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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)

Department of the Treasure

Open to Public

OMB No 1545-0047

The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection 2009, and ending For the 2009 calendar year, or tax year beginning January 1 December 31 20 09 Employer identification number C Name of organization THE MONTANA LAND RELIANCE Check if applicable Doing Business As Montana Land Reliance 0369262 Address change label or print or Number and street (or P.O. box if mall is not delivered to street address) Room/suite Name change type. (406) 443-7027 Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated Helena, MT 59624-0355 G Gross receipts \$ Amended return F Name and address of principal officer: Lois Delger-DeMars Application pending H(a) Is this a group return for affiliates? ☐ Yes "same as C above" H(b) Are all affiliates included? Tyes Tax-exempt status: 4947(a)(1) or √ 501(c) (3)

√ (insert no.) If "No," attach a list (see instructions) Website: ▶ www.mtlandreliance.org H(c) Group exemption number > L Year of formation: 1978 M State of legal domicile. MT Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Part 1 Summary 1 Briefly describe the organization's mission or most significant activities: The mission of the Montana Land Reliance is to provide permanent protection for private lands that are ecologically significant for agricultural production, Governance Number of voting members of the governing body (Part VI, line 1a) 1.0 1.2010 Number of independent voting members of the governing body (Part VI, line 1b) ∞ಕ 4 8 Activities 5 28 Total number of employees (Part V, line 2a) 6 0 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12208 0 7a b Net unrelated business taxable income from Form 990-T, line 34 0 Current Year 1,620,605 1,751,492 8 Contributions and grants (Part VIII, line 1h) 135 99 9 Program service revenue (Part VIII, line 2g) . . 811,264 204,682 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -8,333 28.019 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2.423.671 1.984.292 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 Benefits paid to or for members (Part IX, column (A), line 4) . 1.001.136 1.077.444 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,023,003 563.611 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . 2,024,139 1,641,055 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 399,532 343,237 e e Beginning of Current Year End of Year 13,134,300 13,462,704 Total assets (Part X, line 16) 62,946 48,113 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 13,071,354 13,414,591 Signature Block Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, of its true, correct, and complete peclaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here coras Type or print name and title Check If Preparer's identifying number Date Preparer's (see instructions) signature employed 🕨 🗀 Paid Preparer's Firm's name (or yours EIN Use Only if self-employed). address, and ZIP + 4 Phone no ▶ May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2009)

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: The mission of The Montana Land Reliance is to provide permanent protection for private lands that are ecologically
	significant for agricultural production, fish and wildlife habitat, and open space.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$452,452 including grants of \$0) (Revenue \$0) New Land Projects: MLR worked directly with over 50 landowners in 2009 to permanently protect their private lands for continued agricultural production, open space, and natural habitat. A total of 19 of these landowners donated conservation easements to MLR in 2009 that protected over 10,700 acres that included 2,880 acres of crop/hay/pasture lands; over 7,800 acres of range/timber lands; nearly 41 miles of stream/river frontage; over 6,800 acres of prime elk habitat; and over 470 acres of wetlands. Sixty-eight percent (68%) of the easements completed in 2009 were adjacent to or within five miles of other lands permanently protected by conservation easements. For a list of specific projects and expenses related to each, please see Schedule O.
4b	(Code:) (Expenses \$ 293,205 including grants of \$ 0) (Revenue \$ 0)
	Stewardship staff (consisting of the lands manager and 13 active land stewards) monitors each conservation easement held by MLR on an annual basis. This monitoring includes a visit to the subject property and discussions with all the landowners. The lands manager and land stewards also work with existing easement donors to supply natural resource information and contacts for the landowner to improve their land holdings in any way requested. Stewardship staff further works with legal counsel in regard to any potential issues that arise on any conservation easement held by MLR. Total expenditures for stewardship and monitoring activities include: salaries/benefits - 243,641; printing - 366; rent - 2,482; equipment - 6,426; insurance/licensing - 206; telephone - 3,025; contract - 1,853; legal - 10,271; postage/supplies - 4,927; travel/per diem - 20,008.
4c	(Code:) (Expenses \$ 398,662 including grants of \$ 0) (Revenue \$ 99) Outreach & Education: MLR staff travel across the state of Montana conducting meetings with potential clients, county planning boards, county commissioners, various agricultural/trade groups/organizations, and other community groups to provide answers to their questions and conduct general educational activities focused on the benefits of conservation
	easements. For these outreach activities, MLR publishes various brochures and an annual report to provide information. Additionally, staff participates with numerous conservation groups to educate the general public about the land trust community's conservation efforts. Specific expenditures include: general outreach/education - 326,243; brochures - 1,395; annual report - 24,720; conservation organizations (local, state, national) - 25,366; news-letter - 10,346; agricultural outreach/education - 8,554; legislative education/outreach - 2,038.
4d	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
40	Total program service expenses ► 1,144,319

	·		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	1	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
•	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
	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	1	
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓_
	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		<u> </u>
	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	✓	
	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	✓	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	1.50		377
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	4.00		24 A
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			TOTAL TOTAL
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	Supply of the su	**. 3 3 1	3.5 2.4 3.4 3.4 3.4 3.4 3.4 3.4 3.4 3.4 3.4 3
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		Action Co.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	K.	√.
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	~ , , , , , , , , , , , , , , , , , , ,	4	201
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		√
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	16		√
17	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		1

Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	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		✓
	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	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	1	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	1	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			-
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		:	-
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	·	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		1
b	Statements, filed for the calendar year ending with or within the year covered by this return 1 2a 28 1 28 1 at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	-	٠.	· · ·
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		<u> </u>
	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.	-	نستست	ا . لمحسد
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a_		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	<i>(</i>	***	, ,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		~	لئد
_	and services provided to the payor?	7a 7b	*	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	,		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c_		√
d	If "Yes," indicate the number of Forms 8282 filed during the year	* / /		ا څو
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>	•	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		\
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	,	*	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	"	لسينسا
^	Sponsoring organizations maintaining donor advised funds.	Ŭ	-	. 1
9 a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		ĺ	-
а	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	ļ · ,		*
11	Section 501(c)(12) organizations. Enter:			, i
	Gross income from 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	amounts due or received from them.)	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		_	

Form	990 (2009)		P	age 6
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through			
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, Schedule O. See instructions.	or c	hang	ies ii
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	,	.,'	,
b	Enter the number of voting members that are independent		``-	7.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-10 m		
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			,
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		√
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4_		/
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		√
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	الموط	3/2	-2,
	the year by the following:			, ; .
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	ŀ		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		✓
	tion B. Policies (This Section B requests information about policies not required by the Inte	ərnal		
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		1
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	✓	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Sec. 1	大瓶	, E
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			l
	rise to conflicts?	12b	✓	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c		
13	describe in Schedule O how this is done	13	۲Ť	1
14	Does the organization have a written document retention and destruction policy?	14	1	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by	3° &	11.5	1.
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	20, 40,		138.4
а	The organization's CEO, Executive Director, or top management official	15a	1	,000
	Other officers or key employees of the organization	15b	1	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	1,32,7	18326	, 784 .+37,
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	叁.	3.4	, <u>;</u> ;
	with a taxable entity during the year?	16a		1
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	7. 1	-14	مراده د در
J	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1 1	·;"
	the organization's exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ N/A			
	Section 6104 requires an organization to make its Forms 1023 for 1024 if applicable) 990, and 990-T (501)			

available for public inspection. Indicate how you make these available. Check all that apply.

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Lois Delger-DeMars, Montana Land Reliance, 324 Fuller Ave., Helena, MT 59601. (406) 443-7027

Own website Another's website Upon request

policy, and financial statements available to the public.

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☑ Check this box if the organization did not co	mpensate	any c	urre	ent	offic	cer, d	irec	tor, or trustee.		
(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Jerry Townsend President, Board of Directors	1	√		1				0	0	0
Carol Bibler Vice-President, Board of Directors	1	1		✓				0	0	0
George S. Olsen Secretary/Treasurer, Board of Directors	1	1		1				0	0	0
Phil Rostad Director	1	✓						0	0	0
Allen Bjergo Director	1	1						0	0	0
Roy O'Connor Director	1	1						0	0	0
Judith Hutchins Director	1	/						0	0	0
Rick Berg Director	1	1						0	0	0

Part VII Section A. Officers, Directors, Tru	istees, Key	Emp	loy	ees,	an	d Higi	hest	Compensated	1 Employee	s (cont	nued)
(A)	(B)			•	C) 			(D)	(E)		(F)
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensate from relate organization (W-2/1099-M	on ed ns	Estimated amount of other compensation from the organization and related organizations
N/A											
							_				
		<u> </u>	_				_				
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							_		,	-	····
							_				
			_	_							
			-	<u> </u>			_				
1b Total		<u> </u>					>	0		0	
Total number of individuals (including but reportable compensation from the organiz	ation ► N/	Α							· · · · · · · · · · · · · · · · · · ·	l s	Yes No
3 Did the organization list any former office employee on line 1a? <i>If</i> "Yes," complete S	Schedule J	for s	ıch	ınd	ivid	ual					3 ✓
4 For any individual listed on line 1a, is the the organization and related organizations individual.	greater tha	ortab an \$1	50,0	000°	pen ? If	salior "Yes,"	" co	mplete Schedu	ile J for suc	h a	4
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	com plete	per Scl	sati nedu	on .le .	from J for s	any such	unrelated org	janization f	∪.	5
Section B. Independent Contractors										A	
Complete this table for your five highest of compensation from the organization.	ompensate	ed inc	lepe	ende	ent	contr	acto		d more tha	n \$100	
(A) Name and business ad	dress						_	(B) Description of s	services	C	(C) ompensation
N/A							+				
	_										-
Total number of independent contractors (more than \$100,000 in compensation from	including b	out no	t lin	nite	d to	those	LL e list	ted above) who	received		

Form 9									Page 9
Part	VIII	Statement of Re	venue						
					ę.	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns		1a	0	-			- 1
g	b			1b	0				ا د ،
ts,	С	Fundraising events .		1c	18,615	•			
gi	d	Related organizations		1d	0	•		-	-
sim's	е	Government grants (contri	butions),	1e	0	• •		• • •	٠ , ,
igi Ter	f	All other contributions, gifts, g		ا . ا				,	: ;
e Ei		and similar amounts not inclu		1f	1,732,877 191,849	, ,			
Contributions, gifts, grants and other similar amounts	g	Noncash contributions include Total. Add lines 1a–1f	ed in lines 1a-	1t: \$	151,045	1,751,492			,
	- 11	Total. Add lines 1a-11	• • •	• •	Business Code	1,751,492	,		, ,
Program Service Revenue		Publications			813312	99	0	0	n
eve.	2a				013312	0	0	0	0
Se F	D	•••••		••••		0	0	0	0
ervi	٠			• • • • • •		0	0	0	0
S E	a	•••••		••••		0	0	0	0
graı	f	All other program servi	ce revenue	·····		0	0	0	0
Pro	g	Total. Add lines 2a-2f			▶	99	1		~ .
	3	Investment income (inc	ludina divi	dends	unterest and				
	_	other similar amounts)	_		•	528,332	0	0	0
	4	Income from investment of				0	0	0	0_
	5	~	<u> </u>		.	0	0	0	0
			(i) Real		(ii) Personal	, , ,	_		3,
	6a	Gross Rents		0	0		3, 3		
	ь	Less: rental expenses		0	0	1 2 21	₹ 4 55 % ×		n to pite a gen
	C	Rental income or (loss)	<u> </u>	0	0				
	d	Net rental income or (lo	, /	• •	· · · · · · · · · · · · · · · · · · ·	0	0	0	0
	7a	Gross amount from sales of	(i) Secunti		(ii) Other	* J. J. C.	y *** ,** ***	375 7 1	F, 8
		assets other than inventory	2,01	3,259	0	, ,			
	b	Less: cost or other basis	(2,336	: 000	اه	Land Living 24 4 4	The way,	£ " "' # "	$t_i = c_i + \pi i$
		and sales expenses .		,650)	0	•		٠٤ ٠ <u></u>	, * , , , , , ,
	d	Gain or (loss) Net gain or (loss)	(02.0	,,,,,,,	.	(323,650)	0	0	0
6)	_	-			<u> </u>	(020,000)		· · · · · · · · · · · · · · · · · · ·	,
nge	8a	Gross income from events (not including \$	fundraisi 18 61	ng 15		۱۰ دو ۱۰	,	i . 5*	'n ' a ' a ' - c
ķ		of contributions reporte				, , , , ,	- •		
æ		See Part IV, line 18		. a	83,350	- * * * * * * * * * * * * * * * * * * *	of the the	2 4 4	6 gr . h
Other Reve	Ь	Less: direct expenses		-	(55,331)	74. 1.35 1.84 2.34			
ō		Net income or (loss) from			events >	28,019	0	0	0
	9a	Gross income from gam	ning activiti	es			A 12 1 /	, (,) (,), , , , , , , , , , , , , , ,	1 74 1 7 1
		See Part IV, line 19			0	, , ,	, ,	, ,	,
		Less: direct expenses,		. b					
	C	Net income or (loss) from	om gaming	activ	rities ▶	0	0	0	0
	10a	Gross sales of inve	entory, le	ess	_	,	,,		
	١.	returns and allowances			0				
		Less: cost of goods so					0	0	
	⊢ိ	Net income or (loss) from		iivent	Business Code	0	,	,	
	<u> </u>				20311633 0008	0	0	0	0
	11a					0	0	0	-0
	b	• • • • • • • • • • • • • • • • • • • •		••••		0	0	0	0
	بر 2	All other revenue				0	0	0	0
	1 -	Total. Add lines 11a-1			—	0		,	<u> </u>
		Total revenue. See ins				1,984,292	0	0	0
	-			•		-,,	·		•

Part IX Statement of Functional Expenses

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

	All other organizations must complete colu				(C), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0		-
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0	-	
3	Grants and other assistance to governments, organizations, and individuals outside the				
4	U.S. See Part IV, lines 15 and 16 Benefits paid to or for members	0	0		÷ .,,
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	0	0	o	0
_	persons described in section 4958(c)(3)(B)	849,337	547,303	237,921	64,113
7	Other salaries and wages	049,337	347,303	231,321	04,113
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	91,788	64,251	22,948	4,589
9	Other employee benefits	61,000	42,701	15,250	3,049
10	Payroll taxes	75,319	52,723	18,831	3,765
11	Fees for services (non-employees):		•	•	_
	Management	23,793	22.005	0 795	3
		13,207	22,995 9,245	3,301	661
	Accounting	13,207	9,245	3,301	001
	Lobbying	0	- 1/2 are 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, ,	0
е	Professional fundraising services. See Part IV, line 17	9,776	7,332	2,444	0
f	Investment management fees	30,329	21,230	7,582	1,517
g	Other	35,339	24,737	8,835	1,767
12	Advertising and promotion	73,047	51,133	18,263	3,651
13	Office expenses	926	648	232	46
14	Information technology	0	0	0	0
15 16	-	42,502	29,751	10,626	2,125
16 17	Occupancy	113,607	79,525	28,402	5,680
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	o	0	0	0
19	Conferences, conventions, and meetings .	8,505	6,379	2,126	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization.	18,219	12,753	4,373	1,093
23	Insurance	14,971	10,480	3,743	748
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together	, he	AND THE STATE		
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				·, ·, ·,
а	Equipment/Maintenance	19,179	13,433	4,788	958
b	Uncollectible Accounts	41,295	28,784	0	12,511
C	Conservation Acquisitions	118,100	118,100		
đ	Conservation Projects	816	816	0	
е		0	0	0	
f	All other expenses 0	0	0	0	
25_	Total functional expenses. Add lines 1 through 24f	1,641,055	1,144,319	390,460	106,276
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				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	226,077	1	373,581
	2	Savings and temporary cash investments	308,506	2	215,809
	3	Pledges and grants receivable, net	0	3_	0
	4	Accounts receivable, net	129,783	4	120,339
	5	Receivables from current and former officers, directors, trustees, key			` ,, {
		employees, and highest compensated employees. Complete Part II of	· · · · · · · · · · · · · · · · · · ·	~¿	
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	, O	6	0
ţ	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
ĕ	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or 10a 260,606 other basis. Complete Part VI of Schedule D	74. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	, ·	1
	b	Less: accumulated depreciation 10b 166,639	44,908	10c	93,967
	11	Investments—publicly traded securities	11,920,783	11	12,279,271
	12	Investments—other securities. See Part IV, line 11	502,425	12	378,000
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	1,818	15	1,737
	16_	Total assets. Add lines 1 through 15 (must equal line 34)	13,134,300	16	13,462,704
	17	Accounts payable and accrued expenses	62,946	17	48,113
	18	Grants payable	0		0
	19	Deferred revenue , , , , ,		19	0
	20	Tax-exempt bond liabilities		20	0
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21_	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			in the state of th
_		persons. Complete Part II of Schedule L	0		0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0		0
	25	Other liabilities. Complete Part X of Schedule D		_=-	0
	26	Total liabilities. Add lines 17 through 25	62,946	26	48,113
seou	<u> </u>	Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.	April 1 St. Co. So.	',' .	
直	27	Unrestricted net assets	7,883,725		7,650,881
ä	28	Temporarily restricted net assets	4,805,424		5,291,062
밀	29	Permanently restricted net assets	382,205	29	472,648
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.	£	,	
ţ	30	Capital stock or trust principal, or current funds	0	30	0
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund	0		0
ğ	32	Retained earnings, endowment, accumulated income, or other funds	0	 -	
Ş	33	Total net assets or fund balances	13,071,354		
_	34	Total liabilities and net assets/fund balances	13,134,300	34	13,462,704

Pai	t XI Financial Statements and Reporting			
_			Yes	No
1	Accounting method used to prepare the Form 990:		٠,	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	,		; ;
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	✓	
	Were the organization's financial statements audited by an independent accountant?	2b	✓	
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	1	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		, :	:
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:	2		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			نسنسا
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		1
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009
Open to Public Inspection

Employer Identification number Name of the organization THE MONTANA LAND RELIANCE 81 0369262 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public

8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9	\mathbf{Z}	An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross
		receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its
		support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses
		acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
10		An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

. •	_	Tan Organización	organizou una operatou em	clasifier, to took for public curvey, coo coolings, ex	(-)(-)-
11		An organization	organized and operated ex	xclusively for the benefit of, to perform the fund	ctions of, or to carry out the
		purposes of one	or more publicly supported	d organizations described in section 509(a)(1) or s	section 509(a)(2). See section
		509(a)(3). Check	the box that describes the	type of supporting organization and complete li	nes 11e through 11h.
		a 🔲 Type I	b 🔲 Type II	c Type III-Functionally integrated	d 🔲 Type III-Other
е		By checking this	s box, I certify that the org	ganization is not controlled directly or indirectly	by one or more disqualified

e 🗆	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified
	persons other than foundation managers and other than one or more publicly supported organizations described in section
	509(a)(1) or section 509(a)(2).
f	If the organization received a written determination from the IRS that it is a Type I. Type II. or Type III supporting

f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting
	organization, check this box
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the
	following persons?

tollowing persons.						
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii)		Yes	No		
	and (iii) below, the governing body of the supported organization?	11g(i)				
	A family member of a person described in (i) above?	11g(ii)				
) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)				

(i) Name of supported organization	(ii) EIN	ation about the support (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the organization in col. (i) listed in your governing document?		1		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
									
			ļ						
									· · · · · ·
otal									

described in section 170(b)(1)(A)(vi). (Complete Part II.)

Par	(Complete only if you chec	j anizations L ked the box	on line 5, 7,	or 8 of Part I.	υ(Β)(Τ)(Α)(IV) <u>) </u>	and 170(b)(1)(A)(VI)
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount			,			
	shown on line 11, column (f)					May 2 2	
<u>6</u>	Public support. Subtract line 5 from line 4.	1,00	l	1. 11 11	्रीतः । २० ^{के} शः	* -,4 ° - 2	
	tion B. Total Support lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	(4) 2000	(6) 2000	(0) 200.	(4) 2000	(6, 2000	(i) rotal
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .	1, 12, 12, 50	۲ ، , ,	t is to we	4 4 4 4 4 7 A	r > -)	
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for	•	•	nd, third, fourth	 , or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he			· · · · · ·	<u></u>		<u> ▶ L</u>
	tion C. Computation of Public Su						
14	Public support percentage for 2009 (line	, ,,	•	1, column (f))		14	<u>%</u> %
15	Public support percentage from 2008 Sc					15	
	33% % support test—2009. If the organiand stop here. The organization qualifies	s as a publicly	supported orga	inization			▶□
b	33% % support test—2008. If the organibox and stop here. The organization qua						
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum"	facts-and-circu	mstances" test	check this box	and stop here	. Explain in Part	IV how the _
b 18	10%-facts-and-circumstances test – 2008 more, and if the organization meets the "organization meets the "facts-and-circumst Private foundation. If the organization did	facts-and-circun ances" test. The	nstances" test, organization qu	check this box a	and stop here. cly supported or	Explain in Part ganization	IV how the

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support	•					
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,671,190	1,816,546	1,750,124	1,620,605	1,751,492	8,609,957
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	45,981	3,535	23,762	(8,198)	28,118	93,198
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0 1,717,171	0 1,820,081	0 1,773,886	0 1,612,407	0 1,779,610	<u>0</u> 8,703,155
6	Total. Add lines 1 through 5	1,717,171	1,020,001	1,773,000	1,012,407	1,779,010	6,703,133
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year	0	0	0	0	0	0
с 8	Add lines 7a and 7b						8,703,155
Sec	tion B. Total Support	7, " 1999; 1°, 1279 - 111 - 1245.	14. N. B	Salan seddi's and sedant	Mr. S. D. D. L. 43. SYCORES	Tarte to all the same the street	6,705,155
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	1,717,171	1,820,081	1,773,886	1,612,407	1,779,610	8,703,155
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	489,955	707,913	845,256	811,264	204,682	3,059,070
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	489,955	707,913	845,256	811,264	204,682	3,059,070
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)	2,207,126		•		1,984,292	11,762,225
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u> </u>	nd, third, fourt			
<u>Sec</u>	tion C. Computation of Public Su					 	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008	Schedule A, Pa	art III, line 15	ne 13, column		15 16	74 % 75 %
Sec	tion D. Computation of Investme	nt Income Pe	ercentage				
17	Investment income percentage for 200	•		-		17	26 %
18	Investment income percentage from 26					18	27 %
19a	33\% % support tests - 2009. If the org 17 is not more than 33\% %, check this b	oox and stop h	ere. The organ	ızation qualıfie:	s as a publicly :	supported orga	anization 🕨 🛭
b	33% % support tests - 2008. If the organine 18 is not more than 33% %, check this	s box and stop	here. The orga	inization qualifie	es as a publicly	supported orga	nization 🕨 🔲
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	o, check this be	ox and see inst	tructions 🕨 🔲

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
Part III, Line 2 MLR produces various publications for staff's use as outreach materials for potential new land
conservation projects and for educational activities. MLR also holds an art auction that helps raise funds to support
the tax-exempt functions of the organization.
······
······
·

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

27 | 201

2009

OMB No 1545-0047

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Open to Public Inspection

•	• Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.										
•	Section 527 organizations: Con	nplete Part I-A only.									
	f the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.										
	. ,, ,	that have NOT filed Form 5768 (elections," to Form 990, Part IV, line 5 (Proxy	· ·	h)): Complete Part II-B Do	not complete Part II-A.						
•	Section 501(c)(4), (5), or (6) organizations: Complete Part III.										
Na	me of organization		•	Employe	r identification number						
	E MONTANA LAND RELIA			81	0369262						
Pa	rt I-A. Complete if the	organization is exempt unde	er section 501(c	or is a section 527	organization.						
1	Provide a description of the	e organization's direct and indirec	t political campaig		_						
2	Political expenditures .			· · · · · ▶ \$	0						
3	Volunteer hours				00						
Pa		e organization is exempt und									
1		xcise tax incurred by the organiza									
2		xcise tax incurred by organization									
3		d a section 4955 tax, did it file For	•	ear?	. Yes No						
4a b					· L Yes L No						
_		organization is exempt und	er section 501(e	c), except section 5	01(c)(3).						
1	Enter the amount directly	expended by the filing organization	on for section 527	exempt function							
	activities			· · · · · ▶ \$							
2	Enter the amount of the fil 527 exempt function activ	ing organization's funds contribute	_	zations for section							
2	•	penditures. Add lines 1 and 2. Er									
3	•		iter fiere and on	\$							
4		file Form 1120-POL for this year?	· · · · · · · ·		. 🗌 Yes 🔲 No						
5	Enter the names, addresses	and employer identification numbe	r (EIN) of all section	n 527 political organizati	ons to which payments						
		zation listed, enter the amount paid f									
		were promptly and directly delivered			a separate segregated						
	tung or a political action co	mmittee (PAC). If additional space is	s needed, provide i	ntormation in Part IV.							
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-						
	= -										

Pa	rt II-A Complete if the organizat under section 501(h)).	ion is exempt under section 501(c)(3) and	filed Form 5768	(election						
	Check ► ☐ if the filing organization belongs to an affiliated group. Check ► ☐ if the filing organization checked box A and "limited control" provisions apply.									
		bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals						
1a b c	Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines Other exempt purpose expenditures Total exempt purpose expenditures (ad	0 0 0 1,641,055 1,641,055								
f		e amount from the following table in both	232,053							
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e.		A Commence of the Commence of						
	Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	\$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000. \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000								
g	Grassroots nontaxable amount (enter 2	25% of line 1f)	58,013							
h	Subtract line 1g from line 1a. If zero or		0							
i	Subtract line 1f from line 1c. If zero or		1700	0						
j 	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?									

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

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2a Lobbying nontaxable amount	226,447	215,895	251,206	232,053	925,601				
b Lobbying ceiling amount (150% of line 2a, column (e))		£ 42 44 112	, 2,		0				
c Total lobbying expenditures	36,164	27,054	3,720	0	66,938				
d Grassroots nontaxable amount	56,612	53,974	62,801	58,013	231,400				
Grassroots ceiling amount (150% of line 2d, column (e))				Service of the servic	0				
f Grassroots lobbying expenditures	0	0	0	0	0				

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed (election under section 501(h)).						
		(a)		(b)	
	Ye	s	No		Amour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		1		: -	-
а	Volunteers?	4			,	/· {
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .	4		-	·	}
C	Media advertisements?	\dashv				
d	Mailings to members, legislators, or the public?	-				
е	Publications, or published or broadcast statements?	\dashv		_		
Ť	Grants to other organizations for lobbying purposes?	+				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	┪				
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? . Other activities? If "Yes," describe in Part IV	7				
	·		(·)			
J 2a	Total. Add lines 1c through 1i					, ~
	· · · · · · · · · · · · · · · · · · ·	寸	x , x	-*		ئىسى,مى
C			, j., .			
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	~-	ـــصىنىم			
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6).	c)(5), o	rsec	tion	·····
	33.10,10,1				Yes	No
1	More substantially all (90% or more) dues received pendeductible by members?			1	+	1
2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	•	2	_	+
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	-	•	3	+-	
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes."					red
1	Dues, assessments and similar amounts from members	.		-		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	al				
а	•	ŀ	2a			
þ	Carryover from last year	ŀ	2b			
C	Total	ł	2c 3			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ł	ن ,			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		÷ , -,			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyin and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	1	5			
_	rt IV Supplemental Information	_				
Con	replete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 2, complete this part for any additional information.	5;	and	Part 1	-B, lin	ie 1ı.
••••		•••	• • • • • •		•	•••••
					•	
			•••••			
		 .				

chedule C (For	m 990 or 990-EZ) 2009	Page 4
Part IV	Supplemental Information (continued)	
• • • • • • • • • • • • • • • • • • • •		
		••••••
		• • • • • • • • • • • • • • • • • • • •
		• • • • • • • • • • • • • • • • • • • •

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

	of the organization MONTANA LAND RELIANCE			Employer Identification number 81 : 0369262
Pai	Organizations Maintaining Do the organization answered "Ye	onor Advised Funds or Other Similar s" to Form 990, Part IV, line 6.	Fun	ds or Accounts. Complete if
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year) .			
4	Aggregate value at end of year			
5	, , , , ,	d donor advisors in writing that the assets	hold i	n donor advised
	funds are the organization's property, sul	oject to the organization's exclusive legal c	ontrol	l? Yes 🗌 No
6	Did the organization inform all grantees, used only for charitable purposes and no purpose conferring impermissible private	donors, and donor advisors in writing that of the benefit of the donor or donor advi	isor, c	or for any other
Da		plete if the organization answered "Yes"	" to E	iorm 990 Part IV line 7
				Offit 990, Part IV, life 7.
1	_ ' ' '	ld by the organization (check all that apply	-	
	Preservation of land for public use (e.	*		an historically important land area
	Protection of natural habitat	☐ Preservat	ion of	f a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organ easement on the last day of the tax year.	zation held a qualified conservation contrib	ution	in the form of a conservation
				Held at the End of the Tax Year
а	Total number of conservation easements			2a 734
b		easements		2b 820,777
c		certified historic structure included in (a) .		
d		ded in (c) acquired after 8/17/06		2d 0
		ified, transferred, released, extinguished, or		
3	the tax year ► 7	_		
4		to conservation easement is located >		
5	violations, and enforcement of the conse			
6	Staff and volunteer hours devoted to mo ▶ 7,850	nitoring, inspecting, and enforcing conserva	ation (easements during the year
7	Amount of expenses incurred in monitori ▶\$ 293,205	ng, inspecting, and enforcing conservation	easer	ments during the year
8	Does each conservation easement report 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ed on line 2(d) above satisfy the requireme	nts of	f section Yes . No
9	balance sheet, and include, if applicable, the organization's accounting for conservations		n's fin	ancial statements that describes
Pa		llections of Art, Historical Treasures, on swered "Yes" to Form 990, Part IV, line 8		her Similar Assets.
1a	art, historical treasures, or other similar as	under SFAS 116, not to report in its revenu sets held for public exhibition, education, or ote to its financial statements that describe	resea	arch in furtherance of public service,
b	historical treasures, or other similar asset provide the following amounts relating to		esear	ch in furtherance of public service,
		VIII, line 1		
2	following amounts required to be reported	ss of art, historical treasures, or other simild under SFAS 116 relating to these items:		
а		, line 1		
b	Assets included in Form 990, Part X .			▶ \$

Par	t III Organizations Maintaini	ng Collections o	of Art, Hi	istorical	Treasures	s, or (Other Similar A	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply	accession, and o	ther reco	rds, che	ck any of the	e follo	wing that are a	significant use of its
а	Public exhibition		d	ь	oan or exch	ange p	orograms	
b	Scholarly research		е	□ o	ther		· · · · · · · · · · · · · · · · · · ·	*******
С	Preservation for future generation	ions						
4	Provide a description of the organizary Part XIV.		and exp	laın how	they further	r the c	rganızation's ex	kempt purpose in
5	During the year, did the organization sassets to be sold to raise funds rather	olicit or receive do	onations of	f art, hist art of the	orical treasu organization	res, or n's col	other similar ection?	Yes No
Par	t IV Escrow and Custodial A IV, line 9, or reported an a					answe	red "Yes" to F	orm 990, Part
	Is the organization an agent, trustee included on Form 990, Part X?					ons o	r other assets n	Yes No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the	followin	g table:		1	
						_	<u> </u>	Amount
С	Beginning balance					. 10	:	
d	Additions during the year					. 19	1.	
е	Distributions during the year					. 16	<u> </u>	
f	Ending balance					. 11		
2a b	Did the organization include an amo	ount on Form 990						Yes No
Par	t V Endowment Funds. Co	mplete if the org	ganızatio	n answe	ered "Yes"	to Fo	rm 990, Part I	V, line 10.
		(a) Current year	(b) Pric		(c) Two years		(d) Three years ba	
1a	Beginning of year balance	269,371	1	176,638	" · · · · · · · ·	,	2.47 5.53	
b	Contributions	99,152		90,485	Q 4 50 1	, ² 1 ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
_					1, 5 19 1/2	V _ y	2 3 2 2 3	
С	Net investment earnings, gains, and losses	933		5,248	1 1/2	Section 2	14 M. S. C. 13	r/40 1 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
		333		0		, - 1	17 500 4 3	* * * * * * * * * * * * * * * * * * *
	Grants or scholarships	U		<u> </u>		- 7,3	13 20-35 8-4	1'" E" ''
е	Other expenditures for facilities and programs	(4,000)		(3,000)	gh, s, 'n wa	. x. x	150 m - 1 m m - 2 1 m -	J. W 4 3. 3. 3.
f	Administrative expenses	0		0	表一个 5	1, 145	20 45-18-5 1 1 1 254-4-	小型 性势 12 司
g	End of year balance	365,456	2	269,371			1 4 1	3 18 47 30 25 1
2	Provide the estimated percentage o			d as:				
а	Board designated or quasi-endowm		0 %					
b	Permanent endowment ▶1							
С	Term endowment ► 0 %	•						
3a	Are there endowment funds not in the organization by:	e possession of th	ne organiz	ation tha	t are held ar	nd adn	ninistered for the	Yes No
	(i) unrelated organizations							3a(i) ✓
								3a(ii) ✓
b	If "Yes" to 3a(ii), are the related orga							3b
4	Describe in Part XIV the intended us							<u> </u>
Par	t VI Investments—Land, Bu					art X.	line 10.	
	Description of investment	(a) Cost or ot	her basis	(b) Cos	st or other s (other)	(c)	Accumulated epreciation	(d) Book value
10	Land		0		55,000	~ ,	•	55,000
	Land		0		0 35,000		0	
	Buildings	· ·	. 0		0		0	0
	Leasehold improvements				* †			20.007
a	Equipment	· · 	0		205.606	· · ·	166.639	38,967
Tctc	Other	· ·	0 0-4 X		(0) (10/2	1.1	0	0_
iota	I. Add lines 1a through 1e. (Column (d)	nust equal Form 9	эυ, гап Х,	, coiumn	(D), IINE TU(C,	<i>).)</i>	<u> </u>	93.967

Part VII Investments—Other Securities	See Form 990, Part	X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
Financial derivatives			
Closely-held equity interests	ļ <u> </u>		
Other			
•	<u> </u>		
			
••••••			
			**
Total (Octors Almost and Form 200 Part V and (Filling 10.)			, , , , , , , , , , , , , , , , , , , ,
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments—Program Relate	d Soo Form 900 Port	V line 12	!
Part VIII Investments—Program Relate (a) Description of investment type	(b) Book value		
(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion. ket value
_			
	 		
	 		
·		· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	1	in the second second	: w = 2 :
Part IX Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description		(b) Book value
 .			
·			
•			
· ·			
T-1-1 (0-1 A)	(D) (In a 45)		
Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount	and the second s	
Federal income taxes	(b) runounc		;
			,
			, ,
			ı
		\rightarrow	,
	<u> </u>		;
	-		
			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			, * * •

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Page	4
raye	_

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial St	atements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV.)	8
9	Total adjustments (net). Add lines 4 through 8	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	e per Return
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains on investments	_
b	Donated services and use of facilities	_ .
С	Recoveries of prior year grants	
d	Other (Describe in Part XIV.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	′ 🖫
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	- ¹ . ;
b	Other (Describe in Part XIV.)	Y
C	Add lines 4a and 4b	
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	ses per Return
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	
а	Donated services and use of facilities	<u> </u>
b	Prior year adjustments ,	- (
C	Other losses	<u> </u>
d	Other (Describe in Part XIV.)	المستند ا
е		2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4 ,4
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	* 43
b	Other (Describe in Part XIV.)	-
_C		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Con	rt XIV Supplemental Information supplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a at 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d at part to provide any additional information.	
PA	RT II, Line 3:	
	the 734 conservation easements MLR held at the end of 2009, 7 documents were modified (lo	
	sements held). Five easement modifications (corrections) occurred to correct inadvertent or aphical errors in the original recorded easement document. Two easements were amended t	
in (older easement terms to enable better monitoring of easement terms in the future.	
		•••••

Schedule D (Form 990) 2009 Page 5 Supplemental Information (continued) Part XIV Corrections: 1) Beartooth Ranch -- This 3,351-acre ranch is located in the Stillwater Valley portion of the Greater Yellowstone Ecosystem. This area of Montana is under ever increasing development pressure and visited regularly by the general public recreating in and around Yellowstone National Park. The original Deed of Conservation Easement was recorded on December 24, 2008. A correction to the easement was necessary to reflect the accurate legal description for the subject property - a portion of land was left out of the original deed so more land was in fact protected by the correction. The correction was recorded in the public records of Stillwater County, Montana, on March 13, 2009. 2) Micks Ranches -- This Musselshell Valley property consists of approximately 4,716 acres. The original Deed of Conservation Easement was recorded in the public records of Golden Valley County, Montana, on December 14, 2008. The easement was corrected to expressly limit the transfer of the property to not more than two parcels and clarify that the designated building envelopes must remain intact and can not be partitioned by a transfer of land. The correction was recorded in Golden Valley County, Montana, on April 23, 2009. 3) Gates of the Mountains - This Deed of Conservation Easement, originally recorded in Lewis and Clark County, Montana, on December 4, 2008, protects 85 acres and ensures that opportunities can continue to exist for scenic boat tours and access to stretches of the Missouri River in an area first named by Meriwether Lewis on July 19, 1805. The correction to the deed was recorded on August 4, 2009, and corrected a typographical error in the labeling of the exhibit that reflected the development area (Exhibit F should have been Exhibit E). 4) Ohs Property -- This 1,466-acre property in the Tobacco Root Mountains of Montana was permanently protected on November 21, 2007, by a Deed of Conservation Easement recorded in the public records of Madison County, Montana. A correction to the easement was necessary to reflect the accurate legal description for the subject property - a portion of land was left out of the original deed so more land was in fact protected by the correction. The correction deed was recorded on October 9, 2009.

Correction/Amendment descriptions continue in Schedule O.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information Regarding
Fundraising or Gaming Activities
omplete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if

20**09**

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

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

Open To Public Inspection

Name of the organization Employer identification number THE MONTANA LAND RELIANCE 0369262 81 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations еl Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? LI Yes LI No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (I) Name of individual (v) Amount paid to (or retained by) fundraiser listed in (ii) Activity (iii) Did fundraiser have (vi) Amount paid to (or retained by) (iv) Gross receipts custody or control of from activity or entity (fundraiser) contributions? organization col (I) Yes No Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Pa	rt II	Fundraising Events. Co more than \$15,000 on F					r rep	orted	
			(a) Event #1 Art Auction (event type)	(b) Event #2	(c) Other events	(d) To	otalev i (a) ti coi (c))	hrough	
Revenue	1	Gross receipts	101,965	0	0			101,	,965
ш.	3	Less: Charitable contributions	18,615	0	0			<u>18,</u>	615
	3	minus line 2)	83,350	0	0			83,	<u>,350</u>
	4	Cash prizes	0	0	0				0
	5	Noncash prizes	0	0	0	<u> </u>			0
Ses	6	Rent/facility costs	3,568	0	0	 		3,	<u>,568</u>
Direct Expenses	7	Food and beverages	10,751	0	0			10,	<u>,751</u>
Direct	8	Entertainment	2,966	0	0			2,	,966
	9	Other direct expenses	38,046	0	0	<u> </u>	_		<u>,046</u>
	10 11 irt II		ine line 3, column (d), a the organization ansv	nd line 10	<u> ▶</u>	or rep	ortec	28	331) ,019 re
	<u> </u>	than \$15,000 on Form				T			.1-1
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming			ming (a gh col	
ses	2	Cash prizes							
Direct Expenses	3	Noncash prizes				 			
Direct	4	Rent/facility costs				<u> </u>			
_	5	Other direct expenses .				ļ.,		¥	 ;
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes% ☐ No	, 18, 18 , 19, 19	*****	1 12.	~ ·
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7		<u> </u>			
9		ter the state(s) in which the c	- · · · · · · · · · · · · · · · · · · ·	-				Yes	No
b		the organization licensed to o	operate gaming activitie				<u>9a</u>	,	,
10a		ere any of the organization's					10a		<u> </u>
b) If '	'Yes," explain:				·	ı	,- *	,
11 12		bes the organization operate of the organization a grantor, be			a partnership or other		11	,	
		med to administer charitable					12		

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Page	2 د

			Yes	No
13	Indicate the percentage of gaming activity operated in:			1
а	The organization's facility	'		
b	An outside facility	ł		,1
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	, ,	-	. ;
	Name ▶			,
	Address ▶		•	,
45-	Does the assessment being a contract with a third mark, from whom the assessment recovers assessment	ı	,	,
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:		Q. 7	, -,
	Name ▶	i.		
	Address ▶	<i>3</i>		k) k
16	Gaming manager information:	≱~, -,	**	\$
		, <u>;</u>	· ;,	, , , ;
	Name ▶] , `		
	Gaming manager compensation ▶ \$	1	1 3	- 4
	Description of services provided ▶	-2	\$, · · · ·
		1 1	, , ,	
	□ Director/officer □ Employee □ Independent contractor	, ~į ້,		
17	Mandatory distributions:	1720	4,10	في ترقي
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		مُعْسسةً ،	;' ·
	retain the state gaming license?	17a		
b 	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$, ,	7	
	7			_

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047 Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990.

The Montana Land Reliance 0369262 Part I Types of Property (d)
Method of determining (a) (b) (c) Check if Number of contributions Revenues reported on applicable Form 990, Part VIII, line 1g revenues 1 Art - Works of art Art - Historical treasures 3 Art - Fractional interests Books and publications Clothing and household goods 2 18,425 current blue book value 6 Cars and other vehicles 7 Boats and planes Intellectual property 8 117.081 2 market quotation 9 Securities - Publicly traded . 10 Securities-Closely held stock . 11 Securities - Partnership. LLC. or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution-Historic structures 14 Qualified conservation 19 19 All valued at \$1 contribution-Other . . 15 Real estate-Residential . 16 Real estate-Commercial . . 1 55,000 appraisal 17 Real estate-Other . . . 18 Collectibles Food inventory 19 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts 23 Scientific specimens Archeological artifacts . . . 24 Other ▶ (mileage) 1 385 federal mileage rate 25 2 349 invoice from vendor 26 Other > (gift baskets, etc.) 590 2 invoice from vendor 27 Other ▶ (.entertainment...) 28 Other ▶ (.....) Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a b If "Yes." describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II. If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule M (Schedule M (Form 990) 2009 Page 2				
Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.				
	•••••••••••••••••••••••••••••••••••••••				
•••••					

SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

THE MONTANA LAND RELIANCE 81 0369262 PART III, line 4a (Specific expenditures related to new land projects): General planning/preliminary discussion - 237,604; Jones (Tom) - 1,616; Uihlien - 175; Jarrett - 112,530; Shaw - 28; Hohenlohe II - 396; Sterling Ranch - 107; Swindelhurst - 26; AA Ranch II - 485; N Bar Ranch - 2,625; Dearborn Ranch - 2,393; Hirst - 1,339; Aspen Ridge Ranch - 803; Williams (Bill) II - 952; Pribyl Ranch - 10,479; Zoellner (Robert) II - 449; Double NN -1,304; Oswood - 910; Cooperman (David) - 1,222; Taylor Land & Livestock - 36; Platt - 2,632; Box Elder Ranch - 575; Lee - 904; Kauffman - 1,744; Hunt - 55; Lake (Al) - 1,138; Crumley - 1,533; Beebe - 4,960; Clow - 1,638; Knutson - 1,188; Hicks (Robert) - 1,533; Schutz II - 2,819; Crazy Woman Bison Ranch - 244; Spanish Q Ranch - 2,851; Spear Ranch - 750; Beck (Ray) - 538; Beattie III - 340; Bezruchka/Mercer - 1,095; Dry Creek Partners - 306; Moksnes - 1,089; Donics - 1,097; Quinn - 685; Lazy Daisy Ranch - 311; Wilson - 1,520; Hutchins IV - 446; Nevada Spring Creek - 1,579; JO Miller - 816; James - 1,370; Double D Ranch - 122; Uncollectible project accounts from previous year - 41,095 PART VI, Section B, line 11a: MLR's annual Form 990 is first drafted by staff and reviewed with the independent auditors through the audit process. The completed form may be distributed to the Financial Committee for review and comment. Or, time permitting, the completed 990 form is sent to the full Board of Directors for review and comment prior to submittal. PART VI, Section B, line 12c: MLR's conflict of interest policy covers all employees, board members, member of board committees, major donors, and individuals such as independent contractors or former employees who might have access to inside information (conflicted parties) and references conflicted parties' spouse, domestic partner, parents, grandparents, children, grandchildren, siblings, or business entities (related parties). Conflicted parties must disclose the material facts of the transaction and his/her interest to the full board/staff prior to any discussion, and shall not vote on or be present for the discussion of an issue. Potential conflicts of interest are documented in the board minutes and discussed with legal counsel. A board transaction with a conflicted party is authorized, approved, or ratified if it receives the affirmative vote of a majority of the directors who have no direct or indirect interest in the transaction. Each director

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Page	7

Name of the organization	Employer identification number
THE MONTANA LAND RELIANCE	81 : 0369262
PART VI, Section B, line 12c (continued):	
and employee signs a statement which affirms he/she has received,	read, understands, and agrees to comply in all
respects with MLR's conflict of interest policy.	
PART VI, Section B, line 15b:	
The salaries of all MLR employees are determined by the Board folio	wing the recommendations of the Board's
Compensation and Evaluation Committee based upon their review of	salary/benefit surveys conducted on other
conservation organizations across the country. These surveys are c	
by TREC (a nationally known survey organization). MLR staff may al	so be given cost-of-living increases that are
based on the Social Security Administration's cost-of-living calculat	ons. The Compensation and Evaluation Committee
has the authority to revise proposed salaries if they determine that is	necessary. The annual salary packages (along
with a recommendation from the Compensation and Evaluation Com	mittee) are presented to the full Board for final
•••••	
approval each year.	
PART VI, Section C, line 19:	
MLR provides its governing documents, conflict of interest policy, a	nd audited financial statements to the general public
upon request.	
PART VII, Section A:	
MLR did not compensate any officer, director, trustee, or key employed	ree. No member of MLR's Management Team (three
managing directors, the operations manager, and the lands manage	r) was compensated more than \$85,000 in 2009.
These five individual staff members are responsible for the overall n	nanagement of the organization's day-to-day
activities.	
abilities.	

THE MONTANA LAND RELIANCE

Employer Identification Number 81: 0369262

SCHEDULE D, Part II, line 3 (continued from Part XIV of Schedule D):

5) Williams (Gerald) Property – This conservation easement protects 482 acres in the Yellowstone Valley and was recorded in the public records of Yellowstone County on December 29, 1997. The correction was necessary to correct a mutually mistaken legal description of a certain parcel of land recognized in the Final Decree, dated 10-20-09, entered in Cause No. DV-08-0647, by the Montana Thirteenth Judicial Court, Yellowstone County. The correction was in compliance with the final decree and recorded on November 12, 2009.

Amendments:

- 1) Smith (Jane) Property This is a 17-acre property lying within the Flathead Valley. At the time this easement was originally donated (recorded on November 9, 1999, in the public records of Flathead County, Montana) one new residence was permitted on the property. The landowner wished to amend the easement to clearly delineate the specific location for the construction of the permitted residence via an exhibit attached to the document. The amendment (delineated the specific site for construction via an attached exhibit) was recorded in the Flathead County public records on September 8, 2009.
- 2) Anderson (David) Property The easement on this 591-acre property in the Little Belt Mountains was originally recorded on August 10,

 1995, in the public records of Cascade County, Montana An amendment of the easement was necessary to acknowledge a structure

 referred to by the Grantor as the "granary" that was on the property at the time of the easement donation. Grantee mistakenly did not realize that the granary had (prior to the donation of the easement) been converted from its original agricultural use to a primitive bunkhouse/cabin.

 Grantor and Grantee desired to amend the easement to acknowledge the function and use of this structure at the time of the execution of the easement and to put limits on its future use and development. The correction was recorded on March 30,2009

SCHEDULE D -- Part II, Line 9

Conservation easements are recorded by MLR as in-kind donations with a value of \$1. By a resolution of the Board of Directors, MLR values all conservation easements held at a nominal amount of \$1 due to the fact that said easements cannot be sold, transferred, or borrowed against. Expenses incurred in "bargain" purchases of easements and other in-house expenses related to completion of conservation easements are expensed out in the year of the purchase and/or donation. The following is the text of the footnote used in MLR's annual audited financial statements. "MLR has acquired conservation easements from various contributors. Conservation easements represent rights to restrict use of certain properties. By accepting the easement contribution, MLR commits to protecting the easement restrictions in perpetuity. The easements have no market value in the hands of MLR. MLR can assign the easements only to another qualified conservation organization. Accordingly, they are represented in the financial statements at a nominal value of one dollar per easement.

Purchased easements are expensed."

Schedule O (Form 990) 2008	Page 4
Name of the organization THE MONTANA LAND RELIANCE	Employer Identification Number 81: 0369262
SCHEDULE D Part V, Line 4	
1) Conservation Fund - A permanent, irrevocable endowment fund which provides an independent ba	ase of financial stability and source of
revenue for 1) outreach to landowners for land conservation work, and 2) research, public outreach, an	d education on private land
conservation and the specific work of MLR Corpus cannot be used, interest, dividend income, and reali	zed capital gains may be used for
direct costs of designated activities	
2) Traditions Fund - A permanent, irrevocable endowment which provides a steady source of revenue	e for 1) bridge
capital for property acquisitions, 2) option purchases for all or a portion of threatened properties to be re-	sold to a conservation
buyer, and 3) conservation easement purchases. Corpus cannot be used, interest, dividend income, and	d realized capital gains may be used
for 1) fee purchase of property to be resold by MLR, 2) with other monies for fee purchase of property t	o be resold, 3) to purchase
conservation easements, 4) to acquire options to purchase property, 5) as a loan to other entities exclus	ively for the purchase of property
to be conserved (loan secured by an equity interest in the property), or 6) to insure the long-term steward	dship and monitoring of easements
acquired with funds from other investments	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

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

lo. 1545-0047	
OMB No.	9

Open to Public Inspection

Employer identification number

(f)
Direct controlling
entity (f) Direct controlling 0369262 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it ۲ ٨ Public chanty status (if section 501(c)(3)) **∞** (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section 509(a)(3) Type 1 (d) Total income (c)
Legal domicile (state
or foreign country) Legal domicile (state or foreign country) 0 Montana support organization Primary activity Primary activity had one or more related tax-exempt organizations during the tax year.) Ruby Habitat Foundation, PO Box 638, Sheridan, MT 59749 EIN # 45-0487621 (a)
Name, address, and EIN of related organization (a)Name, address, and EIN of disregarded entity The Montana Land Reliance

Part II

Schedule R (Form 990) 2009

managing partner? Yes No Percentage ownership General or 8 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, Ξ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Disproportionate allocations? ŝ Ξ Yes Share of total income (g) Share of end-of-year line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) assets Type of entity (C corp. S corp. or trust) because it had one or more related organizations treated as a partnership during the tax year.) Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) (d) (d) (Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Name, address, and EIN of related organization Primary activity Name, address, and EIN of related organization Part IV Part III

, 35, or 36.)
34, 35, or 3
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Form 990
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Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II—IV?	n Parts II–IV?	Yes No
		- 1a
C Gift grant or capital contribution from other organization(s)		1c /
d Loans or loan quarantees to or for other organization(s)		/ bt
		1e /
		THE WAS THE WAY
f Sale of assets to other organization(s)		>
g Purchase of assets from other organization(s)		, BL
h Exchange of assets		\ \ \ !
I Lease of facilities, equipment, or other assets to other organization(s)		\perp
		The state of the s
J Lease of facilities, equipment, or other assets from other organization(s)		<u> </u>
k Performance of services or membership or fundraising solicitations for other organization(s)		× -
I Performance of services or membership or fundraising solicitations by other organization(s)		> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		E ct
n Sharing of paid employees) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
		10
o helimbursement paid to outer organization for expenses		- 10 ->
p neimbalsement para by omer organization expenses	•	7. 4 1. 4 1. 4 1. 4 1. 4 1. 4 1. 4 1. 4 1
q Other transfer of cash or property to other organization(s)		19
r Other transfer of cash or property from other organization(s)	elationships and trans	saction thresholds.
П		***
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount Involved
(1)		
(2)		
(3)		
(4)		
(9)		
	Schedu	Schedule R (Form 990) 2009

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

or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	tructions regarding exc	lusion for certain in	estmer	t partne	erships.	,		L	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3)	urtners on (3)	(e) Share of end-of-year assets	(f) Disproportionate allocations?	(9) Code V—UBI amount in box 20 of Schedule K-1	na mar	(n) General or managing partner?
			Yes	9 9	;	Yes No		Yes	2
								_	
						_			
				-					
					=		Schedule R (Form 990) 2009	100 m	0) 2009

Form 8868

(Rev April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part Do not complete Part II unless you have already been granted an automatic 3-month extension 	II (on page 2 of this form)
Part I Automatic 3-Month Extension of Time. Only submit original (no copies r	needed)
A corporation required to file Form 990-T and requesting an automatic 6-month extension—che Part I only	ck this box and complete
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Forntime to file income tax returns	n 7004 to request an extension of
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-mont of the returns noted below (6 months for a corporation required to file Form 990-T). However, you electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form returns, or a composite or consolidated Form 990-T Instead, you must submit the fully complete Form 8868. For more details on the electronic filing of this form, visit www irs gov/efile and click	ou cannot file Form 8868 ms 990-BL, 6069, or 8870, group ed and signed page 2 (Part II) of
Type or Name of Exempt Organization	Employer identification number
print MONTANA LAND RELIANCE	81-0369262
File by the due date for P O BOX 355	
filing your City town or good office, state, and ZID code. For a foreign address, and matrix states	
return See Instructions HELENA	MT 59624
Check type of return to be filed (file a separate application for each return):	
X Form 990 Form 990-T (corporation)	Form 4720
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust)	Form 5227
Form 990-EZ Form 990-T (trust other than above)	Form 6069
Form 990-PF Form 1041-A	Form 8870
	Form 6870
The books are in the care of	EN) If this
list with the names and EINs of all members the extension will cover.	
I request an automatic 3-month (6 months for a corporation required to file Form 990-T) e until 8/15/2010 , to file the exempt organization return for the organization's return for: ► X calendar year or ► tax year beginning , and ending	zation named above The extension
2 If this tax year is for less than 12 months, checkgeason It Initial return Final re	
3 a If this application is for Form 990-BL, 990-T, 4720, of 6069, enter the tentative to	1 1 -
less any nonrefundable credits. See instructions.	3a \$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimate	u tax
payments made. Include any prior year overpayment allowed as a credit. V c Balance Due. Subtract line 3b from line 3a finding your payment with this form, or, if rec	3b \$
deposit with ETD coupon or if required housing FETPS Flectionic Federal Tay Paymen	nt
deposit with FTD coupon or, if required by using EFTRS (Electronic Federal Tax Paymer System). See instructions.	3c \$ 0
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form	· · · · · · · · · · · · · · · · · · ·
for payment instructions.	<u> </u>

	Only o	complete Part II if you have already been granted an automatic 3-month extension on a previous	iously filed For	m 8868.		
	you are	filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
اف	art II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).					
гуре	e or	Name of Exempt Organization	mployer identif	ication number		
print		MONTANA LAND RELIANCE 81	1-0369262			
File by	the		or IRS use only			
extende due da		P O BOX 355				
filing th	ne l	City, town or post office, state, and ZIP code. For a foreign address, see instructions	2 .	ε.		
return instruc	See tions	HELENA, MT 59624				
		of return to be filed (File a separate application for each return):				
_	Form 99		Form	6069		
=	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720 Form 8870					
	Form 99	90-EZ Form 990-T (trust other than above) Form 5227				
STO	P! Do no	t complete Part II if you were not already granted an automatic 3-month extension on a previousl	ly filed Form 88	68.		
• T	he book	s are in the care of MONTANA LAND RELIANCE				
Т	elephor	ne No. ► (406) 443-7027 FAX No.►				
• If	the org	anization does not have an office or place of business in the United States, check this box .		▶□		
• If	this is f	or a Group Return, enter the organization's four digit Group Exemption Number (GEN)		. If this is		
		e group, check this box				
		names and EINs of all members the extension is for.				
4	I requ	est an additional 3-month extension of time until 11/15/2010	•			
5	For ca	alendar year , or other tax year beginning , and endi	ing			
6		tax year is for less than 12 months, check reason: Initial return Final return C				
7		in detail why you need the extension ADDITIONAL TIME IS NEEDED TO ACCUMULATE A				
		JIRED TO PREPARE A COMPLETE AND ACCURATE RETURN.				
8 a	If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,				
	less a	iny nonrefundable credits. See instructions	8a	\$		
b	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
	estim	ated tax payments made. Include any prior year overpayment allowed as a credit and any	\$			
	amou	nt paid previously with Form 8868.	8b	\$		
C	Balan	ce Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with				
	FTD c	oupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$ 0		
		Signature and Verification				
Unde	r penalties	of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best	of my knowledge a	nd belief,		
ıt ıs tr	ue, correc	t, and complete, and that arm authorized to prepare this form				
				-1-1-		

Signature > Sec. Treas

Date ► 8 12 10

Form **8868** (Rev 4-2009)

INTERNAL REVENUE SERVICE RECEIVED

AUG 1 2 2010

Wage & Investmen: Helena, MT 59626