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Form **990**

932001 02-04-10

Department of the Treasury

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)

2009

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

Open to Public Inspection

			<u> </u>					
AF	or the		nding					
B (heck if ipplicable	use IRS		D Employer identification number				
	Addres change	print or Chelan-Douglas Land Trust						
	Name change	Doing Business As		91-13	331348			
	Initial return		Room/suite	E Telephone number				
	Termin ated	Instruc-		509-6	<u> 667-9708</u>			
<u>L</u>	Amend return	City or town, state or country, and ZIP + 4		G Gross receipts \$ 642,849.				
L.	Application pendin	Wellattiee, WA 30001		H(a) is this a group re-				
	portuni	F Name and address of principal officer: KODETC BUGETC		for affiliates?	Yes X No			
		same as C above		H(b) Are all affiliates incl				
		mpt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		· ·	list. (see instructions)			
		e: > www.cdlandtrust.org		H(c) Group exemption				
		organization: X Corporation Trust Association Other	L_Year o	of formation: 1985 M	State of legal domicile: WA			
P	art I	Summary		1 a a d a a a				
⊉ 8		Briefly describe the organization's mission or most significant activities: To aq	uire	rand and eas	sements for			
© & £01⊎ Governance		conservation purposes.		Ab 0500 - 6 AA				
φ.	1	Check this box if the organization discontinued its operations or dispose	ea or more	f 1				
∌ģ	1	Number of voting members of the governing body (Part VI, line 1a)		3	16 16			
ু পুর	1	Number of independent voting members of the governing body (Part VI, line 1b)		. 4				
Activities &		Total number of employees (Part V, line 2a)		5	250			
. :	1 -	Total number of volunteers (estimate if necessary)		6	250			
¥	,	Total gross unrelated business revenue from Part Mili, column (6), line 12 Net unrelated business taxable income from Form 990-T, IneE4C E IVFD	7	7a 7b	0.			
-			+	Prior Year	Current Year			
Revenue	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	}/ ├	5,769,357.	438,384.			
	ì	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	ó† ├─	3,103,331.	430,304.			
Z is	i	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	!I · ├─	213,174.	<85,502·>			
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 Cand [FIA]	1 -	10,140.	1,447.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	j. -	5,992,671.	354,329.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,332,071.	334,323.			
		Benefits paid to or for members (Part IX, column (A), line 4)						
Ø	1	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		258,167.	359,711.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	-	200720,1				
8	b	Total fundraising expenses (Part IX, column (D), line 25) 51, 94	12.					
ă	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		258,916.	263,226.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		517,083.	622,937.			
	19	Revenue less expenses. Subtract line 18 from line 12		5,475,588.	<268,608.>			
Net Assets or Fund Balances			Bes	inning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)		13,098,558.	13,512,805.			
SE SE	21	Total liabilities (Part X, line 26)		26,656.	23,209.			
誓	22	Net assets or fund balances. Subtract line-21 from line-20		13,071,902.	13,489,596.			
P	art II	Signature Block						
		Under penalties of perury, I declare that I have examined this return, including accompanying schedules and and complete Declaration of preparer (other than officer) proases on till information of which preparer has an	i statements, a	ind to the best of my knowledg	e and belief, it is true, correct,			
			.,ou.ougo	/-	,			
Sig	n	1,000		6/24	1/2010			
He	re	Signature of officer		Date				
		Robert Bugert, Executive Director						
		Type or print name and title		····				
Pai	d	Preparer's Date Date			r's identifying number tructions)			
_	parer's	signature truspon CPA 1/18/2	O/U em	ployed >				
	Only	Firm's name (or yours if Cordell, Neher & Company, P.L.L.	C.	EIN ►				
self-employed, address, and address, and								
		Wenatchee, WA 98807-3068		Phone no.				
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

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

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Form **990** (2009)

	10 (2009) Chelan-Douglas Land Trust 91-133 Till Statement of Program Service Accomplishments	1348 Page 2						
1	Briefly describe the organization's mission:	1						
	Conserving our land, our water, and our way of life through vo	untary						
	land agreements, education, partnerships, stewardship, and wel							
	planned growth.							
2	Did the organization undertake any significant program services during the year which were not listed on							
	the prior Form 990 or 990-EZ?	Yes X No						
	If "Yes," describe these new services on Schedule O.							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No						
	If "Yes," describe these changes on Schedule O							
4	Describe the 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 \$ 429,593 · including grants of \$) (Revenue \$)						
	To aquire land and easements for conservation purposes.							
								
		 _						
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)						
		•						
								
 4c	(Code) (Expenses \$ including grants of \$) (Revenue \$							
70	(Code / (Expenses & Including grants of &) (Nevende \$,						
		··						
								
		·						
4d	Other program services. (Describe in Schedule O)							
	(Expenses \$ including grants of \$) (Revenue \$)							
<u>4e</u>	Total program service expenses ▶\$ 429,593.							

Form 990 (2009) Chelan-Douglas Land Trust
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		l	•
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	<u></u>	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		ļ	
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	<u> </u>	
6	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	L	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	i		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		1	
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide		}	}
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	<u> </u>	X
10	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	X	L
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		ł	<u> </u>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	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.		[
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			ļ
•	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.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			Į
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		<u> </u>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			Í
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_	 	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,
	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	,.
	complete Schedule G, Part III	19		X
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	X
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Form 990 (2009) Chelan-Douglas Land Trust
Part 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		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			ļ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		ĺ
	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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
25a	Section 501(c)(3) 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		<u> </u>
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	i '		
	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		X
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		X
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	<u> </u>	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			ļ
	instructions for applicable filing thresholds, conditions, and exceptions):	· '		Í
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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	X	<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			l
	If "Yes," complete Schedule N, Part I	31		X
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_		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		l	٠,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33_		X
34	Was the organization related to any tax-exempt or taxable entity?		Ì	۱
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	ļ	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			ļ
	If "Yes," complete Schedule R, Part V, line 2	35_	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?	l	1	
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			.,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	├─	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		,,	l
	Note. All Form 990 filers are required to complete Schedule O.	38	X	
		Form	990 (200

Form 990 (2009) Chelan-Douglas Land Trust
Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	ŀ		
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1	<u> </u>	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country: ►		}	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	<u>5c</u>	<u> </u>	ļ
ва	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	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	١		
_	were not tax deductible?	6b	 	_
7	Organizations that may receive deductible contributions under section 170(c).			
а	• • • • • • • • • • • • • • • • • • • •			x
_	provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b	 	-
C	to file Form 8282?	7c		x
a	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		-
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
0	benefit contract?	7e		X_
•	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
'	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
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		1	ļ
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	ĺ	j
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	j	ĺ	ľ
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:			
а	Gross income from members or shareholders	1	}	l
b	Gross income from other sources (Do not net amounts due or paid to other sources against			Ì
	amounts due or received from them.)	1		ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>		L
		Form	990	(2009)

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

Sec	tion A. Governing Body and Management						
			1			Yes	<u>No</u>
1a	Enter the number of voting members of the governing body	1a	 	16	7	•	
b	Enter the number of voting members that are independent	1b	<u></u>	16	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other				
	officer, director, trustee, or key employee?				2_		<u> </u>
3	Did the organization delegate control over management duties customanly performed by or under the	ne dire	ct supervis	sion			
	of officers, directors or trustees, or key employees to a management company or other person?				3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed	1?	4_		X
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?			5_		<u> X</u>
6	Does the organization have members or stockholders?				6_	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the				
	governing body?		••		7a_	X	<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe	rsons'	? .		7b_	<u> </u>	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year				
	by the following:					}	
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?		•		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ached	at the		1		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9	نـــــا	X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal F	levenu	e Code.)				
						Yes	No
10a	Does the organization have local chapters, branches, or affiliates?				10a		<u> </u>
þ	If "Yes," does the organization have written policies and procedures governing the activities of such	chap	ters, affiliat	ies,			
	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 f	filing th	ne form?		11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	2a Does the organization have a written conflict of interest policy? If "No," go to line 13					X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld giv	e rise				
	to conflicts?				12b		<u> </u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	descnbe				
	in Schedule O how this is done			•	12c	X	
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by i	ndepende	nt			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	>			ľ		
а	The organization's CEO, Executive Director, or top management official				15a	X	
þ	Other officers or key employees of the organization				15b		_X_
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a		[
	taxable entity duning the year?				16a	L	_X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its particip	ation		}	
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	janizat	ion's				
	exempt status with respect to such arrangements?				16b		L
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ►WA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s only	/) available	for		
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website X Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interes	it policy, ar	nd fina	incial	
	statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd red	ords of th	e organiza	tion: 🕨		
	<u>Sharon_Lunz - 509-667-9708</u>						
	P.O. Box 4461, Wenatchee, WA 98807					_	

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.

Average hours per week 10.00 5.00	X Individual trustee or director	institutional trustee	Posi all t	hat	app		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
10.00 5.00	x		Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the organization and related
5.00	X			l					
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E 00	v						Λ .	0	_0.
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2 00	v						n !	n	0.
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5.00	v						n l		0.
3.00	*		Н						
2.00	x						0.1	0.1	0.
	-				Н				<u></u>
2.00	x						0.	0.	0.
	-					_			<u></u>
5.00	X	}					0.	0.	0.
								-	
40.00			x				76,329.	0.	5,276.
32.00	L	<u> </u>	X				49,600.	0.	5,276.
	10.00 10.00 2.00 2.00 5.00 2.00 2.00 40.00	5.00 x 40.00	10.00 X 10.00 X 2.00 X 2.00 X 5.00 X 2.00 X 2.00 X 5.00 X 2.00 X 40.00	10.00 x 10.00 x 2.00 x 2.00 x 2.00 x 5.00 x 2.00 x 2.00 x 40.00 x	10.00 X 10.00 X 2.00 X 2.00 X 2.00 X 5.00 X 2.00 X 2.00 X 2.00 X 40.00 X	10.00 X 10.00 X 2.00 X 2.00 X 2.00 X 5.00 X 2.00 X 2.00 X 5.00 X 40.00 X	10.00 X 10.00 X 2.00 X 2.00 X 2.00 X 5.00 X 2.00 X 2.00 X 5.00 X 40.00 X	10.00 x 0. 10.00 x 0. 2.00 x 0. 2.00 x 0. 2.00 x 0. 5.00 x 0. 2.00 x 0. 5.00 x 0. 5.00 x 0. 5.00 x 0. 6.00 x 0. 76,329.	10.00 x 0. 0. 0. 10.00 x 0. 0. 0. 2.00 x 0. 0. 0. 2.00 x 0. 0. 0. 5.00 x 0. 0. 0. 2.00 x 0. 0. 0. 40.00 x 0. 0. 0.

Page 8

. 41	Section A. Unicers, Directors, Iru	istees, Ney Ci	npic	yee	5, a	nu r	ngn	est	Compensated Employ	ees (commueu)				
	(A)	(B)	(C)						(D)	(E)			(F)	
	Name and title	Average			Posi				Reportable	Reportable		Es	timate	∍d
		hours	(cl	neck	all t	that	app	ly)_	compensation	compensation			nount	of
		per	喜						from	from related			other	
		week	ndividual trustee or director				ם		the organization	organizations (W-2/1099-MIS			pensa om th	
		ļ	Stee	nste		_	en Sa		(W-2/1099-MISC)	(***2) 1099-14110	٦, ا	organization		
			ad tru	institutional trustee		Key employee	Highest compensated employee		(** *******************************		1	_	d relat	
			P P	agg.	Officer	y CH	plest	E				orga	anızatı	ons
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15	Total	<u> </u>	L	L		1			125,929.		0.	1	0,5	52
2	Total number of individuals (including but r	not limited to the	1058	liste	ad al	bov	e) w	20 r					<u>0 1 2</u>	<u> </u>
_	compensation from the organization						•,			.,				0
			•										Yes	No
3	Did the organization list any former officer,	director or tru	stee	, ke	y en	nplo	yee,	or h	nighest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for s	such individual									.	3		X
4	For any individual listed on line 1a, is the si	um of reportab	le c	omp	ensa	atioi	n and	d otl	her compensation from	the organization				
	and related organizations greater than \$15	0,000? If "Yes	, " co	mpl	ete S	Sch	edul	ə J f	for such individual		.	4	<u> </u>	X
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion 1	from	an	y uni	elat	ted organization for serv	rices rendered to				
	the organization? If "Yes," complete Sched	lule J for such	pers	on								5	Ĺ	X
Sec	tion B. Independent Contractors								·					
1	Complete this table for your five highest co	mpensated in	qeb	ende	nt c	ont	racto	ors t	that received more than	\$100,000 of com	pens	ation	from	
	the organization. NONE							r						
	(A)							-	(B)		_	()	C)	
	Name and business	address							Description of	services		ompe	nsatio	on
										j				
		 -												
								-						
										1				
		<u> </u>												
										-				
2	Total number of independent contractors (including but	not l	mite	d to	the	se li	ster	d above) who received r	nore than				
-	\$100,000 in compensation from the organi	_			0		n 0							

	990 (2009) Chelan-Do	uglas Land T	rust		91-1331	348 Page 9
Pa	rt VIII	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ce Contributions, gifts, grants and other similar amounts	b c d e f	similar amounts not included above Noncash contributions included in lines 1a-1f \$	1a 1b 43,366. 1c 1d 1e 1f 395,018. 22,464. Business Code	438,384.			
Program Service Revenue	b c d e f						
	3 4 5	Investment income (including dividend other similar amounts) Income from investment of tax-exemp Royalties	ds, interest, and	66,798.			66,798.
	6 a b c d	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	>				
	b	assets other than inventory Less: cost or other basis and sales expenses 277	137.				
Other Revenue		Net gain or (loss) Gross income from fundraising events including \$ contributions reported on line 1c). See Part IV, line 18	a 12,830.	<152,300.	>		<152300.
Other	9 a b	Less: direct expenses Net income or (loss) from fundraising Gross income from gaming activities. Part IV, line 19 Less: direct expenses	See a	1,447.			1,447.
	10 a	Net income or (loss) from gaming active Gross sales of inventory, less returns and allowances Less: cost of goods sold Net income or (loss) from sales of inventory and sales of inve	a b				
	· -		1				
	12	Total revenue. See instructions.		354.329	0.	Λ	<84.055

Part IX Statement of Functional Expenses

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

	ازد)(ع): Section عربارد)(ع) All other organizations must compl	and 501(c)(4) organizat ete column (A) but are			(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				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			25.262	05 045
	trustees, and key employees	136,481.	75,576.	35,060.	25,845.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ļ			
	persons described in section 4958(c)(3)(B)	400 540	121 266	26 684	14 553
7	Other salaries and wages	182,513.	131,266.	36,674.	14,573.
8	Pension plan contributions (include section 401(k)	4 440	1 026	200	145
_	and section 403(b) employer contributions)	1,440.	1,036.	289.	115.
9	Other employee benefits	13,301.	9,566.	2,673.	1,062.
10	Payroll taxes	25,976.	18,682.	5,220.	2,074.
11	Fees for services (non-employees):	5,865.	E 06E		
a	Management	30,889.	5,865. 30,889.		
b	Legal	19,153.	13,775.	3,849.	1,529.
<u>د</u>	Accounting	19,133.	13,113.	3,043.	1,343.
d	Lobbying Professional fundraising services. See Part IV, line 17			 -	
•	Investment management fees	33,692.		33,692.	
f g	· · · · · · · · · · · · · · · · · ·	28,015.	25,113.	2,450.	452.
12	Advertising and promotion	20,013.	23,113.	2,300	1321
13	Office expenses	27,341.	19,664.	5,494.	2,183.
14	Information technology	2,162.	1,555.	434.	173.
15	Royalties		= 70001		<u> </u>
16	Occupancy	7,341.	5,280.	1,475.	586.
17	Travel	7,674.	5,519.	1,542.	613.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,897.	3,522.	984.	391.
20	Interest				
21	Payments to affiliates [
22	Depreciation, depletion, and amortization	9,986.	7,182.	2,007.	797.
23	Insurance	8,024.	500.	7,524.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Habitat Improvement and	28,035.	28,035.		
b	Education and outreach	20,077.	20,077.		
С	Property taxes	14,621.	14,621.		
d	Special event expense	1,806.	1,806.		
е					
f	All other expenses	13,648.	10,064.	2,035.	1,549.
25	Total functional expenses. Add lines 1 through 24f	622,937.	429,593.	141,402.	51,942.
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			<u> </u>	

Part X **Balance Sheet** (A) Beginning of year End of year 237,664 165,363. Cash - non-interest-bearing 1 165,684. <u>99,667.</u> 2 2 Savings and temporary cash investments 179,346. <u>464,796.</u> 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 6 7 Notes and loans receivable, net Inventories for sale or use 8 2,262. 2,262. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 52,627 basis. Complete Part VI of Schedule D 10a 10b 29,898. 31,286. 10c 22,729. b Less accumulated depreciation Investments - publicly traded securities 11 11 2,793,637. 1,947,065. Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 10,249,801. 10,249,801. Other assets. See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 13,098,558. 16 13,512,805. 16 26,656. 23,209. 17 Accounts payable and accrued expenses 17 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities. Complete Part X of Schedule D 25 26,656 209 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 0. 31 0. 13,071,902. 13,489,596. 32 Retained earnings, endowment, accumulated income, or other funds 32 13,071,902. 13,489,596. Total net assets or fund balances 33 33 13,098,558. 13,512,805. Total liabilities and net assets/fund balances

Form **990** (2009)

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b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

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X

Act and OMB Circular A-133?

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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 91-1331348 Chelan-Douglas Land Trust Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 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 5 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3), Check the box that describes the type of supporting organization and complete lines 11e through 11h. c ___ Type III - Functionally integrated b Type II 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). 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of (iv) is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organizátion in col. in col. (i) listed in your organization in col. organization (i) organized in the support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009		Described to	Co. Alica - 500/ 1	\ <u>(0)</u>		Page 3
Part III Support Schedule for O Section A. Public Support	rganizations	Described in	Section 509(a)	(Complete only	y if you checked the bo	ox on line 9 of Part I
alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and	1-1					
membership fees received. (Do not				Į		
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that	ļ					
are not an unrelated trade or bus-	ļ			ļ		
iness under section 513				<u> </u>		
4 Tax revenues levied for the organ-		,		ļ		
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities]		
furnished by a governmental unit to				ļ		
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons					<u> </u>	
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b		<u> </u>				
8 Public support (Subtract line 7c from line 6)		<u> </u>	L	<u> </u>	<u> </u>	L
Section B. Total Support		 _		T	,	
alendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6					ļ	ļ
Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income				Ì		
(less section 511 taxes) from businesses				ŀ		
acquired after June 30, 1975		Ĺ		<u> </u>		
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				}		
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thu	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here	· .·_				·	▶□
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2009 (li	ne 8, column (f) d	ivided by line 13,	column (f))		15	9
16 Public support percentage from 2008	Schedule A, Part	III, line 15	<u>.</u>		16	9
section D. Computation of Inves	tment incom	e Percentage				
17 Investment income percentage for 20	09 (line 10c, colur	nn (f) divided by li	ne 13, column (f))		17	9
18 Investment income percentage from 2	2008 Schedule A,	Part III, line 17			18	9
9a 33 1/3% support tests - 2009. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
19a 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box ar						17 is

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

2009
Open to Public Inspection

Name of the organization

Chelan-Douglas Land Trust

Employer identification number

91-1331348

Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the								
	organization answered "Yes" to Form 990, Part IV, line								
		(a) Donor advised funds	(b) Fur	nds 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	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds						
	are the organization's property, subject to the organization's			Yes No					
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only						
	for charitable purposes and not for the benefit of the donor of								
	Impermissible private benefit?			. Yes No					
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7						
1	Purpose(s) of conservation easements held by the organizat	on (check all that apply)							
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an h	istorically imp	ortant land area					
	X Protection of natural habitat	Preservation of a ce	rtified historic	structure					
	X Preservation of open space								
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a conserv	ation easement on the last					
	day of the tax year.								
	•			Held at the End of the Tax Year					
а	Total number of conservation easements		2a	7					
b	Total acreage restricted by conservation easements		2b	2,178.00					
C	Number of conservation easements on a certified historic str	ucture included in (a)	2c	0					
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d	0					
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organizatio	n during the tax					
	year ▶0		-	-					
4	Number of states where property subject to conservation ea	sement is located >1	_						
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	f						
	violations, and enforcement of the conservation easements	t holds?		X Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the yea						
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ►	\$ 7,578.					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)						
	and section 170(h)(4)(B)(ii)?			X Yes No					
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	se statement,	and balance sheet, and					
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describe	s the organiza	tion's accounting for					
	conservation easements.		_ <u></u>						
Pa	t III Organizations Maintaining Collections o	•	Other Simi	lar Assets.					
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.							
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet	t works of art, historical					
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service,	provide, in Part XIV, the text of					
	the footnote to its financial statements that describes these	items.							
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	ince sheet wo	rks of art, historical treasures,					
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	ce, provide the	e following amounts relating to					
	these items:								
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$					
	(ii) Assets included in Form 990, Part X		•	\$					
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ							
	the following amounts required to be reported under SFAS 1	16 relating to these items:							
а	Revenues included in Form 990, Part VIII, line 1	•	▶	\$					
b	Assets included in Form 990, Part X		•	\$ \$					

		Douglas La					13313		
Par	t III Organizations Maintaining C								
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that	t are a sign	ficant use o	f its collect	ion item	18
	(check all that apply):								
а	·								
þ	Scholarly research e Other								
C	Preservation for future generations								
4	Provide a description of the organization's co						Part XIV.		
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or othe	er sımılar a:	ssets		_	_
	to be sold to raise funds rather than to be ma						Yes Yes		No
Par	t IV Escrow and Custodial Arran		ete if organization a	nswered "Yes	to Form	990, Part IV,	line 9, or		
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	ns or other as:	sets not in	cluded	_		_
	on Form 990, Part X?						Yes	L	_ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:						
							Amoi	unt	
C	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				Yes	<u> </u>	J No
	If "Yes," explain the arrangement in Part XIV.								
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part	IV, line 10.				
		(a) Current year	(b) Prior year	(c) Two year	s back (d)	Three years I	oack (e) F	our years	back
1a	Beginning of year balance	1731797.	1803662.						
þ	Contributions	266,037.	532,034.						
C	Net investment earnings, gains, and losses	550,333.	< 574,719 .	<u> </u>					
d	Grants or scholarships								
0	Other expenditures for facilities								
	and programs								
f	Administrative expenses	30,987.	29,180.						
g	End of year balance	2517180.	1731797.						
2	Provide the estimated percentage of the year	r end balance held a	18:						
а	Board designated or quasi-endowment		_%						
b	Permanent endowment ► 100.00	%							
C	Term endowment	%							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	and administe	red for the	organization	1		
	by:							Yes	No
	(i) unrelated organizations						3a(i) X	<u> </u>
	(ii) related organizations						3a(i	<u>i)</u>	X
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Schedule R?				3b	<u> </u>	<u> </u>
4	Describe in Part XIV the intended uses of the								
Pa	rt VI Investments - Land, Building), Part X, line	10				
	Description of investment	(a) Cost or o basis (investi	1	t or other (other)		umulated eciation	(d) B	ook valu	ie
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment		5	2,627.	2	9,898.		22,7	29.
	Other								
Tota	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, column (B), line	10(c).)				22,7	29.

	las Land Trus		91	<u>-1331348</u>	Page 3
Part VII Investments - Other Securities. Se	e Form 990, Part X, line 1				
(a) Description of security or category (including name of security)	(b) Book value		Method of valua and-of-year mar		
Financial derivatives					
Closely-held equity interests					
Other					
Marketable Securities	1,585,799	End-of-Year	Market	Value	
Bonds and US Treasury notes	1,148,337				
Money market	59,501				
		Ĺ			
	 	 			·
Total (Oct /b) was a way Form OOO Part V and (D) kee 10)	2,793,637				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)					
	T		Nethod of valua	tion:	
(a) Description of investment type	(b) Book value		end-of-year mar		
	-				
	ļ				
					
					
	 				
	-				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	 				
Part IX Other Assets. See Form 990, Part X, line	15.				
	Description			(b) Book va	alue
Conservation Easement					<u>7.</u>
Land held for conservation pu	rposes			10,249	<u>,794.</u>
					
					
	 				
Total. (Column (b) must equal Form 990, Part X, col (B) lin			>	10,249	,801.
Part X Other Liabilities. See Form 990, Part X	, line 25.				
1. (a) Description of liability		(b) Amount			
Federal income taxes					
		<u> </u>			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 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.
932053
92-01-10

	dule D (Fo	orm 990) 2009	Chelan-Dou	iglas L	and Trust				91-1	331348	Page 4
Par	t XI R	econciliation of	Change in Net	Assets fr	<u>om Form 990 to</u>	o Audit	ed Finar	icial St	<u>atement</u>	3	
1	Total reve	enue (Form 990, Parl	VIII, column (A), line	12)				1			
2	Total exp	enses (Form 990, Pa	irt IX, column (A), line	e 25)				2			
3	Excess o	or (deficit) for the year	. Subtract line 2 from	n line 1				3			
4	Net unrea	alızed gains (losses)	on investments					4			
5	Donated	services and use of	facilities					5			
6	Investme	ent expenses						6			
7	Prior per	od adjustments						7			
8	Other (De	escribe in Part XIV.)	•					8	·		
9	Total adj	ustments (net). Add I	ines 4 through 8					9			
10		or (deficit) for the year	per audited financia	al statements	s. Combine lines 3 a	nd 9		10			
Par		leconciliation of				ents w	ith Heve	nue pe	r Ketum		
1		enue, gains, and other						•	1 1		
2		s included on line 1 b		Part VIII, line	12:	ł	ı				
а		alized gains on inves				_2a_					
þ		services and use of				2b			—i		
С		ies of prior year grant	S			2c	<u> </u>				
d	-	escribe in Part XIV.)				_2d	L				
е		s 2a through 2d							2e		
3		line 2e from line 1							3		
4	Amounts	included on Form 9	90, Part VIII, line 12,	but not on li	ne 1:	1	ı				
а		ent expenses not incl	uded on Form 990, I	Part VIII, line	7b .	<u>4a</u>					
Ь	•	escribe in Part XIV.)		•		. <u>4b</u>	l				
_C		s 4a and 4b		-4.5 000				•••	4c		
_ <u>5</u>	otal rev	enue. Add lines 3 and Reconciliation of	<u>d 4c. (This must equ</u>	ai rorm 990, Audited E	inancial States	nente V	With Eyn	enege r	oer Retu		
		penses and losses pe			mancial States	ionto t	vidi Exp	011303	1		
1 2		s included on line 1 b			25.		•		 		
a		services and use of		1 411 17, 1110	LU .	2a	I				
b		r adjustments	raciinto3	•		2b					
C	Other los	•				2c			\dashv \mid		
d		escribe in Part XIV.)			•	2d			 		
e	•	s 2a through 2d	•	•	•		L		2e		
3		t line 2e from line 1	•			••	•		3		
4		s included on Form 9	90 Part IX line 25 h	out not on lin	 e 1·	•• • •	• •				
т э		ent expenses not incl				4a	1		1 1		
b		escribe in Part XIV.)			. •	4b		_	_		
-		s 4a and 4b	•		• •				4c		
5		penses. Add lines 3 a	and 4c . (This must ed	ual Form 99	o. Part I. line 18.)	•			. 5		
		Supplemental In									
		part to provide the d		for Part II, lir	nes 3, 5, and 9, Part	III, lines	1a and 4, P	art IV, line	es 1b and 2	b; Part V, line	4; Part
X, lın	e 2, Part)	KI, line 8; Part XII, line	s 2d and 4b; and Pa	rt XIII, lines 2	2d and 4b Also con	nplete thi	s part to pr	ovide any	additional	information.	
									_		
											

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization

Chelan-Douglas Land Trust

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Employer identification number 91-1331348

	Complete if the organization answered "Yes" on Form	1 990, Part IV, line 25a or 25b, or Form 990-EZ, Part	V, line 40b.			
1		(h) Decembles of transaction	-	(c) Corrected?		
	(a) Name of disqualified person	(b) Description of transaction		Yes	No	
					ļ	
					ļ	
					 	
					<u> </u>	
2	Enter the amount of tax imposed on the organization manager	rs or disqualified persons during the year under			•	
	section 4958		▶ \$			
3	Enter the amount of tax, if any, on line 2, above, reimbursed b	y the organization	▶ \$			

Part II Loans to and/o	r From Int	erested I	Persons.								
Complete if the orga	inization ansi	wered "Yes"	on Form 990, Part IV,	line 26, or Form 990-E	Z, Part \	/, line 38	Ba.				
(a) Name of interested person and purpose		to or from nization?	(c) Onginal principal amount	(d) Balance due		(e) In default? (f) Approved by board or committee?		by board or			
	То	From			Yes	No	Yes	No	Yes	No	
						<u> </u>	<u> </u>				
	<u> </u>	<u> </u>		ļ		<u></u>	<u> </u>	<u> </u>		<u></u>	
							<u> </u>	<u></u>	Ĺ'		
	1				I	7	1	1			

Total > \$
Part III Grants or Assistance Benefiting Interested Persons.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
		
		
	 	

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization (c) Amount or transaction		(d) Description of transaction	(e) Sharing of organization's revenues?	
	<u> </u>			Yes	No
Robert Bugert, Executive D	Robert serves on th	217,931.	Chelan-Doug		X
					
		 			
	<u> </u>		<u> </u>		

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

Schedule L (Form 990 or 990-EZ) 2009

See Schedule O for Schedule L Continuations

SCHEDULE O

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.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Chelan-Douglas Land Trust

Employer identification number 91-1331348

Chelan-Douglas Land Trust 31-1331346
Form 990, Part VI, Section A, line 6: Members
Form 990, Part VI, Section A, line 7a: As set in our bylaws, current
members are entitled to one vote for each of the Director positions open at
any given time. Directors are elected in February each year through an
election conducted by mail.
Form 990, Part VI, Section B, line 11: The Finance committee reviews the
Form 990 and then gives it to the Board of Directors for approval prior to
filing.
Form 990, Part VI, Section B, Line 12c: At a minimum, at every Board or
Committee meeting anyone, including Counsel, who has a conflict with a
topic being discussed, recuses themselves when the topic comes up. This
recusal is reflected in the Board Minutes. When individuals are considered
for nomination to the Board or a committee, any potential conflicts are
raised and ways they can be addressed are discussed.
Form 990, Part VI, Section B, Line 15a: The process for determining
compensation of officers and key employees is based upon a review by the
Executive Committee using salary surveys and inquiry of similar sized
organizations in the area. The Executive Committee then makes
recommendations to the Board of Directors for deliberation and approval of
compensation on an annual basis. Meeting minutes reflect all discussions
and decisions.

SCHEDULE 0

(Form 990)

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.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Chelan-Douglas Land Trust

Employer identification number 91-1331348

Form 990, Part VI, Section C, Line 19: All governing documents, policies
(including conflict of interest) and financial statements are available to
the public upon request.
Sch L, Part IV, Business Transactions Involving Interested Persons:
(a) Name of Person: Robert Bugert, Executive Director
(b) Relationship Between Interested Person and Organization:
Robert serves on the Board of the Icicle Fund, a nonprofit organization.
(c) Amount of Transaction \$ 217,931.
(d) Description of Transaction: Chelan-Douglas Land Trust receives
grants and awards from the Icicle Fund for operational and program
support.
(e) Sharing of Organization Revenues? = No
Form 990, Part X, Line 32:
Unrealized gain (loss) on investments of (\$728,785) and \$686,302 are
included in the beginning of year and end of year retained earnings,
endowment, accumulated income, or other funds balances, respectively.