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Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2010 Open to Public Inspection

<u>A</u>	For the 20	10 calendar year, or tax year beginning $04/01/10$, and ending $03/31/11$	_	
В	Check if applic	able C Name of organization	D Empl	oyer identification number
	Address chan	wood river Land Trust Co.		0.45.44.04
	Name change	Doing Business As		-0474191
	Initial return	Number and street (or P O box if mail is not delivered to street address) Room/suite		none number
H	Terminated	119 E. BULLION ST	208	3-788-3947
\vdash		City or town, state or country, and ZIP + 4		2 402 002
\vdash	Amended retu		G Gross rec	eipts \$ 2,493,082
	Application pe	nding F Name and address of principal officer JACK KUENEMAN H(a) Is this	a group return for	affiliates? Yes X No
			II affiliates inclu	ded? Yes No
				ist (see instructions)
_	Tax-exemp			
÷	Website:		p exemption nu	mher •
ĸ	Form of organ		1994	M State of legal domicile ID
*****	art i	Summary		
	· · · · · · · · · · · · · · · · · · ·	rfly describe the organization's mission or most significant activities		
•	1 .	See Schedule O		
nce				
ါ အင္ပါကိုမို့ခုံး & Governance				
S 6	2 Ch	eck this box F if the organization discontinued its operations or disposed of more than 25% of its net ass	ets	
Ŏ	3 Nu	nber of voting members of the governing body (Part VI, line 1a)	3	17
_ &	4 Nu	nber of independent voting members of the governing body (Part VI, line 1b)	4	16
366	5 Tot	al number of individuals employed in calendar year 2010 (Part V, line 2a)	5	12
ૡ૽ૼ	6 Tot	al number of volunteers (estimate if necessary)	6	50
ৰ্জ	72 Tot	al unrelated business revenue from Part VIII, column (C), line 12	7a	
H	h No	unrelated business taxable income from Form 990-T, line 34	7b	0
<u> </u>	D Ne	Pnor		Current Year
$\frac{1}{2}$	8 Co		02,466	1,991,432
_ee	0 Dr	gram service revenue (Part VIII, line 2g)	52,100	
ĊĚ	10 lov		-3,980	44,479
SCANNED 001	14 04	er revenue (Part VIII, column (A), lines 5, 4, and 70)	3,300	44/4/3
Z	11 Ou		98,486	2,035,911
҉	12 100		50,400	2,033,311
ັກ ເຂ	13 618	nts and similar amounts paid (Part IX, column (A), lines 1–3)		
•	14 56	refits paid to or for members (Part IX, column (A), line 4)	98,267	427,731
Ses	15 Sai		90,201	421,131
penses	16a Pro	fessional fundraising fees (Part IX, column (A), line 11e) al fundraising expenses (Part IX, column (D)) (Imp 25)		
Exp	b lot	al fundraising expenses (Part IX, collimn (D) thre 25) 2011 (C) 171,346 er expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	04 201	1 100 700
ш	17 Oth	er expenses (Part IX, column (A), lines I Ia- I Id, I II-241)	24,301	1,108,702
			22,568	1,536,433
	19 Re		75,918	499,478
Net Assets or		Beginning of 9		End of Year
SSe	20 Tot		96,405	9,324,187
etA	21 Tot	al liabilities (Part X, line 26)	73,488	186,964
		· · · · · · · · · · · · · · · · · · ·	22,917	9,137,223
	Part II	Signature Block		
tr	Inder penalti rue, correct,	es of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	my knowledge	and belief, it is
		agramman		
Sig	gn 📙	Signature of officer Jack Such Charles	Date	o
He		Yresident, beand of Julectors		9.27.11
		Type or print name and title		
_	P		Check	if PTIN
Pai	i an		26/11 self-er	السا
Pre	marar	rm's name > Becker, Chambers & Co., P.A.	Firm's EIN	
	e Only	PO Box 909	I mint a City	
	- 1	W-11 TD 02222 0000	Dhono	208-788-9595
Mar		iscuss this return with the preparer shown above? (see instructions)	Phone no	
_	<u> </u>	rk Reduction Act Notice, see the separate instructions.		Yes No Form 990 (2010)
DA		n neuronon Act Notice, see the separate instructions.	0	1 A. 1

82-0474191	Page 2
	-
tion in this Part III	X
· · · · · · · · · · · · · · · · · · ·	<u>.</u>
hich were not listed on the	Yes X No
	163 22 110
ducts, any program	
	Yes X No
)
ATTACHED PROGRAM	
(Revenue \$ E ATTACHED PROGRAM	;
• •)
) (Revenue \$,
) liveacure &	
	Form 990 (2010)
	which were not listed on the ducts, any program argest program services by expenses Section to report the amount of grants and allocations to the section of the services by expenses Section of the services by expenses Section to report the amount of grants and allocations to the section of the services by expenses Section to report the amount of grants and allocations to the section of the sec

Form 990 (2010) WOOD RIVER LAND TRUST CO.

Pa	art 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
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		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		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		Х
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	İ	X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	[ļ
	complete Schedule D, Part VI	11a	X	<u>'</u>
b			_	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11ь		X
С	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	11c		X
d	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		i	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
3	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	1		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			l
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
6	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, Parts III and IV	16		X
7	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 (see instructions)	17	ļ	X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			ŀ
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
9	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		Х
0a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	<u> </u>	X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20h	l	

	art iv Checklist of Required Schedules (continued)					
24	Did the assessment was the off 000 of earth and other considered to accomplish				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		х
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		х
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					1
	employees? If "Yes," complete Schedule J			23		х
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					1
	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		
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		
d	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior					1
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?					1
	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					l
	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,					ł
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					Ė
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)					ĺ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a		X
Ь	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 (or a family member thereof)					37
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			28c	77	X
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				.	l
	conservation contributions? If "Yes," complete Schedule M			30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			31		х
22	Part I			31		<u> </u>
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			32		
JJ	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? If "Yes," complete Schedule R, Parts II, III,			"		
٠.	IV, and V, line 1			34	x	ľ
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		X
а	Did the organization receive any payment from or engage in any transaction with a					
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,					1
	Part V, line 2	Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable					ĺ
	related organization? 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,					1
	Part VI			37		X
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	X	i

Form 990 (2010) WOOD RIVER LAND TRUST CO.

Pε	art V Statements Regarding Other IRS Filings and Tax Compliance		•			
	Check if Schedule O contains a response to any question in this Part V					
	`				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	11			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b_	0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			Į.		‡
	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, filed for the calendar year ending with or within the year covered by this return	2a	_12			-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	7		2b	X	<u>↓</u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					ļ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut					
	over, a financial account in a foreign country (such as a bank account, securities account, or other finan	cial				1
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Ac	counts				v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	-0		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction if "Yos" to line 50 or 5b, did the organization file Form 8886-T2	11.7		5b 5c	 	<u> </u>
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			30		\vdash
va	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		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or		- Oa		1
b	gifts were not tax deductible?	OI .		6b		
7	Organizations that may receive deductible contributions under section 170(c).			05		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ds				
_	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	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	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit conf	ract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	8899 a	is required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	n file a	Form 1098-C?	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			ŀ		ł
	organization, have excess business holdings at any time during the year?			8	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.			•		l
а	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	ļ	
10	Section 501(c)(7) organizations. Enter	امدا	1	Į.		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	l			•
11	Section 501(c)(12) organizations. Enter	1 44- 1	l	•		1
a	Gross income from members or shareholders	11a				1
b	Gross income from other sources (Do not net amounts due or paid to other sources	446		ţ		
12-	against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1.	11b	<u> </u>	12a	1	1
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1 If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1	128		<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	l	 [1	1
a	Is the organization licensed to issue qualified health plans in more than one state?			13a	·····	1
а	Note. See the instructions for additional information the organization must report on Schedule O			134		<u> </u>
b	Enter the amount of reserves the organization is required to maintain by the states in which					1
.,	the organization is licensed to issue qualified health plans	13b	1	E E		1
С	Enter the amount of reserves on hand	13c				1
14a	Did the organization receive any payments for indoor tanning services during the tax year?		·	14a		X
<u> </u>	if "Vac " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule C			14h		

Form 990 (2010) WOOD RIVER LAND TRUST CO. 82-0474191 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management No Yes Enter the number of voting members of the governing body at the end of the tax year 16 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 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 X 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 governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant 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 the year by the following X The governing body? а 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No X .10a Does the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > ID 17 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 Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > MELANIE DAHL 119 EAST BULLION ST. ID 83333 208-788-3947 HAILEY

Form 990 (2010) WOOD RIVER LAND TRUST CO.

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See 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

X Check this box if neither the organ	nization nor any	relate	ed or	ganı	zatio	ns co	mpe	ensated any current officer,	director, or trustee	
(A) Name and Title	(B) Average hours per				k all t	hat ap		(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JANE MASON		Ī						_		
DIRECTOR	1.00	X				\sqcup		0	0	, 0
(2) ED CUTTER		l								
DIRECTOR	3.00	X						0	. 0	0
(3) REBECCA PATTON										
DIRECTOR	1.00	X						0	0	0
(4) JOHN FLATTERY		l								
DIRECTOR	1.00	X	Ш					0	0	0
(5) HEATHER KING	1 00							_	_	
DIRECTOR	1.00	X	ļ		-			0	0	0
(6) LIZ MITCHELL	0.00	1						_		_
DIRECTOR	2.00	X						0	0	0
(7) STEVE STRANDBERG	ľ									_
DIRECTOR	2.00	X	<u> </u>			1-1		0	0	0
(8) JOAN SWIFT	0.50							_	_	_
DIRECTOR	0.50	X				\vdash		0	0	0
(9) BARBARA THRASHER						1 1		_	_	_
DIRECTOR	1.00	X				$\vdash \downarrow$		0	0	0
(10) MEGAN STEVENSON	1 00							_		_
DIRECTOR	1.00	X	\vdash			\vdash		0	0	0
(11) JOHN FELL STEVEN		,,							_	_
DIRECTOR (12) WOLF RIEHLE	0.50	X				╁		0	0	0
	2.00	x				1		o	o	o
DIRECTOR (13) DAVE ANDERSON	2.00	╀┻	\vdash			\vdash		J	0	
DIRECTOR	1.00	x						o	o	О
(14) JACK KUENEMAN	1.00	+*				\vdash	-			
PRESIDENT	8.00			x				o	0	o
(15) ROBIN GARWOOD	0.00	┼	\vdash			\vdash				
SECRETARY	2.00			x				o	0	О
(16) TRENT JONES	2.00	+-	\vdash		_	+ +	_			
VICE PRESIDENT	2.00			x				o	0	o
DAA		٠			Щ.					Form 990 (2010)

Pa	rt VII Section A. Officers	, Directors, Trus	tees	, Ke	y En	nplo	yees	, an	d Highest Compensated E	mployees (continued)				
	(A)	(B)				C)			(D)	(E)		(F)		
	Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	or director		Officer		Highest compensated employee	•	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)		Estimate amount other compensa from the organization and relationganization	of ation ie tion ted	
	JOHN FRENCH							-	_		 			
	ASURER	2.00	<u> </u>	_	X				0	<u> </u>	<u>'</u>			0
	SCOTT BOETTGER C. DIRECT	40.00		Ì			x		101,504	c	, l		6,9	A 0
(19)	C. DIRECT	40.00		ļ	 		^		101,304		<u>'</u>		0,3	743
											<u> </u>			
(20)														
(21)														
(22)														
(23)					-				,					
(24)											<u> </u>			
(25)														
(26)										~				
(27)											-			
(28)											-			-
1b	Sub-total		L_			L	l		101,504		+		6,9	49
С	Total from continuation shee	ets to Part VII, Se	ectio	n A				•				_		
d_	Total (add lines 1b and 1c)							<u> </u>	101,504	00.000			6,9	49
2	Total number of individuals (increportable compensation from	-			ose	usted	abc	ve)	wno received more than \$10	00,000 in				
	reportable compensation from	the organization										Ţ,	Yes	No
3	Did the organization list any fo					•		-	ee, or highest compensated					v
4	employee on line 1a? If "Yes," For any individual listed on line								and other compensation from	m the		3	-	X
·	organization and related organ												ŧ	37
5	individual Did any person listed on line 1:	a receive or accri	ie co	mne	neat	ıon f	rom :	anv i	unrelated organization or inc	dividual		4	1	X
	for services rendered to the or			•				•	_			5		X
Sec	tion B. Independent Contract													_
1	Complete this table for your five compensation from the organization		ısate	d ind	depe	nder	nt cor	ntrac	ctors that received more that	n \$100,000 of				
		(A) I business address							Descrip	(B) tion of services		Com	(C) pensatio	on .
K	M CONSTRUCTION					P.C). I		97	-			•	
H/	AILEY	ID	8 (33	<u>33</u>			F	EXCAVATING/CON	IS			142	,000
								╁						
								_						
2	Total number of independent of	ontractors (includ	lina t	out n	ot lin	nited	to th	ose	listed above) who					
-	received more than \$100,000 i		-						· - , · · · · ·			[

Pe	IFT V	iii Staten	ient of Rever	iue			,			,
		•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
សន	1a	Federated cam	paigns	1a						
a u	ь	Membership du		1b						ł
Program Service Revenue Contributions, gifts, grants and other similar amounts	ءَ ا	Fundraising ev	1	1c			-			1
ifts	ہا	Related organiz	- T	1d						ŧ
9,5	ľ	-				55,733	-			
Sis	ء ا	Government grants (· · · · · · · · · · · · · · · · · · ·	1e		33,133				1
her	١ '	All other contributions and similar amounts		4.	1	035 600				
E to	_		L	1f		935,699 098,879				ŧ
and	9		is included in lines 1a-1f	•	, I,	098,879	1 001 400			•
	l h	Total. Add line	s 1a–1f			<u> </u>	1,991,432			
nue	1					Busn Code				
eve	2a									
e R	b									
Σ̈́ς	C									
Se	ď						· · · · · · · · · · · · · · · · · · ·			
ram	e									
ğ	f	All other progra	ım service reveni	ıe						
<u>~</u>	g	Total. Add lines	s 2a–2f			•			· · · · · · · · · · · · · · · · · · ·	,
	3	Investment inco	ome (including di	/idend	s, interes	t,				
		and other similar	ar amounts)			>	26,937			26,937
	4				ceeds 🕨		<u> </u>			
	5	Royalties				.				
	}		(ı) Real		(n) F	Personal				
	6a	Gross Rents								
	b	Less rental exps					•			<u> </u>
	С	Rental inc or (loss)								<u> </u>
	d	Net rental incor	me or (loss)			•				
	7a	Gross amount from	(ı) Securities		(n)	Other				
		sales of assets other than inventory	474,	713						
	ь	Less cost or other					,			
	~	basis & sales exps	457,	171						.
	ء ا	Gain or (loss)	17,							1
	ď	Net gain or (los		<u> </u>		•	17,542			17,542
			m fundraising event	. Г	-		11,542			27,542
en	oa	(not including \$	in folioraising event	°						†
/en			eported on line 1c)	- 1						į
Re		See Part IV, line								
Other Revenue	_			a	-					-
ᅙ		Less direct exp	oenses (loss) from fundra	J d	ont-					
	ı			isirig e T	vents					<u> </u>
	эa		m gaming activities							!
		See Part IV, line		a						,
		Less direct exp		ρĹ				-		
			(loss) from gamın	g activ F	ities	P				
	10a	Gross sales of	-							[
		returns and allo		a						<u> </u>
		Less cost of go		ьſ						ŀ
	С		loss) from sales	of inve	ntory	▶				
		Misce	ellaneous Revenue			Busn. Code				1
	11a					<u> </u>			_	
	b					<u> </u>		<u> </u>		
	С									ļ
	d	All other revenu	ıe							
	e	Total. Add lines	s 11a-11d			>				
	12	Total revenue.	See instructions			▶	2,035,911	0	0	44,479

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do	All other organizations must of not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>7</u> b	, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
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			1	
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	350,140	185,574	73,530	91,036
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	6,328	3,354	1,329	1,645
9	Other employee benefits	41,908	23,479	8,234	10,195
10	Payroll taxes	29,355	15,558	6,165	7,632
11	Fees for services (non-employees).				
а	Management				
b	Legal	25,636	15,901	9,735	
С	Accounting	17,079		17,079	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	33,174	32,314		860
12	Advertising and promotion				
13	Office expenses	10,656	2,202	7,077	1,377
14	Information technology	19,194	105	8,116	10,973
15	Royalties				
16	Occupancy	17,011	9,016	3,572	4,423
17	Travel	5,912	2,095	3,113	704
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,712	4,055	9,657	
20	Interest	2,895	2,895	7,00	
21	Payments to affiliates	- / 555	= / 555		· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	48,271	25,584	10,137	12,550
23	Insurance	15,145	1,581	13,564	==,==
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column			‡	
	(A) amount, list line 24f expenses on Schedule O)				
а	EASEMENT PROGRAM EXPENSE	830,000	830,000		
b	MEMBERSHIPS	23,393	4,918	3,132	15,343
c	FUNDRAISING	17,836	312	2,916	14,608
d	STEWARDSHIP	13,469	11,297	2,172	
e	CRITICAL ENHANCEMENTS	9,089	9,089	,	
_	All other expenses	6,230	4,472	1,758	
	·		1,183,801	181,286	171,346
26					
	campaign and fundraising solicitation				
25 26	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational	1,536,433	1,183,801	181,286	171,34

P	art X	Balance Sheet		·		
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing	Ĺ		1	
	2	Sawngs and temporary cash investments		1,779,171	2	1,122,598
	3	Pledges and grants receivable, net			_3	22,500
	4	Accounts receivable, net	Ĺ		4	
	5	Receivables from current and former officers, directors, trustee	es, key			
		employees, and highest compensated employees Complete P	art II of			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under	section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and co	ontributing			
		employers and sponsoring organizations of section 501(c)(9) v	oluntary			
		employees' beneficiary organizations (see instructions)			6	
Assets	7	Notes and loans receivable, net	Ĺ		7	
SS	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges		3,115	9	4,991
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	a 7,058,384			
	ь	Less accumulated depreciation 10	ы 162,468	6,431,358	10c	6,895,916
	11	Investments—publicly traded securities		582,761	11	1,278,182
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets	14			
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		8,796,405	16	9,324,187
	17	Accounts payable and accrued expenses		44,566	17	60,261
	18	Grants payable			18	
	19	Deferred revenue	[19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV of Scher	dule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	,			
į		employees, highest compensated employees, and disqualified	persons			
Lia		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third partie	s	28,922	23	126,703
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		73,488	26	186,964
S		Organizations that follow SFAS 117, check here ▶ X an	d complete			
Balances		lines 27 through 29, and lines 33 and 34.				
lai	27	Unrestricted net assets		7,932,827	27	8,525,743
Ba	28	Temporarily restricted net assets		790,090	28	611,480
pu	29	Permanently restricted net assets			29	
Fu		Organizations that do not follow SFAS 117, check here ▶	and			
7	1	complete lines 30 through 34.				
S	30	Capital stock or trust principal, or current funds			30	
Set	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
AS	32	Retained earnings, endowment, accumulated income, or other	funds		32	
Net Assets or Fund	33	Total net assets or fund balances		8,722,917	33	9,137,223
Ž	34	Total liabilities and net assets/fund balances		8,796,405	34	9,324,187

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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

SCHEDULE A

(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

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

e organization

WOOD RIVER LAND TRUST CO.

Employer identification number 82-0474191

Pa	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	this p	art) S	ee ins	tructio	ons.		
Γhe	orgai	nization is not	a private foundation because	it is (For lines 1 through 11, che	ck only o	ne box)							
1		A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A)(i).						
2		A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3		A hospital or	a cooperative hospital service	e organization described in secti	on 170(b))(1)(A)(iii)							
4		A medical res	search organization operated	in conjunction with a hospital de-	scribed in	section 1	70(b)(1)(A)(iii).	Enter th	e hospi	ital's name,		
		city, and state	e										
5		An organizati	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmenta	al unit de	escribed	ın			
			b)(1)(A)(iv). (Complete Part I		·								
6					tion 170(b)(1)(A)(v).						
7	П	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											
		described in section 170(b)(1)(A)(vi). (Complete Part II)											
8	X		. ,, ,, ,, ,	'0(b)(1)(A)(vi). (Complete Part II)								
9	П	-		more than 33 1/3% of its suppor		ntributions	, memb	ership fe	es, and	gross			
		_	•	ot functions—subject to certain e						_			
		support from	gross investment income and	unrelated business taxable inco	me (less	section 5	1 tax) fr	om busi	nesses				
		acquired by the	he organization after June 30	, 1975 See section 509(a)(2). (Complete	Part III)							
10		An organizati	on organized and operated ex	clusively to test for public safety	See sec	tion 509(a)(4).						
11		An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions	of, or to	carry ou	it the				
		purposes of c	one or more publicly supporte	d organizations described in sec	tion 509(a)(1) or se	ction 509	9(a)(2)	See sec	tion			
		509(a)(3). Ch	eck the box that describes the	e type of supporting organization	and com	plete lines	11e thr	ough 11	h				
		a Type	l b Type II	c Type III-Functions	ally integra	ated	d	Тур	e III-Ot	ner			
е		By checking t	this box, I certify that the orga	nization is not controlled directly	or indirec	tly by one	or more	disqual	ıfied per	sons			
		other than for	undation managers and other	than one or more publicly support	rted orgai	nizations	describe	d in sect	ion 509	(a)(1)			
		or section 509	9(a)(2)										
f		If the organiza	ation received a written deteri	mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportir	g				_
		organization,	check this box										
g		Since August	t 17, 2006, has the organization	on accepted any gift or contributi	on from a	ny of the							
		following per	sons?										
		(i) A persor	n who directly or indirectly cor	ntrols, either alone or together wi	th person:	s describe	d in (ii) a	and			_	Yes	No
		(III) belov	w, the governing body of the s	supported organization?							11g(<u>) </u>	
		(ii) A family	member of a person describe	ed in (i) above?							11g(<u>ı)</u>	<u> </u>
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(ш)	<u> </u>
<u>h</u>			ollowing information about the	e supported organization(s)						- 1			
(1)		e of supported anization	(II) EIN	(iii) Type of organization (described on lines 1–9		organization	, , ,	rou notify nization in	(vi) organizat	s the		mount o	f
	org	anization		above or IRC section		sted in your document?		of your	(i) organı	zed in the	SU	pport	
				(see instructions))		T		port?	_	5?			
					Yes	No	Yes	No	Yes	No			
A)					ļ								
B)					 								
D)										İ			
C)					1								
D)											:		
E)					 				 				
-,													
												-	
ota	<u> </u>				<u> </u>	<u> </u>		.	<u> </u>	L			

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	934,598	1,418,823	1,762,604	1,202,466	1,991,432	7,309,923
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	934,598	1,418,823	1,762,604	1,202,466	1,991,432	7,309,923
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)						779,216
6	Public support. Subtract line 5 from line 4 tion B. Total Support	<u> </u>	<u> </u>		<u>l</u>		6,530,707
	ndar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Tatal
7		934,598	` ' -		· · · · · · · · · · · · · · · · · · ·		(f) Total
8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	39,106	1,418,823 79,973	1,762,604 38,962	1,202,466 31,661	1,991,432 26,937	
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)	4,303	9,134				13,437
11	Total support. Add lines 7 through 10						7,539,999
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourth	, or fifth tax year as	a section 501(c)(3	3)	
	organization, check this box and stop here						•
Sec	tion C. Computation of Public Sup	pport Percentag	ge				
14	Public support percentage for 2010 (line 6,	column (f) divided by	y line 11, column (f))		14	86.61%
15	Public support percentage from 2009 Scheo	dule A, Part II, line 1	4			15	81.35%
16a	33 1/3% support test—2010. If the organiz	ation did not check	the box on line 13,	and line 14 is 33 1/	3% or more, check	this	
	box and stop here. The organization qualifi	es as a publicly sup	ported organization	1			► X
b	33 1/3% support test—2009. If the organiz	ation did not check	a box on line 13 or	16a, and line 15 is	33 1/3% or more,		
	check this box and stop here. The organiza	ation qualifies as a p	ublicly supported o	rganization			▶ ∐
17a	10%-facts-and-circumstances test—2010). If the organization	did not check a bo	x on line 13, 16a, o	or 16b, and line 14 i	IS	
	10% or more, and if the organization meets				•		
	Part IV how the organization meets the "fac organization	ts-and-circumstance	es" test The organi	zation qualifies as a	a publicly supporte	d	> []
b	10%-facts-and-circumstances test—2009	3. If the organization	did not check a bo	x on line 13, 16a, 1	6b, or 17a, and line	е	
	15 is 10% or more, and if the organization in				•		
	Explain in Part IV how the organization mee supported organization	ets the "facts-and-cir	cumstances" test	The organization qu	ualifies as a publicly	у	• []
18	Private foundation. If the organization did instructions	not check a box on l	ıne 13, 16a, 16b, 1	7a, or 17b, check the	his box and see		▶ []

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 or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	guality under	the tests lister	below, please	complete Fai	t II.)	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(4) 2000	(5) 2007	(6) 2000	(4) 2003	(6) 2010	(I) Total
2	grants ") 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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						<u>-</u>
500	tion B. Total Support	<u> </u>	I	<u> </u>	l	LL	
	ndar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	(a) 2000	(6) 2007	(0) 2000	(4) 2009	(e) 2010	(I) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	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 first,	second, third, fourt	h, or fifth tax year a	is a section 501(c)	(3)	-
	organization, check this box and stop here	-		•		,	▶ [
Sec	tion C. Computation of Public Su	pport Percenta	age			· · · · · · · · · · · · · · · · · · ·	
15	Public support percentage for 2010 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2009 Sche					16	%
<u>Sec</u>	tion D. Computation of Investmen	nt Income Perc	entage				
17	Investment income percentage for 2010 (lin	ne 10c, column (f) c	divided by line 13, o	olumn (f))		17	<u> %</u>
18	Investment income percentage from 2009					18	%
19a	33 1/3% support tests—2010. If the organ						
	17 is not more than 33 1/3%, check this bo						▶
b	33 1/3% support tests—2009. If the organ						▶ □
20	line 18 is not more than 33 1/3%, check this						
<u> 20</u>	Private foundation. If the organization did	HOT CHECK a DOX OF	i line 14, 19a, or 19	ib, check this box a	ind see instructions	, , , , , , , , , , , , , , , , , , ,	<u></u> ▶

Schedule A (Form 990 or 990-EZ) 2010 WOOD RIVER LAND TRUST CO.

82-0474191

Page 4

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. Also complete this part for any additional information. (See instructions).

Part II, Line 10 - Other Income Detail

EASEMENT FEES/MISC

13,437

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.

OMB No 1545-0047
2010
Open to Public

Inspection

Employer identification number Name of the organization 82-0474191 WOOD RIVER LAND TRUST CO. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 37 a Total number of conservation easements 2a 10,175.59 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 0 historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of X Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 640 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 28,500 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) X Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public 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 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Describe in Part XIV the intended uses of the organization's endowment funds Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation 5,623,264 524,785 1a Land 6,148,049 867,920 126,628 741,292 **b** Buildings c Leasehold improvements 42,415 35,840 6,575 d Equipment e Other 6,895,916 Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2010

Part VII	Investments—Other Securities. See Form 99	0, Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method o	f valuation
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial	derivatives			
(2) Closely-ha	eld equity interests			· · · · · · · · · · · · · · · · · · ·
(3) Other				
(A)				
(B)				
(C)				
(D)		<u></u>		
(E)				
(F)				·····
(G)				
(H)				
(1)	(1)			
	n (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>	
Part VIII	Investments—Program Related. See Form 99 (a) Description of investment type		(a) Mathada	fuelustas
	(a) Description of investment type	(b) Book value	(c) Method o Cost or end-of-yea	
(1)			Good of Cha-of-yea	ai market value
(1)				
(2)				
(3)				
(5)				· · · · · · · · · · · · · · · · · · ·
(6)				
(7)				
(8)				
(9)				
(10)				
` 	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
(1)				,
(2)				
(3)				
(4)				
(5)			. =	
(6)				
(7)				
(8)				
(9)				
(10)		····		
	n (b) must equal Form 990, Part X, col (B) line 15)		>	
Part X	Other Liabilities. See Form 990, Part X, line 2	· · · · · · · · · · · · · · · · · · ·		
<u>1</u>	(a) Description of liability	(b) Amount	_	
	income taxes		_	
(2)			_[
(3)			4	
(4)			4	
(5)			-{	
(6)			-[
(7)			-{	
(8)			4	
(9)			4	
(10)		<u> </u>	-	
(11) Tatal (Calum	(h)		-	
	n (b) must equal Form 990, Part X, col (B) line 25)		Estatements that reports the	<u></u>

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)
Part XIV Supplemental Information

b Other (Describe in Part XIV)

c Add lines 4a and 4b

Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Part II, Line 9 - Accounting for Conservation Easements
THE WOOD RIVER LAND TRUST HAS ADOPTED THE POLICY OF NOT CAPITALIZING AS
ASSETS THE ACQUISITION OF EASEMENTS, BUT RECOGNIZES THEM AS PROGRAM INCOME
AND EXPENDITURES IN THE STATEMENT OF ACTIVITIES AND DISCLOSES THEM IN THE
FOOTNOTES OF THE FINANCIAL STATEMENTS.

4a

4b

11,432

4c

Part XI, Line 8 - Reconciliation of Changes - Other

11,432

1,536,433

Schedule D (Form 990) 2010 WOOD RIVER LAND TRUST CO.	82-0474191	Page \$
Part XiV Supplemental Information (continued)		
UNREALIZED LOSS ON RESIDENTIAL PROPERTY	\$ -	189,715
BOOK/TAX DEPR DIFF	\$	1,890
Book / Tax Depreciation Difference	\$	9,542
Part XII, Line 2d - Revenue Amounts Included in Fi	inancials - Othe	r
UNREALIZED LOSS ON RESIDENTIAL PROPERTY	\$ -	189,715
Part XIII, Line 4b - Expense Amounts Included on F	Return - Other	
BOOK/TAX DEPR DIFF	\$	1,890
Book / Tax Depreciation Difference	\$	9,542

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545-0047

2010

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WOOD RIVER LAND TRUST CO.

Employer identification number 82-0474191

Pa	rt I Types of Property							
		(a)	(b)	(c) Noncash contribution	(d)			
		Check if	Number of contributions or	amounts reported on	Method of determini	-		
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution am	iounts		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes				-			
8	Intellectual property			40.070				
9	Securities—Publicly traded	X	5	43,879				
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation							
	contribution—Historic							
	structures							
14	Qualified conservation contribution—Other	x	1	830 000	Appraisal			
4 =		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$	1	225 000	Appraisal			
15 16	Real estate—Residential Real estate—Commercial	_ ^ _	<u> </u>	223,000	Appraisar			
17	Real estate—Commercial Real estate—Other	ļ	<u> </u>					
18	Collectibles	ļ						
19	Food inventory					_		
20	Drugs and medical supplies				• • •			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts					-		
25	Other ▶ (
26	Other ▶ (•	
27	Other ► (•	
28	Other ▶ (
29	Number of Forms 8283 received by the	ne organiza	ation during the tax year for	or contributions for				
	which the organization completed For	m 8283, P	art IV, Donee Acknowlede	gement	29 0			
							Yes	No
30a	During the year, did the organization	receive by	contribution any property	reported in Part I, lines 1-2	8 that		1	
	it must hold for at least three years from	om the date	e of the initial contribution	, and which is not required to	o be			
	used for exempt purposes for the enter	re holding	period?			30a		X
b	If "Yes," describe the arrangement in	Part II					1	
31	Does the organization have a gift acc	eptance po	olicy that requires the revi	ew of any non-standard			1	
	contributions?					31		X
32a	Does the organization hire or use thir	d parties o	r related organizations to	solicit, process, or sell nonc	ash		ļ	
	contributions?					32a		X
b	If "Yes," describe in Part II.						Ī	
33	If the organization did not report an ai	mount in co	olumn (c) for a type of pro	perty for which column (a) is	s checked,		I	
	describe in Part II					\perp		

Schedule M (Form 990) (2010) WOOD RIVER LAND TRUST CO. 82-0474191

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 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

WOOD RIVER LAND TRUST CO.

Employer identification number 82-0474191

Form 990 - Organization's Mission or Most Significant Activities

THE WOOD RIVER LAND TRUST PROTECTS AND RESTORES LAND, WATER, AND WILDLIFE

HABITAT IN THE WOOD RIVER VALLEY AND ITS SURROUNDING AREAS. WE WORK

COOPERATIVELY WITH PRIVATE LANDOWNERS AND LOCAL COMMUNITIES TO ENSURE THESE

AREAS ARE PROTECTED NOW AND FOR FUTURE GENERATIONS.

Form 990, Part III, Line 4d - All Other Achievements
OTHER

Form 990, Part VI, Line 2 - Related Party Information Among Officers

JOHN STEVENSON MEGAN STEVENSON

DIRECTOR

FATHER/DAUGHTER IN LAW

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

THE FINANCE COMMITTEE HAS REVIEWED AND APPROVED THE 990 AND A COPY HAS BEEN

MADE AVAILABLE TO EACH BOARD MEMBER PRIOR TO FILING THE FORM 990.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
THE WOOD RIVER LAND TRUST'S CONFLICT OF INTEREST POLICY IS DISTRIBUTED
ANNUALLY TO STAFF AND BOARD MEMBERS, WHO ARE REQUIRED TO REVIEW THE POLICY
AND COMPLETE AN ACKNOWLEDGEMENT FORM THAT DISCLOSES POSITIONS, PROPERTY
OWNERSHIP, BUSINESS DEALINGS, OR FINANCIAL INTERESTS THAT MAY PRESENT A
CONFLICT TO THE INDIVIDUAL'S WORK OR BOARD ACTIVITIES WITH THE LAND TRUST.
FURTHERMORE, THE LAND TRUST REVIEWS WHETHER THERE MAY BE ANY CONFLICTS OF

Name of the organization

WOOD RIVER LAND TRUST CO.

Employer identification number

82-0474191

INTEREST PRIOR TO ANY LAND TRANSACTION DECISION TO BE MADE BY THE BOARD OF DIRECTORS.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE EXECUTIVE
COMMITTEE OF THE BOARD. THAT COMMITTEE CONSISTS OF THE PRESIDENT, VICE
PRESIDENT, TREASURER, SECRETARY AND IMMEDIATE PAST PRESIDENT PLUS CHAIRS OF
COMMITTEES OF THE BOARD NOT INCLUDED IN THE PRECEDING LIST. SALARY SURVEYS
CONDUCTED BY THE LAND TRUST ALLIANCE ARE USED TO PROVIDE COMPARABILITY DATA
BASED ON OTHER LAND TRUSTS WHICH ARE SIMILAR IN SCOPE AND FINANCIAL
RESOURCES.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation UPON REQUEST

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Schedule R (Form 990) 2010 Open to Public Inspection (g) Section 512(b)(13) con-OMB No 1545-0047 Employer identification number 82-0474191 2010 (f) Direct controlling Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) entity Yes (f)
Direct controlling
entity (e) End-of-year assets N/A (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) 11d ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. (d) Total income Related Organizations and Unrelated Partnerships (d) Exempt Code section 501C3 See separate instructions. (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state
or foreign country) Н (b) Primary activity (b) Primary activity SUP ORG ▶ Attach to Form 990. 82-0518109 For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA WOOD RIVER LAND TRUST CO THE BUILDING MATERIALS THRIFT STORE (a) Name, address, and EIN of related organization (a) Name, address, and EIN of disregarded entity ID 83333 P.O. BOX 909 Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R HAILEY (Form 990) Part II Part I £ ϵ ල (4) (2) 3 (2) ල € 9

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Part III	part ill ldentification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)	ons Taxable as	s a Partnership reated as a par	rship (Complete if the a partnership during	e organization at the tax year.)	answered "Yes"	to Form	1 990, Part IV,	line 34	rage z
	(a) Name, address, and EIN of related organization	(b) (d) Primary activity the don don (state for for for for for for for for for for	(c) (d) Legal Direct controlling domicile (state or foreign counity)	(e) Predomnant Income (related, unrelated, excluded from tax under sactions	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allioc 2	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(k) Percentage ownership
(1)				1000			3			
(2)										
(3)										
(4)		:								
Part IV	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ons Taxable as	a Corporation	or Trust (Compas a corporation	or trust during	nization answer the tax vear.)	red "Yes	Yes" to Form 990,	, Part IV	,
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp. or trust)	(f) Share of total income p.		(g) Share of end-of-year assets	Perc	(h) Percentage ownership
(£)										
(2)										
(3)										
(4)										
DAA								Schedule	R (Form	Schedule R (Form 990) 2010

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WOOD RIVER LAND TRUST CO. Schedule R (Form 990) 2010

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or IV of this schedule	e following transactions
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III, or IV of this schedule	any of the following transactions
II, III, or IV of this schedule	any of the following transactions
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irts II, III, or IV of this schedule	any of the following transactions
Parts II, III, or IV of this schedule	any of the following transactions
Parts II, III, or IV of this schedule	any of the following transactions
in Parts II, III, or IV of this schedule	any of the following transactions
ed in Parts II, III, or IV of this schedule	any of the following transactions
ted in Parts II, III, or IV of this schedule	any of the following transactions
listed in Parts II, III, or IV of this schedule	any of the following transactions
s listed in Parts II, III, or IV of this schedule	any of the following transactions
is listed in Parts II, III, or IV of this schedule	any of the following transactions
ity is listed in Parts II, III, or IV of this schedule	any of the following transactions
ntity is listed in Parts II, III, or IV of this schedule	any of the following transactions
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y entity is listed in Parts II, III, or IV of this schedule	any of the following transactions
iny entity is listed in Parts II, III, or IV of this schedule	any of the following transactions
fany entity is listed in Parts II, III, or IV of this schedule	any of the following transactions
If any entity is listed in Parts II, III, or IV of this schedule	any of the following transactions
1 if any entity is listed in Parts II, III, or IV of this schedule	any of the following transactions
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e 1 if any entity is listed in Parts	any of the following transactions
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e 1 if any entity is listed in Parts	tax year, did the organization engage in any of the following transaction:
e 1 if any entity is listed in Parts	tax year, did the organization engage in any of the following transaction:
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e 1 if any entity is listed in Parts	tax year, did the organization engage in any of the following transaction:
e 1 if any entity is listed in Parts	urno the tax year, did the organization engage in any of the following transaction.

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

	(p)	Method of determining
ips a	(၁)	Amount involved
line, including covered re	(q)	Transaction
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this	(a)	Name of other organization

type (a-r)

				:
6,336 EXACT DOLLAR AMT	25,000 EXACT DOLLAR AMT	EXACT DOLLAR AMT		
6,336	25,000	25,869		
đ	υ	ゲ		
THE BUILDING MATERIAL THRIFT STORE	THE BUILDING MATERIAL THRIFT STORE	THE BUILDING MATERIAL THRIFT STORE		
(1)	(2)	(3)	(4)	(2)

Schedule R (Form 990) 2010

9

Schedule R (Form 990) 2010 WOOD RIVER LAND TRUST CO.

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

82-0474191

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c) Name, address, and EIN of entity Legal domicite A	(b) Primary activity	(c) Legal domicite	(d) Are all partners		(f) Disproportionate		(h) Genera	(r
		(state or foreign country)	section 501(c)(3) organizations?		allocations?	amount in box 20 of Schedule K-1 (Form 1065)	man	managing partner?
			Yes No	r	Yes No		Yes	ş
(1)			-		<u> </u>			
(2)								
(3)								
(4)								
(5)								
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(11)								
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Schedule R (Form 990) 2010 WOOD RIVER LAND TRUST CO.

82-0474191

Page 5

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2010

Name(s) shown on return

WOOD PIVED LAND TRIET CO

Identifying number

	WOOD RI	VEK TWND I	RUST CU.					02-	U4/	4191
	ess or activity to which this form relates					-				
	ndirect Depreciati			4: 4:	70					
Pa	Election To Expension Note: If you have a	•	-			comr	oloto Pa	rt I		
1	Maximum amount (see instructions		y, complete Fa	ait V D	eiore you	COM	лете га	111.	1	500,000
2	Total cost of section 179 property p	<u>.</u>	inetructions)							300,000
3	Threshold cost of section 179 property p	•	· ·	tructions	e)				3	2,000,000
4	Reduction in limitation Subtract line	•	•	ili dedon.	3)				4	2/000/000
5	Dollar limitation for tax year Subtract line		•	ed filing	senarately sec	e instruc	tions		5	
6	(a) Description		loco, ontol o milan		(business use			lected cost		
7	Listed property Enter the amount fr	om line 29				7				
8	Total elected cost of section 179 pre	operty Add amounts	ın column (c), lines	6 and 7					8	
9	Tentative deduction Enter the sma	ller of line 5 or line 8							9	
10	Carryover of disallowed deduction f	rom line 13 of your 20	009 Form 4562						10	
11	Business income limitation. Enter the	e smaller of business	s income (not less th	han zero) or line 5 (s	ee inst	ructions)		11	
12	Section 179 expense deduction Ad	id lines 9 and 10, but	do not enter more t	han line	11				12	
13	Carryover of disallowed deduction t				<u> </u>	13				
	: Do not use Part II or Part III below t									
	ert II Special Depreciation	· · · · · · · · · · · · · · · · · · ·			•		ide liste	d prope	rty.) ((See instructions)
14	Special depreciation allowance for o		er than listed prope	erty) plac	ed in service	е				11 460
	during the tax year (see instructions	•							14	11,460
15	Property subject to section 168(f)(1	•							15	5,979
16 Da	Other depreciation (including ACRS		do listad propo	orty \ / C	Soo instru	otion	<u>,)</u>		16	5,919
Га	rt III MACRS Depreciati	on (Do not inclu	Section		see msuu	CHOIL	5.)	·		
17	MACRS deductions for assets place	ad in service in tay ve							17	26,836
18	If you are electing to group any assets place	•			oral accet acce	ounte cl	nack hara	. 🗆		
		Assets Placed in Se							stem	
-		(b) Month and year	(c) Basis for depre	ciation	(d) Recovery	-				
	(a) Classification of property	placed in service	(business/investme only-see instructi		period	(e) C	onvention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property	-								
b	5-year property		2	,882	5.0	1	MQ	200	DB	1,009
С	7-year property		1	, 568	7.0	1	MQ	200	DB	367
d	10-year property									
е	15-year property		7	,008	15.0		HY	150	DB	350
f	20-year property									
g	25-year property				25 yrs			S/L		
h	Residential rental				27 5 yrs		MM	S/L		
	property	0 70 70 0			27 5 yrs		MM	S/L		
i	Nonresidential real	07/27/10	55	,000	39 yrs		MM	S/L		999
<u>.</u>	property						MM]	S/L		
		ssets Placed in Serv	rice During 2010 T	ax Year	Using the A	Alterna	tive Depre		ystem	\
20a	Class life		- , ,		40			S/L		
	12-year	<u> </u>			12 yrs	 	N 4 N 4	S/L		
_	40-year ort IV Summary (See ins	tructions \		j	40 yrs.	L	MM	S/L		I
									21	
21 22	Listed property Enter amount from Total . Add amounts from line 12, lir		es 10 and 20 in soli	umn (a)	and line 21	Entor	hore		41	
	and on the appropriate lines of your	-				LINE	11010		22	47,000
23	For assets shown above and place				iod ucdOH5					1,,000
-0	portion of the basis attributable to s	_	Someth year, enter			23				
	position and busine attributable to s	000011 E0071 00010								

Totals

799303 09/26/2011 4 19 PM						
Forms	Mor	tgages and Oth	her Notes Payable			
990 / 990-PF			04/01/10	02/21/11	2010	
Name	For calendar year 2010,	or tax year beginning	04/01/10 , and ending	03/31/11	ntification Number	
Name .			Employer Identification Number			
WOOD RIVER LAND TRUST CO.				82-0474191		
Form 990, Par	ct X, Line 23 -	Additional	Information	 		
Name of lender			Relationship to disqualified person			
1) LINE OF CREDIT						
· · · · · · · · · · · · · · · · · · ·	SE LOAN PAYABLE			_		
3)						
(4) (5)		· •				
(6)				_	<u>-</u>	
(7)						
(8)						
(9) (10)						
(10)		·····				
Original amount		Maturity			Interest	
borrowed	Date of loan	date	Repayment ter		rate	
(1) (2) 20,0	05/13/10 00 04/15/08	05/13/11 12/31/10	INTEREST ONLY P		3.500 0.720	
(2) 20,0	00 04/13/08	12/31/10	DOE ON 12/31/11		0.720	
(4)						
(5)						
(6)	-					
(7) (8)			-			
(9)			-	<u></u>		
(10)				-		
			· ·			
County arounded by borrows			Diviness of lean			
Security provided by borrower (1) BUSINESS ASSETS			Purpose of loan			
2) REAL PROPER						
(3)						
(4)						
(5) (6)		-				
(7)		· · · · · · · · · · · · · · · · · · ·				
(8)						
9)	· · · · · · · · · · · · · · · · · · ·					
10)						
······································			Balance due at	Pa	lanco duo et	
Consideration furnished by lender			beginning of year		Balance due at end of year	
(1)			8,922		116,051	
2) ACQUIRE LAND			20,000		10,652	
(3) 4)						
5)						
6)						
7)						
8)						
9)			+			

126,703

28,922

Wood River Land Trust Program Achievements 4/1/2010 – 3/31/2011

River Health and Restoration:

The next phase of the Croy Creek Wetlands and Boardwalk, begun in July, is the construction of a 550 foot boardwalk along the riparian area. There will be bilingual interpretive signage along the way depicting the area's flora and fauna and explaining the delicate balance of the wetlands ecosystem. Visitors will enjoy an up-close wildlife experience with minimal impact to the wetland habitat.

As part of its long-term strategy, the Land Trust seeks to balance the public benefits of experiencing nature with the benefits of healthy riparian and wildlife habitat. The wetlands area has already become an outdoor classroom for Wood River Valley children and CSI students. With the completion of the boardwalk this "classroom" will become even more beneficial. In addition, if promoted correctly, the boardwalk and other Land Trust protected properties can be an economic nest egg to our local economy.

Third year of Trout Friendly Lawn program, an educational and proactive program addressing how local yard care impacts the health of the Big Wood River and its fishery. Demonstrations for property owners showcased the efficacy and benefits of using organic non-toxic applications, native plants, and efficient low-impact watering systems and practices to conserve water. Yards that meet certain water conservation and protection requirements are certified as Trout Friendly. Local businesses and other nonprofits partner with the Land Trust. Over 50 lawns and businesses were certified. The program is ongoing.

Project development and outreach for Hulen Meadows Pond project. The project's goal is riparian and river area restoration and improvement of public recreational opportunities. Surveying and floodplain analysis was conducted and we completed the study for the hydrological and restoration work, flood plain analysis, project analysis, mapping, topographic assessments, initial consultant reviews, approval by the City of Ketchum and legal consultation for stream restoration, flood plain analysis and project analysis which needed to be completed prior to the on-the-ground implementation of any restoration work. This preliminary work was completed in February 2010. Presently the BLM has reviewed our application for a Recreation and Public Purposes lease on the 205 acres on the local and regional levels. It has been approved at these two lower bureaucratic levels and sent to the BLM offices in Washington, DC awaiting final approval tentatively set for March 2012.

The Wood River Land Trust has been working to reestablish year-round stream flow in the river channel below Magic Reservoir dam. The project's work has primarily consisted of the negotiation with the Big Wood Canal company to consider the release of water year-round in order to reestablish the original river and to also return a fishery and riparian area as close to its historical pristine condition as is possible. Outside of the spring/summer irrigation season, no water is released from the dam and the river becomes a trickle as it is comprised solely of water from various low flow springs. In autumn and winter, shutting off the water can result in a substantial fish kill when stranded fish die

from lack of oxygen or water. This artificial stream flow also disrupts wildlife and normal plant life cycles. The Canal Company agreed to conduct a test flow in the fall of 2011.

Staff organized volunteer work days at riparian/floodplain areas at Boxcar Bend, Howard Preserve, Croy Creek Wetland and Draper Wood River preserves on the Big Wood River, with emphasis on control of noxious weeds.

Land Stewardship:

Staff monitored all thirty-seven(37) Wood River Land Trust conservation easements encompassing 10,175.59 acres to ensure compliance with individual easement restrictions/language and to note any changes in the property. All monitoring data, such as photopoints, are reported and entered into the permanent record.

Fee lands were also monitored. These Land Trust preserves are maintained in their natural state and/or restored to a healthy landscape. Stewardship staff deals with such ongoing problems as noxious weeds, trash, vehicle incursions, and damaged trails. On the Church Farm property we constructed a cattle fence around the artesian springs and riparian area to avoid riparian damage by grazing cattle. A cattle gap was placed in one area of Willow Creek allowing cattle to water only in this small area and preserving the conservation values and wildlife habitat of the property.

In January the Land Trust staff and volunteers attached fence markers at the Square Lake property. Fence collisions have been shown to cause injury and mortality to sage-grouse and other birds in some areas. Permanent markers can reduce fence strikes by making fence wires more visible.

In March, staff worked on preserve management plans and other stewardship files. (Snow hinders stewardship visits to most properties.)

Land Acquisition/Protection:

In July the Wood River Land Trust acquired the fee simple Timbered Dome property. Located approximately 10 miles west of the town of Arco and just east of Craters of the Moon National Monument. Sagebrush and grasses are the predominant vegetation on the 1,609-acre property. The ranch is bordered by BLM and private lands and is a critical migratory corridor for elk, deer and antelope and recently had a wintering herd of approximately 250 elk and 500 mule deer. Timbered Dome provides year-round habitat for elk, chukar, raptors, pygmy rabbit, mule deer, and migratory songbirds. Most important are the resident Sage Grouse and their leks on and near the property which needed added protection.

In December The Kelly Reservoir Conservation Easement was donated to the Wood River Land Trust. This easement protects wetland and sagebrush-steppe habitat used by many species of migratory birds, waterfowl, and big game animals. Hundreds of sage-grouse have been sighted on the property, in addition to pronghorn and trumpeter

-swans. The property is in the vicinity of the Idaho Department of Fish and Game's Centennial Marsh Wildlife Management area, known for its large expanse of wetlands. These two properties are prominent protected lands within the Camas Prairie near Fairfield, ID.

The conservation easement also protects working agricultural lands on the property. Much of the rangeland is grazed, and cultivated crops include hay and barley. Dr. Ralph Campanale donated this conservation easement as a way to permanently preserve the nature of the property and its state in perpetuity.

The Natural Resources Conservation Service's Conservation Reserve Program assisted the donor in constructing riparian fencing to limit cattle use on Camas, Ryan, and Olson Creeks. The program also installed pipelines and stock watering structures. Fencing is constantly being maintained to provide pastures for grazing.