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Form **990**

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.

2011
Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning and endi	ing		
	neck if	C Name of organization		D Employer identific	ation number
	Addre		1		
	Name	Daily Day and A		91-13	331348
	Initial return		m/suite	E Telephone number	
	Termir				567-9708
	Jated Amend			G Gross receipts \$	2,127,076.
	Jretum Applic tion		1	H(a) Is this a group re	
L	pendir			for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates incl	
II	ax-ex	empt status: X 501(c)(3)	527	, , ,	list. (see instructions)
		e: > www.cdlandtrust.org		H(c) Group exemption	
			L Year		State of legal domicile: WA
	rt I	Summary	P		
			Yre	land and ear	sements for
		conservation purposes.	199	***	
Activities & Governance	2	Check this box if the organization discontinued its operations or disposed.	of more	than 25% of its net as	sets.
Ž	3	Number of voting members of the governing body (Part VI, line 1a)	(1)		16
ğ		Number of independent voting members of the governing body (Part VI, line 30)	2010	4	16
SS S	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	` <i>*</i> ~	5	10
ritie	6	Total number of volunteers (estimate if necessary)		6	110
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7a	0.
⋖ `		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		2,380,099.	1,928,457.
Ž	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	🗀	115,032.	141,804.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,157.	<488.>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,501,288.	2,069,773.
-	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	748,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Š	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		346,337.	<u>365,664.</u>
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
<u>ş</u>	b	Total fundraising expenses (Part IX, column (D), line 25) 103,756	<u>. </u>		
Ú)	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		831,824.	<u>351,649.</u>
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	1,178,161.	1,465,313.
	19	Revenue less expenses. Subtract line 18 from line 12		1,323,127.	604,460.
} Net Assets or Fund Balances	1		Ве	ginning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)		15,118,612.	15,568,059.
est Gegat	21	Total liabilities (Part X, line 26)		32,288.	29,116.
		Net assets or fund balances. Subtract line 21 from line 20		15,086,324.	15,538,943.
	art II	Signature Block			
		alties of perjury, I declare that I have examined this return including accompanying schedules and			y knowledge and belief, it is
®true	, corre	ct, and complete. Declaration of prepared (other than physicer) is based on all information of which	preparei		10 2011
		Signature of officer		Date	10, 2012
≒ Sig	n			Date	
A He	re	Robert Bugert, Executive Director Type or print name and title			
Her William Pai			1	Date / Check	PTIN
急		Print/Type preparer's name Kristine Loomis. CPA Preparer's signature CPA	. /	/ /	
🌠 Pai	٥			1012 - Facil-enthing	# P00367871
·	parer	Firm's name Cordell, Neher & Company, P.L.L.C	<u> </u>	Firm's EIN	91-0950793
247 U86	Only	Firm's address P.O. Box 3068		Dh/	ENOV 663 1661
		Wenatchee, WA 98807-3068		Phone no. (509) 663-1661
<u>Ma</u>	y the	IRS discuss this return with the preparer shown above? (see instructions)			X Yes No Form 990 (2011)

		ouglas Land Trust	91-1331348 Pag	ge 2
Par	t III Statement of Program Servi	ce Accomplishments	,	
	Check if Schedule O contains a respective of the contains o			
1	Briefly describe the organization's mission:			
		our water, and our way of life		
		<u>ation, partnerships, stewardsh</u>	ip, and well	
	planned growth.			
				<u>.</u>
2	Did the organization undertake any signific	ant program services during the year which were not listed o	n	
	the prior Form 990 or 990-EZ?		· · · · Yes X	No
	If "Yes," describe these new services on Se			
3	Did the organization cease conducting, or	make significant changes in how it conducts, any program se	ervices? Tes X	No
	If "Yes," describe these changes on Sched	-		
4		e accomplishments for each of its three largest program sen	vices, as measured by expenses.	
		ns and section 4947(a)(1) trusts are required to report the an		
	others, the total expenses, and revenue, if		•	
4a) (Revenue \$)
		sements for conservation purpo		′
	to agazzo zana ane on			-
41-) /-	
4b	(Code) (Expenses \$	Including grants of \$) (Revenue \$	— '
	<u> </u>			
			-	
				
4c	(Code:) (Expenses \$	including grants of \$	_) (Revenue \$	<u> </u>
4d	Other program services (Describe in Sche	dule O.)		
	(Expenses \$	including grants of \$) (Revenue \$		
4 0	Total program service expenses ▶	1,253,206.		
			Form 990 (2	2011)

	·		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			
	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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
Ü	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	•		
9	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 temporarily restricted endowments, permanent	-		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		x	
		10		
11	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.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а			v	
_	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445	x	
_	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	11b		\vdash
C		444		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_
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	أممما	X	Ì
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110	\vdash	_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	40-	<u>.</u>	
	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	<u> </u>	
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	4.04	•	v
40		12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	├—	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	\vdash	
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$10,000			1
	or more? If "Yes," complete Schedule F, Parts I and IV	145]	X
46	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	\vdash	-
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	4.5	İ	X
40	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	 	A
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	40	•	X
4-	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u> </u>
17		47		X
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	 	<u> </u>
18		40		x
40	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	 	^
19	· · · · · · · · · · · · · · · · · · ·	40		X
^	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19	\vdash	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b	 	<u> </u>
	11 1 65 TO III 10 2 COA, OLU TITO OLYGUILLAUDIT ALLACTI A COPY OLITS AUDITOU III ALLACTICALISTA III III I I I I I I I I I I I I I I I		990	2011

	· ·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	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			
	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		
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 year, and			
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	40.0		
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		}	
	of any of these persons? If "Yes," complete Schedule L, Part III	27	1	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	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 conservation			
	contributions? If "Yes," complete Schedule M	30	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		
	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			
	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?			ļ
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	ļ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		ļ	
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	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	<u> </u>	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	<u> </u>

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Par				
	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	X	
ο-	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
28				ĺ
	, , , , , , , , , , , , , , , , , , , ,	2b	X	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20	Λ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	٥-		v
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		├─
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	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 Accounts.			
5 a		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	•	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	Ĺ	ļ
7	Organizations that may receive deductible contributions under section 170(c).			1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	if "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			}
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
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 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization 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 organization, have excess business holdings 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		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
ε	Initiation fees and capital contributions included on Part VIII, line 12	}	Į	
b	One was into the first and a Figure 200. Doct VIII. then 40, for public upon of club faculting			1
11	Section 501(c)(12) organizations. Enter:			
ε	Out of the same from the same and beauth added.			
t	Constitution of the second of	1		ł
	amounts due or received from them.)		Ì	
12:	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		1
	Is the organization licensed to issue qualified health plans in more than one state?	13a		T
•	Note. See the instructions for additional information the organization must report on Schedule O.		1	
	Enter the amount of reserves the organization is required to maintain by the states in which the		1	1
•	organization is licensed to issue qualified health plans			1
2	Enter the amount of reserves on hand	1		1
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	X
	of If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1
			990	(2011)

Form 990 (2011) Chelan-Douglas Land Trust 91-1331348 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. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 16 1a Enter the number of voting members of the governing body at the end of the tax year 18 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 X Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 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 **b** 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 with a X taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **►WA** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

98807

<u> Sharon Lunz - 509-667-9708</u> P.O. Box 4461, Wenatchee, WA

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

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A) Name and Title	(B) Average hours per week	box,	not ci unle:	(C Posi heck r ss per d a di	tion nore son :	than s	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	individual drustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Andy Dappen	7.50	4		X				0.	0.	0.
President	7.50	Λ	_	^		-	-	0.	0.	<u> </u>
(2) Dennis Garrity	10.00	v		x			ĺ	0.	0.	0.
Vice President	10.00	Α		Α		-	├-	<u> </u>		<u> </u>
(3) Peter Bauer	5.00	x		x		1	Ì	0.	0.	0.
Treasurer	3.00	Λ		Λ	\vdash	├	├-	<u> </u>		0.
(4) Jean Speidel	10.00	x		x	ļ			0.	0.	0.
Secretary	10.00	▞	├	Δ	-		1			<u> </u>
(5) Susan Ballinger	7.50	x						0.	0.	0.
Board Member	7.50	 ^	-	\vdash	\vdash		\vdash	•		•
(6) Paul Hessburg	10.00	x						0.	0.	0.
Board Member (7) Anne Hessburg	10.00			 	-	<u> </u>	┢	<u> </u>		
(7) Anne Hessburg Board Member	2.50	x						0.	0.	0.
(8) Gene Kupferman		 	\vdash	┢		T	T			
Board Member	5.00	X		ļ			Ĭ	0.	0.	0.
(9) Kim Lohse		1					1			
Board Member	2.50	X				ļ		0.	0.	0.
(10) Steve Milner			Ī							
Board Member	5.00	X	ŀ					0.	0.	0.
(11) Charlie Naismith				Г			Г			ļ
Board Member	7.50	X	ļ	Ì]			0.	0.	0.
(12) Robert Ogburn			Γ				ļ			
Board Member	5.00	X	<u> </u>	<u> </u>			1_	0.	0.	0.
(13) Geordie Romer										
Board Member	5.00	X	L	<u> </u>	_	<u> </u>	$oldsymbol{\perp}$	0.	0.	0.
(14) Tina Scull					İ					_
Board Member	2.50	X	↓_	<u> </u>	_	1	┶	0.	0.	0.
(15) Chris Stahler			1						_	_
Board Member	2.50	X	_	-	↓_	_	\downarrow	0.	0.	0.
(16) Hans Van Someren Greve			1				1			
Board Member	2.50	X	↓_	┼	\vdash	+	+	0.	0.	0.
(17) Robert Bugert	40.00							BC 504		7 004
Executive Director	40.00		<u> </u>	X	1		ļ	76,504.	0.	7,234. Form 990 (2011)

(A)

(B)

(C)

(D)

Name and title		Average hours per week	box	not ci , unles cer an	ss per	tion more rson i	than d is boti	h an	Reportable compensation from	Reportable compensation from related		stimate mount other	
			Individual trustee or derector	Institutional frustee	Опісег	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org an	npensa from th ganizat nd relat janizati	e tion ted
,	Sharon Lunz	32.00			x				54,250.	0		7 2	34.
Comm	unications Director	32.00							54,250.	<u> </u>		1,4	34.
			-		\ 						-		
							į				-		
					_		-				<u> </u>		
					_	-	-				-		
<u></u>	Sub-total		<u>l</u>		1	<u> </u>	Ļ	1	130,754.	0	 	L4,4	68.
	Total from continuation sheets to Pa	art VII, Section A							0.	Ō			0.
<u>d</u>		· · · · · · · · · · · · · · · · · · ·					<u> </u>		130,754.		<u> </u>	L4,4	168.
2	Total number of individuals (including compensation from the organization		hose	e liste	ed a	bov	e) w	ho r	eceived more than \$100),000 of reportable		1	0
3	Did the organization list any former of line 1a? If "Yes," complete Schedule J			9 0 , ke	ey e	mpk	oyee	, or		mployee on	3	Yes	No X
4	For any individual listed on line 1a, is t	he sum of reportal	ole c	omp									
	and related organizations greater than										4	+	X
5	Did any person listed on line 1a receiv rendered to the organization? If "Yes,"								ted organization or indiv	idual for services	5		x
Sec	tion B. Independent Contractors												
1	Complete this table for your five highe the organization. Report compensation	-									nsation	from	
	(A Name and bus	.)							(B) Description of			(C) ensatio	nn.
	Name and bus	illess address	N	ON	<u> </u>				Description of s	561 VICOS		9113611	<u> </u>
			····										
													·
2	Total number of independent contract \$100,000 of compensation from the contract to the contrac	_	not	limit	ed to	o th	ose I O	liste	d above) who received r	nore than			
	VISOIOO SI COMPONICATION HON THE C						<u> </u>				For	n 990	(2011)

Statement of Revenue Part VIII (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from business exempt function tax under sections 512, revenue revenue 513, or 514 1a Federated campaigns 36,122. **b** Membership dues 1b Fundraising events 1c C <u>1d</u> Related organizations 601,881 Government grants (contributions) 10 All other contributions, gifts, grants, and 1290454 similar amounts not included above Noncash contributions included in lines 1a-1f \$_ 1928457 h Total, Add lines 1a-1f **Business Code** Program Service All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 87,266. 87,266. other similar amounts) . . . Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 97,421. b Less: cost or other basis 42,883. and sales expenses 54,538. c Gain or (loss) 54,538. 54,538. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 13,932 Part IV, line 18 14,420 b Less: direct expenses <488.> c Net income or (loss) from fundraising events <488. 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d <u>0. 141,316.</u> 2069773 Total revenue. See instructions. Form 990 (2011) 1320**09** 01-23-12

Form 990 (2011) Chelan-Douglas Land Trust
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 n	Check if Schedule O contains a response of include amounts reported on lines 6b,	(A)	(B)	(C) Management and	(D) Fundraising
	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	general expenses	expenses
1	Grants and other assistance to governments and	740 000	740 000		
	organizations in the United States. See Part IV, line 21	748,000.	748,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,	İ			
	organizations, and individuals outside the				
_	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	145,222.	98,228.	23,208.	23,786
	trustees, and key employees Compensation not included above, to disqualified	145,222.	30,220.	23,200.	23,700
6	•				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	170,472.	115,307.	27,243.	27,922.
7 8	Other salaries and wages Pension plan accruals and contributions (include	110,78140	113,307.	41,4231	41,784
8	· · · · · · · · · · · · · · · · · · ·	1,081.	731.	173.	177.
9	section 401(k) and section 403(b) employer contributions) Other employee benefits	22,417.	15,163.	3,582.	3,672
10	Payroll taxes	26,472.	17,906.	4,230.	4,336
11	Fees for services (non-employees):	20/2/21	2.7500.	2,2001	
''a	Management	755.	755.		
ь	Legal	8,702.	8,702.		
G	Accounting	21,412.	14,483.	3,422.	3,507
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	50,497.	34,156.	8,070.	8,271
g	Other	123,762.	83,713.	19,778.	20,271
12	Advertising and promotion				
13	Office expenses.	19,464.	13,165.	3,111.	3,188
14	Information technology	6,221.	4,208.	994.	1,019
15	Royalties				
16	Occupancy	3,790.	2,808.	485.	497
17	Travel	6,263.	4,236.	1,001.	1,026
18	Payments of travel or entertainment expenses	ļ			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,266.	1,533.	362.	371
20	Interest				
21	Payments to affiliates	20 515	12 265		2 200
22	Depreciation, depletion, and amortization	20,646.	13,965.	3,299.	3,382
23	Insurance	7,118.		7,118.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	77-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	30,313.	30,313.		
b	G	17,450.	17,450.		
c	Description to the same of	13,569.	13,569.		
d	Tides and an and assessment	3,288.	3,288.		
e	A.N. 41	16,133.	11,527.	2,275.	2,331
25	Total functional expenses. Add lines 1 through 24e	1,465,313.	1,253,206.	108,351.	103,756
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Par	t X	Balance Sheet				
	`			(A) Beginning of year		(B) End of year
$\overline{}$	1	Cash - non-interest-bearing		115,076.	1	109,720.
	2	Savings and temporary cash investments		290,491.	2	364,345.
	3	Pledges and grants receivable, net	· · · · · · · · · · · · · · · · · · ·	243,531.	3	483,875.
	4	Accounts receivable, net	•		4	
	5	Receivables from current and former officers, di	rectore thistees key			· · -
	9	employees, and highest compensated employee	-			
		of Schedule L	ss. Complete Fait ii		5	
		Receivables from other disqualified persons (as	defined under section			
	6	4958(f)(1)), persons described in section 4958(c				
		employers and sponsoring organizations of section			}	
		employees' beneficiary organizations (see instru	ı		6	
23	-		ctions)		7	
Assets	7	Notes and loans receivable, net			8	
₹	8	Inventories for sale or use		2,262.	9	6,566.
	9	Prepaid expenses and deferred charges		4,402.	-	0,300.
	10a		10a 566,370.			
		basis. Complete Part VI of Schedule D	10a 566,370. 10b 64,807.	514,516.	-0-	501,563.
	ь	•	100 04,007	214,310.	111	301,303.
	11	Investments - publicly traded securities		3,352,932.	12	3,502,186.
	12	Investments - other securities. See Part IV, line	3,334,334.	13	3,302,180.	
	13	Investments - program-related. See Part IV, line		14	· · · · ·	
	14	Intangible assets	10,599,804.	15	10,599,804.	
	15	Other assets. See Part IV, line 11		15,118,612.	16	15,568,059.
	16	Total assets. Add lines 1 through 15 (must equ	ai line 34)	32,288.		29,116.
	17	Accounts payable and accrued expenses		32,200.	18	23,110.
	18	Grants payable		19		
	19	Deferred revenue	•		20	
	20	Tax-exempt bond liabilities		21		
Liabilities	21	Escrow or custodial account liability. Complete Payables to current and former officers, directo				
Ē	22	highest compensated employees, and disqualif				
Ę.			led persons. Complete Fait if		22	
	~	of Schedule L Secured mortgages and notes payable to unrel	ntad third parties		23	
	23	Unsecured notes and loans payable to unrelate			24	-
	24 25	Other liabilities (including federal income tax, pa				
	26	parties, and other liabilities not included on line				
	Ì	Cahadula D	or zay. Complete valence		25	
	26	Total liabilities. Add lines 17 through 25		32,288.	26	29,116.
	20	Organizations that follow SFAS 117, check h	ere and complete	027200	<u> </u>	
₁₀		lines 27 through 29, and lines 33 and 34.				
ğ	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets	•		28	
ă	29	Permanently restricted net assets		· ***	29	
Š	20	Organizations that do not follow SFAS 117, o	heck here			
<u> </u>		complete lines 30 through 34.				
83	30	Capital stock or trust principal, or current funds	0.	30	0.	
SS.	31	Paid-in or capital surplus, or land, building, or e		0.		0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in		15,086,324.	+	15,538,943.
Ž	33	Total net assets or fund balances		15,086,324.	-	15,538,943.
	1	Total liabilities and net assets/fund balances	•	15,118,612.	1	15,568,059.
	34	TOTAL HADIILIAS ALIA HAL ASSALS/IUTIA DAIALICAS				

orm	990 (2011) Chelan-Douglas Land Trust	91-13	31348	Pag	_{1e} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,069	9.7	73.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,46		
3	Revenue less expenses. Subtract line 2 from line 1	3			60.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		15,08		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			41.:
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))		15,53		
	rt XII Financial Statements and Reporting			- 1 -	
	Check if Schedule O contains a response to any question in this Part XII				
		,		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
-	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	and the state of t		2a		Х
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.		1	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis		•		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	igle Audit			
	Act and OMB Circular A-133?		. За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
		<u> </u>	Form	990 ((2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection

Employer identification number

		Chelan-	Douglas Land	Trus	t				91	-1331	348
Part I	Reason f	or Public Chari	ty Status (All organiz	ations mus	st complete	this part	.) See inst	ructions.			
The organi	zation is not a	private foundation t	pecause it is: (For lines 1	through 1	1, check c	nly one b	ox.)				
1 🔲	A church, cor	vention of churches	, or association of churc	ches descr	nbed in sec	ction 170	(b)(1)(A)(i)	•			
2 🗀	A school desc	cribed in section 17	D(b)(1)(A)(ii). (Attach Scl	hedule E.)							
з 🔲	A hospital or	a cooperative hospit	al service organization o	lescnbed i	n section	170(b)(1)(A)(iii).				
4	A medical res	earch organization o	perated in conjunction	with a hos	pital descri	bed in se	ction 170	b)(1)(A)(ii	i). Enter th	ne hospital	's name,
	city, and state										
5	•	•	penefit of a college or un	niversity ov	vned or op	erated by	a governr	nental uni	t describe	d in	
	section 170(b)(1)(A)(Iv). (Comple	te Part II.)								
6	A federal, sta	te, or local governme	ent or governmental und	described	in section	n 170(b)(1)(A)(v).				
7 X	An organization	on that normally reco	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general p	ublic desc	nbed in
$\overline{}$	-	b)(1)(A)(vi), (Complet									
8	•		ection 170(b)(1)(A)(vi). (
9 📖	_	-	eives: (1) more than 33 1							-	
			nctions - subject to certa								
			exable income (less sect	tion 511 ta	x) from bus	sinesses a	acquired b	y the orga	inization a	fter June 3	10, 1975.
—		509(a)(2). (Complete	•	- A & b-11		· •• ·	- 5006-14				
10	_	•	perated exclusively to test perated exclusively for the	•	•			•	. aut tha		
11	=	= :	tions described in section						-		
	•	• • •	organization and comple		-		.). O oo se c		адој. Опо	CK IIIO DOX	ulat
	a Type I		-	_	e III - Func		tegrated		a	Type III - 0	Other
•	• •		t the organization is not	• •		-	•	more dis			
		•	han one or more publicly		•	•	•				
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	111			
	supporting or	rganization, check th	nis box								\square
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing per	sons?		
	(i) A perso	n who directly or ınd	irectly controls, either al	one or tog	ether with	persons o	lescnbed i	n (ii) and ((iii) below,		Yes No
	the gov	erning body of the si	upported organization?				••			11g(i)	
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)	
	` '	•	person described in (i)	• •						11g(iii)	<u> </u>
h	Provide the f	ollowing information	about the supported or	ganization	(s).						
			(III) Type of	k.		4.3 D.d.		(14)	, the		
	of supported	(ii) EIN	organization	in col (1) h	organization sted in your	organizat	ion in col.	(vi) l organizati	on in col.)		nount of
org	anization	1	(described on lines 1-9		document?		r support?	(i) organiz U.S	zea in the 5.7	sup	port
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No		
							1				***
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		1	}					1			
<u>Total</u>		<u> </u>	<u> </u>		l	<u> </u>	L	<u> </u>	لــــــــــــــــــــــــــــــــــــــ		

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

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Chelan-Douglas Land Trust 91-1331348 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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						
aler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	910,258.	5,789,114,	528,620.	2,380,099.	1,928,457.	11,536,548,
2	Tax revenues levied for the organ-						
	ızation's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to			1			
	the organization without charge						
4	Total. Add lines 1 through 3	910,258.	5,789,114.	528,620.	2,380,099.	1,928,457.	11,536,548.
5	The portion of total contributions						
	by each person (other than a					· i	
	governmental unit or publicly				i		
	supported organization) included						
	on line 1 that exceeds 2% of the					İ	
	amount shown on line 11,						
	column (f)]					5,074,206,
	Public support. Subtract line 5 from line 4					·· <u>-</u>	6,462,342.
	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	910,258.	5,789,114.	528,620.	2,380,099,	1,928,457.	11,536,548.
8	Gross income from interest,	ļ					
	dividends, payments received on						
	securities loans, rents, royalties	50 162	07 202	66 700	60 010	97 266	270 626
_	and income from similar sources	50,162.	97,392.	66,798.	69,018.	0/,200.	370,636.
a	Net income from unrelated business						
	activities, whether or not the						
40	Other income. Do not include gain	<u> </u>					
IV	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)		ļ	ļ			
11	Total support. Add lines 7 through 10						11,907,184,
	Gross receipts from related activities	etc (see instruction	Ous)			12	78,418.
	First five years. If the Form 990 is fo			rd fourth or fifth to			7074108
	organization, check this box and sto	-	5 mot, 5000ma, tim	o, 1001111, 01 11111111	an your as a social	00 .(0)(0)	▶□
Se	ction C. Computation of Pub	lic Support Pe	rcentage			·	· · · · · · · · · · · · · · · · · · ·
_	Public support percentage for 2011 (column (f))		14	54.27 %
	Public support percentage from 2010	• • • • • • • • • • • • • • • • • • • •				15	46.30 %
	33 1/3% support test - 2011. If the	-			14 is 33 1/3% or n		
	stop here. The organization qualifies	~					> X
ŧ	33 1/3% support test - 2010. If the						nis box
	and stop here. The organization qua	=					▶□
17:	10% -facts-and-circumstances tes	at - 2011. If the org	anization did not	check a box on line	9 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	nces" test, check t	his box and stop h	nere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"			•	·		▶□
ı	10% -facts-and-circumstances tes		•		•	17a, and line 15 is	
	more, and if the organization meets t	=					
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a publi	cly supported orga	anization	▶□
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box a	and see instruction	s D
					Sche	edule A (Form 990	or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 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)

Section A. Public Support						
alendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not	1					ļ
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						t.
are not an unrelated trade or bus-	ļ	ì		ì		
iness under section 513		 		<u> </u>		
4 Tax revenues levied for the organ-						1
ization's benefit and either paid to		1				
or expended on its behalf				<u> </u>	<u> </u>	
5 The value of services or facilities		1]	1		
furnished by a governmental unit to	[İ	-	
the organization without charge				L		
6 Total, Add lines 1 through 5						
7a Amounts included on lines 1, 2, and		 ''		1	1	
3 received from disqualified persons		1				
b Amounts included on lines 2 and 3 received		 	 	-	 	†
from other than disqualified persons that		· I		1		
exceed the greater of \$5,000 or 1% of the		1				
amount on line 13 for the year				+		
c Add lines 7a and 7b			ļ	-		<u> </u>
8 Public support (Subtract line 7c from line 6)	L	1	<u>L</u>	<u> </u>	1	L
Section B. Total Support			_	-1		
Calendar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6			1	1		1
10a Gross income from interest,						
dividends, payments received on			1			
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income			1			
(less section 511 taxes) from businesses			1			
acquired after June 30, 1975	1]			
•		 	 	 	 	
c Add lines 10a and 10b		- 	+	+	 	
11 Net income from unrelated business activities not included in line 10b,	1	Į.		1		
whether or not the business is						
regularly carned on		<u> </u>		 		
12 Other income. Do not include gain				ł		
or loss from the sale of capital assets (Explain in Part IV.)				1		ļ
13 Total support (Add lines 9, 10c, 11, and 12)						1
14 First five years. If the Form 990 is fo	or the organization	n's first, second, th	ird, fourth, or fifth	tax year as a sect	ion 501(c)(3) organi	ization,
check this box and stop here .		·			_ 	▶□
Section C. Computation of Pub	lic Support P	ercentage				
15 Public support percentage for 2011			column (fi)		15	
16 Public support percentage from 201				*****	16	· · · · · · · · · · · · · · · · · · ·
Section D. Computation of Inve				·····	·· ·	
					17	
17 Investment income percentage for 2			ə 13, column (1))			
18 Investment income percentage from					18	17 is not
19a 33 1/3% support tests - 2011. If th						17 IS NOT
more than 33 1/3%, check this box						▶∟
b 33 1/3% support tests - 2010. If th						
line 18 is not more than 33 1/3%, ch		•	_			n ▶ <u>Ļ</u>
20 Private foundation. If the organizat	ion did not check	a box on line 14, 1	9a, or 19b, check	this box and see i	nstructions	<u> </u>
132023 01-24-12				Se	chedule A (Form 9	90 or 990-EZ) 2

SCHEDULE D

(Form 990)

Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990. ➤ See separate instructions.

Inspection **Employer identification number**

	Chelan-Douglas Land Trust	91-1331348
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds
-	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	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 confe	
	impermissible private benefit?	Yes No
Par		
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•	Preservation of land for public use (e.g., recreation or education)	lly important land area
	X Protection of natural habitat Preservation of a certified h	•
	X Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation easement on the last
_	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a 10
ь	Total acreage restricted by conservation easements	2b 2,513.00
c	Number of conservation easements on a certified historic structure included in (a)	2c 0
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
_	listed in the National Register	2d 0
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organic	
	year ▶ 1	
4	Number of states where property subject to conservation easement is located 1	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
_	violations, and enforcement of the conservation easements it holds?	X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(
	and section 170(h)(4)(B)(ii)?	X Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	
	conservation easements.	•
Pa	rt 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.	
18	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	f public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes these items.	
ь	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 se	ervice, 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	> \$
2	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:	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
b	Assets included in Form 990, Part X	\$
	Assets included in Form 556, Fare A	· · ·

		Douglas Lar					1331348	
Par	t III Organizations Maintaining C							
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	following that	are a si	gnificant use of	rts collection r	tems
	(check all that apply):							
а	Public exhibition	d		nange progra	ms			
b	Scholarly research	8	Other					
C	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	ne organizatio	n's exe	mpt purpose in l	Part XIV.	
5	During the year, did the organization solicit or	receive donations o	f art, historical treas	sures, or othe	r simılar	assets		_
	to be sold to raise funds rather than to be ma						Yes	No_
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par		te if the organization	n answered "	Yes" to	Form 990, Part	IV, line 9, or	
10	Is the organization an agent, trustee, custodia		ary for contribution	s or other ass	ets not	included		
ıa	on Form 990, Part X?		ary for continuous	0 0, 0,,,0, 40,			Yes	□ No
_	If "Yes," explain the arrangement in Part XIV	and complete the following	lowing table:			•		
b	ii 165, explaintile allangement in Fart XIV	and complete the fol	owing table.				Amount	
_	Beginning balance					1c	Anount	
C		•		•		1d		
đ	Additions during the year			•				
•	Distributions during the year			•		16		
0-	Ending balance Did the organization include an amount on Fo			•	•		Yes	No
2a	_				••		168	NO
	t V Endowment Funds. Complete if		wered "Vee" to For	m 990 Part	V line 1	0		
· ai	E T LINGUATION COMPLETE	(a) Current year		(c) Two year		(d) Three years b	ack (a) Four V	eare back
	Parincipa of year balance		(b) Prior year					Sais Dack
1a	Beginning of year balance	3,018,178,	2,517,180.	1,731	_	1,803,6		
D	Contributions	36,216,	189,240.		037.	532,0	I -	
C	Net investment earnings, gains, and losses	2,736.	350,685,	550	333.	<574.7	19.5	
d	Grants or scholarships	108,000,					<u> </u>	
е	Other expenditures for facilities				-			
_	and programs							
f	Administrative expenses	43,479.	38,927.		987.	29,1		
9	End of year balance	2,905,651,	3,018,178,		180.	1,731,7	97.	
2	Provide the estimated percentage of the curr	rent year end balance		i)) held as:				
a	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
C	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c should be a sh	· ·						
3 a	Are there endowment funds not in the posse	ession of the organiza	ition that are held a	nd administe	red for t	he organization	[-	
	by:							es No
	(i) unrelated organizations							X
	(ii) related organizations						. 3a(ii)	<u> </u>
b		-			•		3b	
4	Describe in Part XIV the intended uses of the			· · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
Pa	rt VI Land, Buildings, and Equipm		···	1				
	Description of property	(a) Cost or of	1	or other		ccumulated	(d) Book	value
		basis (investn		(other)	Ge	preciation	3.5	
1a	Land			6,590.		00 100		<u>,590.</u>
Ь			4.7	1,886.	·····	22,183.	449	<u>,703.</u>
C	Leasehold improvements				 	40 604		050
d		•	5	7,894.		42,624.	15	,270.
	Other	<u>. l </u>	<u> </u>					
<u>Tota</u>	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line 1	10(c).)			<u> 501</u>	<u>,563.</u>

Schedule D (Form 990) 2011

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's flability for uncertain tax positions under 2. FIN 48 (ASC 740).

132053 01-23-12

	t XI Reconciliation of Change in Net Assets from Form 990 to A	Audited F	inancial State	ment	FOOTO Page -
		ruuiteu i	1 1	1110111	2,069,773.
1	Total revenue (Form 990, Part VIII, column (A), line 12)		. 1		1,465,313.
2	Total expenses (Form 990, Part IX, column (A), line 25)		. 2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		604,460. <151,841.>
4	Net unrealized gains (losses) on investments	•	4		<u><131'0#1'</u> >
5	Donated services and use of facilities		5		
6	Investment expenses		<u>6</u>		
7	Prior period adjustments	•	· 7		
8	Other (Describe in Part XIV.)	•	8		.1 [1 0.41 .
9	Total adjustments (net). Add lines 4 through 8		9		<u><151,841.</u> >
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	9	10	oturn	452,619.
	t XII Reconciliation of Revenue per Audited Financial Statemen	LS WILLI	neveriue per n	1	1,962,078.
1	Total revenue, gains, and other support per audited financial statements	•	• •	1	1,304,070.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	.151 040		
а	Net unrealized gains on investments	2a	<151,842.	P	
Ь	Donated services and use of facilities	2b		1	
C	Recoveries of prior year grants	2c	···	1 1	
d	• • • • • • • • • • • • • • • • • • • •	2d		1 .	4151 049 5
0	Add lines 2a through 2d			20	<151,842.> 2,113,920.
3	Subtract line 2e from line 1			3	2,113,920.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1			
а	•	4a	.44 147	-	
b	•	4b	<44,147.	7 I	.44 147 .
C	• • • • • • • • • • • • • • • • • • • •		•	4c	<44,147.>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	\A/idb	Evpoposo	5 Pote	2,069,773.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	nics with	Exbauses bei	netu	
1	Total expenses and losses per audited financial statements	•	•	 1	1,509,460.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 _ 1		1	
а	*****	2a		-	
b	Prior year adjustments	2b		1	
C		2c	44,147.	1	
d	• • • • • • • • • • • • • • • • • • • •	2d	44,14/	7 1	44 147
e				2е	44,147. 1,465,313.
3	Subtract line 2e from line 1			3	1,405,513.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	L. I			
8	Investment expenses not included on Form 990, Part VIII, line 7b	48		-l	
t	,,	4b		┥╻.	0.
	Add lines 4a and 4b	• •	•	4c	1,465,313.
	Total expenses. Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.) Int XIV Supplemental Information		·	5	1,403,313.
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	linge 1a ai	nd 4: Part IV lines 1	lb and	2h: Part V. line 4: Part
	ne 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl				
	rt X, Line 2: The Trust has adopted the pro				
Fa	It A, lille 2. The Hubt has adopted the pro	,,,,,,	<u> 02 11.01</u>		
71	0-10. Management has evaluated the Trust's	tax p	ositions a	and	concluded
/ 3	U IV. Management hab evaluated one man	vail p	<u> </u>		0001.000
+ h	e Trust has taken no uncertain tax position	ns red	uiring ad	iust	ment to the
<u>L1.</u>	e ilust has taken no uncertain tax position	<u></u>	uzzzny uu	<i>,</i>	
fi	nancial statements to comply with these pro	origio	ns. With 1	Few	exceptions.
11	Hancial Blatements to comply with these pro		1101 112011 1		<u> </u>
th	e Trust is no longer subject to income tax	exami	nations by	<u>, U.</u>	S. Federal
ta	x authorities for the years before 2008.				
_	WIT lime the Other Addustrates.				
<u> P</u> 6	rt XII, Line 4b - Other Adjustments:			Cake	dule D (Form 990) 2011
				JUNE	uule D (FULII) 88U) 2U l l

Schedule D (Form 990) 2011 Chelan-Douglas Land Trust	91-1331348 Page 5
Part XIV Supplemental Information (continued)	
Fundraising expenses	-14,421.
In-kind expenses	-29,726.
Total to Schedule D, Part XII, Line 4b	-44,147.
Total to beneatte by rate Mili Bine 40	33,137.
Part XIII, Line 2d - Other Adjustments:	
In-kind expenses	29,726.
Fundraising expenses	14,421.
Total to Schedule D, Part XIII, Line 2d	44,147.
	

50

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

	Chelan-Douglas Land Trust	OFCTCCT_TC
Part	Part I General Information on Grants and Assistance	
-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	; [
ĊŢ	criteria used to award the grants or assistance?	\A_\ Yes \ No
8	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	
Part II	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	e 21, for any
	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	•

1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of valuation (book, respiration of government or gover	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Department of Natural Resources							
PO Box 47041	1772103-101		500 000	0	Fair Market 0.Value		Purchase of Saddle Rock
OLYMPIA, WA. 2009							
Icicle Fund					2		Purchase of Dally Wilson
PO Box 2025	91-1943099	٠	248,000.	0	0.Value		easements
1							
		tt ci betail accitorings	line 1 table				2.
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 laure 	and government or	ganizations iisteu iii u		:			

Schedule I (Form 990) (2011)

Page 2

91-1331348

Schedule I (Form 990) (2011) Chelan-Douglas Land Trust

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III Can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
		ł			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ide the informatio	n required in Part I,	line 2, and any other	additional information.	
•					
132102 01-27-12					Schedule I (Form 990) (2011)

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.

2011

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

	Che	elan-Do	uglas	Land	Trust			<u></u> 9	1-13	3134	8	
			=		· -	n 501(c)(4) organizatio	• •					
Co	implete if the orga	anization ansv	vered "Yes	on Form	990, Part IV,	line 25a or 25b, or Fo	rm 990-EZ	, Part	V, line 40	<u>b.</u>	1	
1	(a) Name of dis	squalified pers	on		(b) Description of transaction						ected?	
		<u> </u>									Yes	No
											-	
												-
					-							
				<u></u>								
	•	osed on the o	organization	n manager	s or disqualifi	ed persons during the	year und	ler				
section 49												
3 Enter the a	amount of tax, if a	iny, on line 2, a	above, rein	noursea by	tne organiza	ition .			▶ \$			
Part II Lo	oans to and/o	or From Int	erested	Persons	3.		_				-	
Cc	mplete if the orga	anization ansv	vered "Yes	on Form	990, Part IV,	line 26, or Form 990-E	Z, Part V	line 38				
	of interested		o or from	(c) Origi	nal principal	(d) Balance due	(e)		(f) App	oroved ard or		ntten
person a	and purpose	the organ		- a	Hount		defa			rttee?_		
		То	From				Yes	No	Yes	No	Yes	_No
		 	<u> </u>			<u> </u>	 		 			
		 		 					 			
		 				<u> </u>	 		<u> </u>	ļ 	<u> </u>	
				 					ļ			
							1 1		├──		-	
				 		 			 -	_	-	
Total					> \$		1					<u> </u>
Part III G	rants or Assi	stance Be	nefiting	Interest	ed Person	S ,						
	omplete if the org		wered "Yes					_				
(a) N	ame of interested	person		(b) Relat		een interested person rganization	and	Ì		iount an assistar	id type o	f
				 -		<u></u>		-				
					_			1	,			
							-					
								 				
						·-		+				<u> </u>
			+		· 			+				

Schedule L (Form 990 or 990-EZ) 2011

91-1331348 Page 2

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

2011
Open to Public Inspection

Name of the organization

Chelan-Douglas Land Trust

Employer identification number 91-1331348

Form 990, Part VI, Section A, line 2: Anne Hessburg is the daughter of Paul Hessburg 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 wavs 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 Schedule O (Form 990 or 990-EZ) (2011) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132211 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization • Chelan-Douglas Land Trust	Employer identification number 91-1331348
compensation on an annual basis. Meeting minutes reflect	all discussions
and decisions.	
Form 990, Part VI, Section C, Line 19: All governing docu	ments, policies
(including conflict of interest) and financial statements	are available to
the public upon request.	
Form 990, Part XI, line 5, Changes in Net Assets:	
Net unrealized losses on investments:	-151,841.
······································	.

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you a	re filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			ightharpoons	
	re filing for an Additional (Not Automatic) 3-Month Ex			this form).		· —	
-	emplete Part II unless you have already been granted a		• • • • • • •	•	m 8868.		
	c filing (e-file). You can electronically file Form 8868 if y		· ·	•		corporation	
	o file Form 990-T), or an additional (not automatic) 3-moi			•		•	
	file any of the forms listed in Part I or Part II with the exc						
	Benefit Contracts, which must be sent to the IRS in pap	•					
	irs.gov/efile and click on e-file for Charities & Nonprofits		(300 mandetions). For more details	011 ti 10 010C	tronic illing of	una ioim,	
Part I	Automatic 3-Month Extension of Time		ubmit original (no copies ne	eded)			
	tion required to file Form 990-T and requesting an autor						
Part I only		natio o mo	THE SALUTISION - CHOCK THIS BOX AND	complete		_ [
All other c	, corporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and ti	rusts must use Form 7004 to reques	st an exten	sion of time	🖊 🗀	
Type or	Name of exempt organization or other filer, see instru	ctions	· · · · · · · · · · · · · · · · · · ·	Employer	identification	number (EIN) or	
	Name of exempt organization of other mer, see institu	Clions.		Linbioyer	Identification	number (Env) or	
print	Chelan-Douglas Land Trust			TXT	91-133	13/8	
File by the		oo inatawa	tione		cunty number		
due date for filing your	Number, street, and room or suite no. If a P.O. box, s P.O. Box 4461	ee manac	tions.	Social se	curity number	(2214)	
return See Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
matructions		oreign add	ress, see instructions.				
	Wenatchee, WA 98807						
F-4 4b	Dakum and Sankha wakum Abak Aban madinakin in San Kil		to analization for each water.			0 1	
Enter the	Return code for the return that this application is for (file	в а ѕерага	te application for each return)				
A 11 41			Lametanatan				
Applicati	on	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990		02	Form 1041-A			08	
Form 990		01	Form 4720			09	
Form 990		04	Form 5227			10	
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	-T (trust other than above)	06	Form 8870			12	
	Sharon Lunz						
	ooks are in the care of P.O. Box 4461	- Wen					
Teleph	none No. ► 509-667-9708		FAX No.				
	organization does not have an office or place of busines					. ▶ 🗀	
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole gr	oup, check this	
box 🕨	. If it is for part of the group, check this box	and atta	ach a list with the names and EINs o	f all memb	ers the extens	sion is for.	
1 l re	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until			
	August 15, 2012 , to file the exemp	ot organiza	ition return for the organization nam	ed above.	The extension	n	
ıs f	or the organization's return for:						
	X calendar year 2011 or						
	tax year beginning	, an	nd ending				
· ·							
2 f t	he tax year entered in line 1 is for less than 12 months, o	check reas	ion: Initial return	Final retur	n		
	Change in accounting period						
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax, less any		 		
	nrefundable credits. See instructions.	, -	,	3a	s	0.	
_	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
	timated tax payments made. Include any prior year over			3b	\$	0.	
	lance due, Subtract line 3b from line 3a. Include your page						
	using EFTPS (Electronic Federal Tax Payment System).			3c		_0.	
	If you are going to make an electronic fund withdrawal				FO for naves		
	For Privacy Act and Paperwork Reduction Act Notice			Siiii 307 3		368 (Rev. 1-2012)	
LHA [FOI PITACY ACT AND PAPER WORK NEGLECTION ACT NOTICE	, 200 11131	4040119.		1 01111 00	200 (U.QA. 1.5015)	