash grant		PERRENIAL RICE RESEARCH AGREEMENT	9,000.													which the grantee
(d) Purpose of grant	ASIA AND THE PACIFIC	PERRENIAL RI														ign country or for
(c) Region	EAST ASIA AND															charities by the fore
(b) IRS code section and EIN (if applicable)								,								at are recognized as o
(a) Name of organization							`				,		-			2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
	I :	1		ŧ	ŧ	ŧ .	•	E	: :	E :		r :	1	: 1	 : 1	

3 Enter total number of other organizations or entities BAA

Schedule F (Form 990) 2008

Page 3

48-08421

Schedule F (Form 990) 2008 THE LAND INSTITUTE

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule **F** (Form 990) 2008 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance BAA

Schedule F	F (Form 990) 2008	THE LAND	INSTITUTE			48-0842156	Page 4
Part IV	Supplemental	Information					
	Complete this par	t to provide the	nformation require	d in Part I, line 2, and any	other additional inf	ormation	
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TEEA3504L 01/06/09

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Schedule F (Form 990) 2008

SCHEDULE	٣	rants and Oth	Grants and Other Assistance to Organizations	Organization	u		OMB No 1545-0047
(Form 990)		Governmen	ernments and Individuals in the U.S.	Is in the U.S.	î		2008
Department of the Treasury Internal Revenue Service	▲ Comp	lete if the organizati	 Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22. Attatch to Form 990. 	orm 990, Part IV, lines 2	11 or 22.	<u>I</u>	Open to Public Inspection
Name of the organization THE LAND INSTITUTE						Employer identification number	ition number 6
	General Information on Grants and Assistance	tance					
 Does the organization m the selection criteria use 	Does the organization maintain records to substantiate the amount the selection criteria used to award the grants or assistance?		of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ntees' eligibility for the	grants or assistance,	and	X Yes No
	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	itoring the use of gra	int funds in the United St	ates	See Part IV]
Part II Grants and Oth 990, Part IV, In Part IV and Sch	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	ients and Organizations received more than \$5,0	izations in the Unit וססק5,000. Check וססקמל	ed States. Comple this box if no one i	ite if the organiza recipient received	tion answered '	res' on Form
1 (a) Name and address of organization or government	anization (b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KANSAS STATE UNIVERSITY	48-0771751		10,000.	0.			FUNDING FOR
MANHATTAN KS	 						PROJECT ON
							WHEATCKASS
							1 KANSTONIA I LON
	1 1 1 1 1 1 1 1 1 1						
2 Enter total number of se	Enter total number of section 501(c)(3) and government organizations	rganizations				A · 4	0
BAA For Privacy Act and Paperwork Reduction	BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	the Instructions for	Form 990.	TEEA3901L 12/19/08	12/19/08	Sched	Schedule I (Form 990) 2008

THE LAND INSTITUTE Schedule I (Form 990) 2008

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed. Part III

48-0842156

(d) Amount of (e) Method of valuation (book, non-cash assistance FMV, appraisal, other)		20, 607.			provide the information required in Part I, line 2, and any other additional information.			<u>be_made_through_a_faculty</u>	_ <u>The_award is_intended_to</u>	costs are not an allowable		ısumables; field, growth chamber	or greenhouse fees; and travel to field sites. Funds may not be used for computers or	ing months when the applicant is	
(b) Number of cash grant of recipients	ATURAL SYS AGRICUL	14				n <u>of How Grants are Use</u>		<u>0 per year. Grants will</u>	ccountability purpos	her_research. Indire		earch eguipment and	to field sites. Fund	located_for_salary_	150±
(a) Type of grant or assistance	STIPENDS FOR RESEACH EXPENSES RELATED TO WATURAL SYS AGRI				Part IV Supplemental Information. Complete this part to	<u>Part I, Line 2 - Grantmaker's Description of How Grants are Used</u>	Use of Research Funds:	The maximum award will be \$9,000 per year.	member_for_administration_and_accountability_purposesThe_award_is_intended_to_	support_the_student_and_his_or_her_research. Indirect_costs_are_not_an_allowable	expense:	Grant_funds_may_be_used_for_research_equipment_and_consumables;_field,_growth_chamber_	or_greenhouse_fees; and travel_	textbooksFunds_may_also_be_allocated_for_salary_during_months_when_the_applicant_is	working on his/her research project

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ.
► To be completed by organizations that answered
Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service	Tes of	n Form or	Form 99	0-EZ, Par		Open to Public Inspection						
Name of the organization THE LAND INSTI	TUTE		_				1	mployer i 48-08		ation number		
Part I Excess To be com	Benefit Transaction pleted by organizations the	s (sec nat ansv	tion 50 vered 'Ye	11(c)(3) es' on For	and section m 990, Part IV	n 501(c) /, line 25a	(4) organ or 25b, or	izatıor Form 99	ns on 90-EZ,	ly). Part V, Iır	e 40b.	
1	(a) Name of disqualified person					(b) Description	on of transaction	n			(c) Co	orrected No
							-					+
												+
2 Enter the amoun section 4958	t of tax imposed on the or	rganızat	ion man	agers or o	disqualified pe	rsons dur	ing the year	under	▶ \$			
3 Enter the amoun	t of tax, if any, on line 2,	above, i	reimburs	ed by the	organization				▶ \$			
To be co Part V, I		ations	that ar	nswered		,				Form 9	90-EZ	-,
(a) Name of interes	ted person and purpose		to or from) Original ipal amount	(d) E	Balance due	(e) In	default?	(f) Approve by board o committee	r agre	Written ement?
		То	From					Yes	No	Yes No	Yes	No
									-			
Total			-		▶ \$					<u> </u>		
Part III Grants of To be co	or Assistance Benef ompleted by organiza	itting ations	Interes that ar	sted Per	sons. I 'Yes' on F	orm 99	0, Part IV	, line 2	27.			
(a) Name of t	interested person	(b) Relation:	ship betweer the orga	interested persor nization	and	(c)	Amount of	f grant o	r type of ass	stance	
					_							_
Part IV Busines To be co	s Transactions Invo	lving ations	Interes that ar	sted Per	rsons. I 'Yes' on F	orm 990	0, Part IV	, line 2	28a, 2	28b, or 2	28c.	
(a) Name of I	nterested person		elationship sted persoi organizati	n and the	(c) Amou transacti	nt of on \$	(d) Description of transaction				organ	naring of ization's inues?
TOAN TAGUCON		ENAT	TV MP	MDED		C 11F	EMDI OVA	(ENIT /	COMP	CMC N TT	Yes	No
JOAN JACKSON NANCY JACKSON			LY ME			<u>6,115.</u> 6,062.	EMPLOYN EMPLOYN			<u>ENSATI</u> ENSATI		X
MANCI ONCUSON	· · · · · · · · · · · · · · · · · · ·	1 11111	<u> </u>	איייייי	 °	0,002.	TOTE TOTE		COPIL	PHOUTT		

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

Schedule L (Form 990 or 990-EZ) 2008

SCHEDULE M (Form 990)

Non-Cash Contributions

► To be completed by organizations that answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE LAND INSTITUTE

Employer identification number

	THE LAND INSTITUTE 48-0842156								
Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	od of o reve	determin	iing	
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	5	37,002.	STOCK	MARI	KET		
10	Securities-Closely held stock								
11	Securities-Partnership, LLC, or trust interests								
12	Securities-Miscellaneous								
13	Qualified conservation contribution (historic structures)			<u>-</u>					
14	Qualified conservation contribution (other)				ļ				
15	Real estate-Residential								
16	Real estate-Commercial .				 				
17	Real estate—Other				 				
	Collectibles			· · · · · · · · · · · · · · · · · · ·	 				
	Food inventory	<u> </u>			 				
20	Drugs and medical supplies	<u> </u>			 				
21	Taxidermy								
22	Historical artifacts				 				
23	Scientific specimens								
24	Archeological artifacts Other ► ()			· · · · · · · · · · · · · · · · · · ·					
25 26	<u>~</u>				 				
27	<u></u>				 				
	Other ► ()				 				
			 						
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Dones	on during the e Acknowledd	tax year for contribution dement	ns for which the	29				
	0. ga, 1		,				Yes	No	
20	a During the year, did the organization receive by co		aranarti ranartad in l	Dort Livos 1 29 that it	muct				
3U i	hold for at least three years from the date of the in	ntibution an nitial contribu	tion, and which is not r	equired to be used for	exempt				
	purposes for the entire holding period?		·	•	·	30 a		X	
ŀ	o If 'Yes,' describe the arrangement in Part II.								
	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?							<u>X</u>	
32	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?						_	Х	
ŀ	of Yes,' describe in Part II								
33	If the organization did not report revenues in colur describe in Part II.	mn (c) for a ty	ype of property for which	ch column (a) is checke	d,				

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

Schedule M (Form 990) 2008

Schedule	M (Form 990) 2008	THE LA	AND I	INSTITUT	<u> </u>		48-08421	56 Page 2
Part II	Supplemental I	nformati	on. C	omplete t	this part to	provide the informatio information.	n required by Part I,	lines 30b, 32b,
	and 33. Also co	mplete ti	nis pa	art for any	/ additiona	information.	··-·- · · · · · · · · · · · · · · · · ·	
								
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TEEA4602L 07/14/08

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Schedule M (Form 990) 2008

SCHEDULE O

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

48-0842156 THE LAND INSTITUTE Form 990, Part III, Line 1 - Organization Mission WHEN PEOPLE, LAND, AND COMMUNITY ARE AS ONE, ALL THREE MEMBERS PROSPER; WHEN THEY RELATE NOT AS MEMBERS BUT AS COMPETING INTERESTS, ALL THREE ARE EXPLOITED. BY CONSULTING NATURE AS THE SOURCE AND MEASURE OF THAT MEMBERSHIP, THE LAND INSTITUTE SEEKS TO DEVELOP AN AGRICULTURE THAT WILL SAVE SOIL FROM BEING LOST OR POISONED WHILE PROMOTING A COMMUNITY LIFE AT ONCE PROSPEROUS AND ENDURING. Form 990, Part III, Line 4d - Other Program Services Description NSA FELLOWS - GRADUATE STUDENTS ARE TRAINED IN NATURAL SYSTEMS AGRICULTURE, PERFORM IMPORTANT RESEARCH, AND HELP DEVELOP NSA PROTOTYPES FOR THE PRAIRIE AND OTHER ECOSYSTEMS. THE PROGRAM PROMOTES THE DEVELOPMENT OF AN INTERDISCIPLINARY, INTERMURAL NETWORK OF RESEARCH GROUPS INTERESTED IN NSA. Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents THE ANNUAL MEETING TIME MAY BE ADVANCED OR DEFERRED AS THE BOARD DESIRES (HAS BEEN SET FOR THE THIRD MONDAY IN MAY OF EACH YEAR). NOTICE OF MEETING MAY BE MADE BY EMAIL AND THE PURPOSE OF THE MEETING MAY BE DELIVERED BY EMAIL. QUOROM IS CHANGED FROM TWENTY FIVE PERCENT TO A MAJORITY. NOTICE OF SPECIAL MEETING MAY BE MADE BY EMAIL. IF ONE OR MORE SHALL BE ELECTED, THE ASSISTANT ADDED: ASSISTANT SECRETARY. SECRETARY, IN THE ABSENCE OF THE SECRETARY, SHALL HAVE ALL THE AUTHORITY AND DUTIES HE OR SHE SHALL PERFORM SUCH DUTIES AS MAY BE ASSIGNED INVESTED IN THE SECRETARY.

TEEA4901L 12/19/08

Name of the organization THE LAND INSTITUTE	Employer identification number 48-0842156
Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents (continued)
TO HIM OR HER BY THE TREASURER, THE BOARD OF DIRECTORS, OR THE	PRESIDENT.
CHANGED: TREASURER. THE TREASURER SHALL BE THE FINANCIAL OFFI	CER OF THE
CORPORATION AND SHALL RECEIVE AND DEPOSIT IN A BANK OR BANKS AI	L THE MONIES OF THE
CORPORATION AND KEEP AN ACCURATE ACCOUNT THEREOF. HE OR SHE SH	HALL MAKE
DISBURSEMENTS SUBJECT TO SUCH REGULATIONS AS MAY BE DETERMINED	FROM TIME TO TIME BY
THE BOARD OF DIRECTORS, AND SHALL MAKE REPORTS OF THE FINANCES	OF THE CORPORATION
ANNUALLY AND WHENEVER REQUESTED BY THE BOARD OF DIRECTORS. HE	OR SHE SHALL PERFORM
SUCH OTHER DUTIES AS MAY BE REQUIRE BY THESE BYLAWS OR AS MAY E	BE ASSIGNED BY THE
BOARD OF DIRECTORS OR THE PRESIDENT.	.
ADDED: ASSISTANT TREASURER: IF ONE OR MORE SHALL BE ELECTED,	THE ASSISTANT
TREASURER, IN THE ABSENCE OF THE TREASURER, SHALL HAVE ALL THE	AUTHORITY AND DUTIES
VESTED IN THE TREASURER. HE OR SHE SHALL PERFORM SUCH DUTIES A	AS MAY BE ASSIGNED TO
HIM OR HER BY THE TREASURER, THE BOARD OF DIRECTORS, OR THE PRE	ESIDENT.
Form 990, Part VI, Line 10 - Form 990 Review Process	
THE PREPARER OF THE RETURN SENDS A COPY OF THE FORM 990 TO THE	LAND INSTITUTE'S
ACCOUNTANT WHO REVIEWS THE FORM PRIOR TO ITS FILING.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Co	onflicts
A COPY OF THE CONFLICT OF INTEREST POLICY IS GIVEN TO ALL BOARD	MEMBERS, STAFF
MEMBERS OR VOLUNTEERS UPON COMMENCEMENT OF SUCH PERSON'S RELATI	ONSHIP WITH THE LAND
INSTITUTE. EACH BOARD MEMBER, OFFICER, STAFF MEMBER, AND VOLUM	NTEER SIGNS AND DATES
THE POLICY AT THE BEGINNING OF HIS/HER TERM OF SERVICE. A CONF	FLICT OF INTEREST
DISCLOSURE FORM IS COMPLETED ANNUALLY BY ALL SPECIFIED PARTIES.	WHEN THE BOARD OF
DIRECTORS RECEIVES DISCLOSURE OF A POSSIBLE CONFLICT OF INTERES	ST, THE BOARD
DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS. IF IT DOES EX	KIST, THE BOARD VOTES

Schedule 0 (Form 990) 2008	Page 2
Name of the organization THE LAND INSTITUTE	Employer identification number 48-0842156
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts	s (contin
TO AUTHORIZE OR REJECT THE TRANSACTION OR TAKE ANY OTHER ACTION	DEEMED NECESSARY TO
ADDRESS THE CONFLIST AND PROTECT THE LAND INSTITUTE'S BEST INTE	RESTS.
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
INFORMATION IS AVAILABLE UPON REQUEST	
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2008

Schedule I, Part IV - Supplemental Information

Page 3

Client LANDINST

THE LAND INSTITUTE

48-0842156

11/30/09

02.37PM

Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

An accounting of the expenditure of grant funds must be sent to The Land Institute.

Each student writes a research abstract about the research supported by The Land

Insitute.

2008	Schedule D, Part XIV - Supplemental Information				
Client LANDINST	THE LAND INSTITUTE		48-0842156		
11/30/09			02.37PM		
Schedule D, Parl Other Revenue I	t XII, Line 4b ncluded On Form 990 But Not Included In F/S				
	SSES ON INVESTMENTS	. \$	2,342. 2,342.		
		Total \$	2,342.		

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Form **8868**

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury

File a separate application for each return.

Internal Revenue	Service		rile a Separate application for each	return.		1		
If you are filing for an Automatic 3-Mont		Automatic 3-Month	Extension, complete only Part I and chec		► [X]			
			tomatic) 3-Month Extension, complete onl		page 2 of th	us form)		
-	_	•	ady been granted an automatic 3-month ex	• .	, •	•		
			sion of Time. Only submit original (
A corporation	required to fi	le Form 990-T and	requesting an automatic 6-month extension	on – check l	this box and	complete Part I o	only ► 🗌	
All other corp	oorations (incl eturns	uding 1120-C filers), partnerships, REMICS, and trusts must (use Form 70	004 to reques	t an extension of	f time to file	
the additiona Form 990-T	i below (6 moi I (not automai Instead, you r	nths for a corporat tic) 3-month extent nust submit the ful	electronically file Form 8868 if you want a 3 ion required to file Form 990-T). However, sion or (2) you file Forms 990-BL, 6069, or ly completed and signed page 2 (Part II) o e-file for Charities & Nonprofits.	VOLL CARROL	tile Form XX6	X electronically i	if (1) value want	
	Name of Exempt	Organization				Employer identification number		
Type or print	Ì					1		
•		INSTITUTE				48-0842156		
File by the due date for	Number, street, a	nd room or suite number	If a P O box, see instructions					
filing your return See instructions	2440 EAST WATER WELL ROAD							
Instructions	· ·	City, town or post office, state, and ZIP code. For a foreign address, see instructions						
	·——	KS 67401-905						
		filed (file a separa	ate application for each return)					
X Form 990			Form 990-T (corporation)		Form 47			
Form 990			Form 990-T (section 401(a) or 408(a) trust) Form 5227					
Form 990		ļ	Form 990-T (trust other than above) Form 6069					
Form 990)-PF		Form 1041-A		Form 88	70		
Telephone If the orga If this is f check this the exten I reques until The ext	e No - (785) anization does for a Group Re s box - [] sion will cover st an automati 2/15 ension is for t calendar year tax year begin	s not have an office turn, enter the organization of a second of the control of the control of the organization of the organization of the control of the organization of the control of the organization of t	, 20 <u>_08</u> _, and ending <u>6/30</u>	, check this mber (GEN) ch a list with 990-T) exten	box If the names a sion of time amed above		embers	
3a If this a	pplication is fo	or Form 990-BL, 99 See instructions	90-PF, 990-T, 4720, or 6069, enter the tent	ative tax, les	ss any	3a \$	0.	
b If this application is for Form 990-PF or 990-T, enter any refundable cr made. Include any prior year overpayment allowed as a credit				stimated tax	payments	3ь\$	0.	
deposit	e Due. Subtract with FTD coup tructions	ct line 3b from line con or, if required,	3a Include your payment with this form, o by using EFTPS (Electronic Federal Tax P	or, if required Payment Sys	i, item)	3c \$	0.	
Caution. If yo payment instr		make an electror	nic fund withdrawal with this Form 8868, se	e Form 8453	3-EO and For			
BAA For Priv	vacy Act and	Paperwork Reduct	ion Act Notice, see instructions.	- - -		Form 8868	8 (Rev 4-2009)	