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Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

ONTB No 1545 0047

2011

Open to Public Department of the Treasury Internal Revenue Service Inspection The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2011 calendar year, or tax year beginning 2011, and ending D Employer Identification Number Check 'app'rable PCC Farmland Trust 91-2021165 Address chance 1917 First Avenue, Level A #100 E Telephone iumber Name champs Seattle, WA 98101 In hat return (206) 547-9855 for renated Amendes eturn 1,192,584 rights stonger to racing F. Name and address of principal officer Rebecca Sadinsky H(a) is this a group return for affiliates Yes H(b) Are all affiliates included Same As C Above Yes If the lettach a list (see principos) X 120 (c (?) 'as exemp' status) < tinsertine \(\)</p> 4947(a)(1) or Website: > www.pccfarmlandtrust.org H(c) Group excurption number X Corporation | Trus-Form of organization 1999 M State of regal domicile. WA Summary Part 1 Briefly describe the organization's mission or most significant activities The primary purpose of the Trust is to secure, preserve, and steward threatened farmland in the Northwest, to ensure that generations of local farmers productively farm it using sustainable organic growing methods. 2 Check this pox • If the organization discontinued its operations or disposed of more than 25% of its net assets
3 Number of voting members of the governing body (Part VI, line 1a) | 3 | Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 6 50 7a Total unrelated business revenue from Part VIII column (C), line 12 0 7 a b Net unrelated business taxable income from Form 990 T. line 34 Ō. 7 b Prior Year Current Year 8 Contributions and grants (Part VIII ne 1h) 791,000 1,142,252 9 Program service revenue (Part Vill. line 20) 49,598 34.751 10 Investment income (Part VIII), column (A), lines 3, 4, and 7d) 735 - 39 1,949. Other revenue (Part VIII, column (A), lines 5 -257 Total evenue - add lines 8 through 11 (must 801,125 182,687 121 13 Grants and similar amounts paid (Part Yodolumn (A) lines 1 3) 14 Benefits paid to or for members (Part 15 Salaries, other compensation employed -10) 256,544 384,696 16a Professional fundra sing fees (Part IX.) line 11e) b Total fundraising expenses (Fart IX, column D) (Life 2 600. 17 Other expenses (Part IX, column (A) if 278,668 921,517 18 Total expenses. Add lines 13:17 (must equal Part IX: column (A), line 25) 1,306,213. 535,212 19 Revenue less expenses. Subtract line 18 from line 12 -123,526.265,913 Веділлілд of Current Year End of Year Total assets (Part X, line 16) 2,969,199 956,411 21 Total liabilities (Part X, line 26) 400,408 536,722. Net assets or fund balances. Subtract the 21 from the 20 2,556,003 2,432,477. Signature Block Part II Under penalties of perjury, I dec nowledge aimt belief it is true, correct, and have exall ned this leturn including accompanying schedules and statements, and to the best of my than officer) is posed on all information of which preparer has an knowledge. Sign Here 1 STIN Date Judy C. Jones, CPA P00281100 Paid Preparer ► Jones & Associa Use Only 1701 NE 1041128treet Firms EIN - 20-5828888 Seattle, WA 98125-7646 (206) 525-5170 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.



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Form 990 (2011)

	n 990 (2011) FCC FAILLIANG ITUSE	-		aye
Pa	rt IV Checklist of Required Schedules		Yes	No
			162	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		Х
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 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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7	Χ	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
	c 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	11 c		Х
	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	<u> </u>
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	
	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		х
13	Is the organization a school described in section $170(b)(1)(A)(ii)^{9}$ If 'Yes,' complete Schedule E	13	<u> </u>	X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X

20 b

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2011) PCC Farmland Trust
Part IV Checklist of Required Schedules (continued)

	•	. 1	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 It	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 ⁷ 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 employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 8	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer 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		
,	: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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
ŀ	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 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		_X
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)			
ě	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
ł	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V. line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35 a		X
ı	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, Part V, line 2	35b		Х
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		_x_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	1 990 1	(2011)

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	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0		1
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportal (gambling) winnings to prize winners?	ble gaming 1	С	
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	2		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2	b X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			1
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3	a	X
b If 'Yes' has it filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O	3	b	
4a At any time during the calendar year did the organization have an interest in, or a signature or other authorized account in a foreign country (such as a bank account, securities account, or other financial account.)	ority over, a	a	Х
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 Accounts	unts		1
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5	a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	[?] 5	b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5	c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the org	anization 6	a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or not tax deductible?	gifts were 6	ь	
7 Organizations that may receive deductible contributions under section 170(c).			1
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods services provided to the payor?	s and 7		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7		 ^
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was rec		_	
Form 8282?	7	c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra	ct? 7	е	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7	f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8 as required?	899	g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization Form 1098-C?	file a	h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess buildings at any time during the year?	ons. Did the usiness		х
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9	a	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9	b	
10 Section 501(c)(7) organizations. Enter	ļ		
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter		1	
a Gross income from members or shareholders		İ	1
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	а	
b 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.			
a Is the organization licensed to issue qualified health plans in more than one state?	13	a	1
Note. See the instructions for additional information the organization must report on Schedule O			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14	а	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14	b	

Form 990 (2011) PCC Farmland Trust 91-2021165 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 11 1 a 1a Enter the number of voting members of the governing body at the end of the tax year 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 11 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Χ of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Х Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or other 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 Х a The governing body? 8 a Х **b** Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 Х 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 10 a 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes' Χ 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O Х 12a 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 12b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х 120 Schedule O how this is done See Schedule O X 13 13 Did the organization have a written whistleblower policy? Χ 14 14 Did the organization have a written document retention and destruction policy? 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? Х a The organization's CEO, Executive Director, or top management official See Schedule 0 15 a Х 15b **b** Other officers of key employees of the organization 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 taxable entity during the year? 16a Х 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 taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► None 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 Another's website 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 during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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

- 1 a 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
		(C)								
(A) Name and title	(B) Average hours per week	unles	s per	son is	ore the	ian one n an offi ustee)	box cer	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(describe hours for related organiza tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099 MISC)	(W-2/1099 MISC)	from the organization and related organizations
(1) Randy Lee		ŀ								
President	3.75	X		Χ				0.	0.	0.
(2) Natasha Fedo										
Board Member	3	Х						0.	0.	0.
(3) Alex Moore										
Board Member	3	Х						0.	0.	<u> </u>
(4) Dean Carrell										
Board Member	3	X			L.			0.	0.	0.
(5) Diane Dempster										
Board Member	3	Х						0.	0.	0.
(6) Joe Hardiman	}					Ì				
Board Member	3	X						0.	0.	0.
(7) Maria Hines										_
Board Member	3	X					ļ	0.	0.	0.
_(8) Andrea Newton									·	
Board Member	3	X						0.	0.	0.
(9) Rick VanderKnyff										_
Vice President	3	X		Х	<u> </u>		<u> </u>	0.	0.	0.
(10) Seri Sedlacek									_	_
Board Member	3	X			<u> </u>			0.	0.	0.
(11) Dave Lamont	1								_	_
Treasurer	3	X	<u> </u>	X				0.	0.	0.
(12) Rebecca Sadinsky	_								_	
Executive Direc	40			X	ļ			85,143.	0.	13,317.
(13)	-							:		
(14)										
	<u> </u>	Щ.	L				ــــــــــــــــــــــــــــــــــــــ	l		

Form 990 (2011) PCC Farmland Trust			_						91-202116	
Part VII Section A. Officers, Directors, Trust	ees, I	∖ey ∣	Em			es,	and	l Highest Com	pensated Emp	loyees (cont)
(A) Name and title	(B) Average hours per	box.	, unle cer ar	Pos heck ss pe	rson	than o	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (describ e hours for related organi- zations in Sch O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
<u>(19)</u>										
(20)										
<u>(21)</u>					,					
(22)										
(23)										
(24)										
(25)										
1 b Sub-total	•						>	85,143.	0.	13,317.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	Α						>	0.	0.	0. 13,317.
2 Total number of individuals (including but not limite from the organization ► 0	d to the	ose l	liste	d ab	ove)) wh	o re	ceived more than	\$100,000 of report	able compensation
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it.	or trus ndividu	stee, <i>ial</i>	key	em	ploy	ee, d	or h	ighest compensat	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	eportab han \$1	le co 50,0	00?	ensa If '\	ition Yes'	and com	l oth	er compensation le Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' of	compen comple	satio	on fr ched	om Jule	any J fo	unre r suc	elate ch p	ed organization or erson	ındıvıdual	5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compensation from the organization Report compe	ted indi	epen n for	the	t col	ntrac enda	ctors r yea	ar e	nding with or with I	in the organization	
Name and business addres	is .							Description		(C) Compensation
2 Total number of independent contractors (including	but no	t lım	ııted	to t	hose	e list	ed a	above) who receiv	ed more than	
\$100,000 in compensation from the organization >	0									

Pai	t VIII Statement of Revenue				1 /2
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
TS, GRANTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1 1, 142, 252.				
	g Noncash contributions included in lins 1a 1f \$ h Total. Add lines 1a-1f	1,142,252.			
PROGRAM SERVICE REVENUE	2a Lease income from farmers Business Code b Registration fees 611430	23,857. 10,894.	23,857. 10,894.		
M SERVIC	c				
PROGRA	f All other program service revenue g Total. Add lines 2a-2f	34,751.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	3,735.			3,735.
	(i) Real (ii) Personal 6a Gross rents b Less rental expenses				
	c Rental income or (loss) d Net rental income or (loss) ▶		_		
	7 a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses c Gain or (loss)				
	d Net gain or (loss) 8a Gross income from fundraising events				
OTHER REVENUE	of contributions reported on line 1c) See Part IV, line 18				
ОТНЕ	b Less direct expenses c Net income or (loss) from fundraising events	<u>.</u>			
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a 11,846. b Less cost of goods sold b 9,897.				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	1,949.	1,949.		
	11 a b				
	d All other revenue.				
	e Total. Add lines 11a-11d 12 Total revenue. See instructions	1,182,687.	36,700.	0 .	3,735.

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)

	Check if Schedule O contains a re			<u> </u>	
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		·		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	98,586.	67,529.	11,476.	19,581.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	212,922.	145,832.	24,795.	42,295.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	5,109.	3,499.	595.	1,015.
ο.	· · ·	41,024.	28,100.	4,776.	8,148.
10	Other employee benefits			3,150.	5,374.
10	Payroll taxes	27,055.	18,531.	3,130.	5,314.
11	Fees for services (non-employees)				
	Management	44.040	44.040		
	Legal	44,940.	44,940.	15 704	
	Accounting	15,794.		15,794.	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
-	3 Other	191,296.	174,072.	9,608.	7,616.
12	Advertising and promotion	4,289.	4,289.		
13	Office expenses	44,198.	35,777.	5,878.	2,543.
14	Information technology	3,574.	2,709.	483.	382.
15	Royalties		·		
16	Occupancy	26,297.	18,088.	3,486.	4,723.
17	Travel	9,863.	9,469.	197.	197.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,516.	3,608.	227.	681.
20	Interest	22,380.	22,380.		
21	Payments to affiliates		<u></u>		
22	Depreciation, depletion, and amortization	6,282.	6,282.		
23 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 O)	3,523.	881.	2,642.	
	Conservation Easements	455,000.	455,000.		
	Printing and Publications	34,656.	25,992.	1,733.	6,931.
	: Bad Debt	26,381.		26,381.	0,931.
	Postage and Shipping	8,711.	6,533.	436.	1,742.
	All other expenses	19,817.	15,203.	3,242.	1,372.
	Total functional expenses Add lines 1 through 24e	1,306,213.	1,088,714.	114,899.	102,600.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1,300,213.	1,000,111.	11.1,000	202,000.
	Check here ► if following				
	SOP 98-2 (ASC 958-720)				
BAA					Form 990 (2011)

Page **11**

Balance Sheet Part X (A) Beginning of year End of year 539, 194. 1 1,116,648 Cash - non-interest-bearing 1,326,109. 808,772 2 Savings and temporary cash investments 46,805. 20,000 3 3 Pledges and grants receivable, net 81.000. 29,808 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) 7 Notes and loans receivable, net 1,627. 1,627 8 8 Inventories for sale or use 2,789 4,509. 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1,029,500. 10a 976,237. 10 c 969,955. b Less accumulated depreciation 10b 59,545 530. 11 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 15 15 Other assets See Part IV, line 11 2,956,411 16 2,969,199. 16 Total assets. Add lines 1 through 15 (must equal line 34) 30,990 190,292 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 366,394 23 343,662. 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 3,024 25 2,768. 536,722. 400,408. 26 Total liabilities. Add lines 17 through 25 X and complete lines Organizations that follow SFAS 117, check here N E T 27 through 29 and lines 33 and 34. 2,190,670. 27 2,252,149. 27 Unrestricted net assets 365,333. 180,328. 28 Temporarily restricted net assets 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117, check here lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 2,556,003 2,432,477. 33 33 Total net assets or fund balances 2,956,411 2,969,199. Total liabilities and net assets/fund balances 34 34

BAA

Form 990 (2011)

Form 990 (2011) PCC Farmland Trust	91-2021	.165	Pag	<u>je 12</u>
Part XI Reconciliation of Net Assets				
' Check if Schedule O contains a response to any question in this Part XI				
	•			
1 Total revenue (must equal Part VIII, column (A), line 12)	1	1,1	<u>82,68</u>	37.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,3	06,21	L3.
3 Revenue less expenses Subtract line 2 from line 1	3_	-1	<u>23,52</u>	<u> 26.</u>
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,5	<u>56,00</u>	<u>)3.</u>
5 Other changes in net assets or fund balances (explain in Schedule O).	5			0.
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line column (B))	33,	2,4	32,47	<u> 17 .</u>
Part XII Financial Statements and Reporting				
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 Schedule O	ain			
2a Were the organization's financial statements compiled or reviewed by an independent accounta	ınt?	2a		X
b Were the organization's financial statements audited by an independent accountant?		2 b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility fo review, or compilation of its financial statements and selection of an independent accountant?	r oversight of the au	edit, 2c	Х	
If the organization changed either its oversight process or selection process during the tax year in Schedule \ensuremath{O}	, explain			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the separate basis, consolidated basis, or both	year were issued or	іа		
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 s Audit Act and OMB Circular A-133?	et forth in the Singl	e 3a		_X_
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not un or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ndergo the required	audit 3b		
BAA		Form	9 90 (2	011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545 0047 **2011**

Open to Public Inspection

Name o	of the	organization							Employer	ıdentıfıca	tion number
PCC		armland Trust								2116	
Parl	1	Reason for Publ	ic Charity Status	(All organizations	must c	omple	te this	part.)	See II	<u>nstruct</u>	ions
The c	rga	nization is not a priva	te foundation because	e it is (For lines 1 thro	ugh 11,	check o	nly one	box)			
1		A church, convention	of churches or assoc	ciation of churches desc	cribed in	section	170(b)	(1)(A)(i).			
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)						
3		A hospital or a coope	erative hospital servic	e organization describe	d in sec	tion 170)(b)(1)(A	۸)(iii).			
4	П	A medical research of	organization operated	in conjunction with a h	ospital d	describe	d in sec	tion 17)(b)(1)(A	N(iii) Er	nter the hospital's
		name, city, and state		•	·						
5		An organization oper 170(b)(1)(A)(iv). (Co	ated for the benefit o mplete Part II)	f a college or university	owned	or opera	ated by	a gover	nmental	unit de	scribed in section
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 description in section 170(b)(1)(A)(vi). (Complete Part II)							neral public described				
8		1		70(b)(1)(A)(vi). (Comple	te Part I	١)					
9		from activities related	d to its exempt function) more than 33-1/3% of ons – subject to certain	n except	ions, an	d (2) no	more t	han 33-	1/3% of	its support from gros
		June 30, 1975 See s	section 509(a)(2). (Co							red by t	he organization after
10	L		•	xclusively to test for pu		٠,		• -			
11		' more publicly suppor	ted organizations des	exclusively for the benefaction 509(a strong and complete lines)(1) or s	ection 5	i09(a)(2	ctions o	of, or car section 5	rry out t 5 09(a)(3)	he purposes of one o). Check the box that
		a ∏Type I	b ☐Type II	c Type III	l – Fund	tionally	ıntegraf	ted		d 🗍	Type III - Other
е		By checking this box other than foundation section 509(a)(2)	, I certify that the org n managers and other	anization is not controll than one or more pub	led direc licly sup	tly or in	directly organiza	by one tions de	or more escribed	disqual in secti	ified persons on 509(a)(1) or
f		, , , ,	ceived a written dete	rmination from the IRS	that is a	Type I	Type II	or Typ	e III sup	porting	organization,
g			06, has the organizati	on accepted any gift o	r contrib	oution fro	om any	of the fo	llowing	persons	
		(i) A person who obelow, the gove	directly or indirectly co	ontrols, either alone or oported organization?	together	with pe	ersons d	lescribe	d ın (ıı)	and (III)	Yes No
			er of a person descri								11 g (ii)
		` '	•	described in (i) or (ii) a	bove?						11 g (iii)
h		` '	•	e supported organization							
		(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1.9 above or IRC section (see instructions))	(IV) organiz column (your go	Is the ration in in listed in overning ment?	the organ	rou notify nization in n (i) of upport?	organiz colur	s the ation in in (i) ed in the	(vii) Amount of support
					Yes	No	Yes	No	Yes	No	
(A)											
(A)											
<u>(B)</u>											
(C)				1							
(D)											
<u>(E)</u>											
Total											

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

Schedule A (Form 990 or 990-EZ) 2011

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	_					
begi	ndar year (or fiscal year nning 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')	402,975.	959,520.	816,296.	784,728.	1,142,252.	4,105,771.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4	Total. Add lines 1 through 3	402,975·.	959,520.	816,296.	784,728.	1,142,252.	4,105,771.
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)		:				1,078,498.
6	Public support. Subtract line 5 from line 4						3,027,273.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	402,975.	959,520.	816,296.	784,728.	1,142,252.	4,105,771.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,763.	7,167.	5,584.	5,530.	3,735.	24,779.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
11	Total support. Add lines 7 through 10						4,130,550.
12	Gross receipts from related active	rities, etc (see ins	tructions)			12	231,759.
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c)((3)
	tion C. Computation of Pul	····				1	
15	Public support percentage for 20 Public support percentage from 20	2010 Schedule A,	Part II, line 14			14	73.29 % 82.52 %
16 a	33-1/3% support test - 2011. If and stop here. The organization	the organization d qualifies as a put	lid not check the b blicly supported or	oox on line 13, ar rganization	nd the line 14 is 3	3-1/3% or more, o	check this box
t	33-1/3% support test — 2010. If and stop here. The organization	the organization d qualifies as a pub	lid not check a bo blicly supported or	x on line 13 or 16 ganization	oa, and line 15 is	33-1/3% or more,	check this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop he	re. Explain in Pari	t IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ition qualifies as	box and stop he a publicly support	re. Explain in Par ted organization	t IV how the ▶
18 BAA	Private foundation. If the organi	zation did not che	ck a box on line 1	13, 16a, 16b, 17a			structions >

Page 3

Schedule A (Form 990 or 990-EZ) 2011 PCC Farmland Trust

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

(Complete only if you checked the bo	on line 9 of Part I or if the organization for	alled to qualify under Part II	If the organization fails
to qualify under the tests listed below	nlease complete Part II)	, -	-

Sec	tion A. Public Support		<u>-</u>				
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include any unusual grants')		, , , , , , , , , , , , , , , , , , , ,				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
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						
	Total. Add lines 1 through 5 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						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business						
•••	activities not included 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 lns 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, seco	nd, third, fourth, e	or fifth tax year as	a section 501(c)(3) <u> </u>
Sec	tion C. Computation of Pu	blic Support P	Percentage				
15	Public support percentage for 20)11 (line 8, colum	n (f) divided by li	ne 13, column (f))	15	%
16	Public support percentage from	2010 Schedule A,	Part III, line 15			16	%
Sec	tion D. Computation of Inv	estment Incor	me Percentag	e		-	
17	Investment income percentage f	or 2011 (line 10c,	column (f) divide	ed by line 13, colu	umn (f))	17	%
18	Investment income percentage f	rom 2010 Schedu	ile A, Part III, line	17		18	96
	33-1/3% support tests – 2011. If is not more than 33-1/3%, check	k this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organization	▶ 📙
t	33-1/3% support tests — 2010. If line 18 is not more than 33-1/3%	the organization	did not check a t	oox on line 14 or	line 19a, and line	16 is more than 33	-1/3%, and ▶ □
20	Private foundation. If the organi		· ·	-			►H

Schedule A	(Form 990 or 99	90-EZ) 2011	PCC Farmla	ind Trust			91-202116	<u>,5 </u>	Page 4
Part IV	Supplementa Part II, line 1 (See instruct	al Information 7a or 17b;	on. Complete and Part III, I	this part to ine 12. Also	provide the e complete this	explanations re s part for any a	equired by Part additional infor	II, line 10, mation	
					-				
-~									
-									

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection
Employer identification number

DO					01 0001165		
PCC Farmland Trust					91-2021165		
Par	Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Othe	r Similar Fun	ds or Acco	ounts. Complete	9 17	
	the organization answered Tes t	 	Т				
		(a) Donor advised for	unds	(b) Fu	unds and other acc	ounts	
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 dor funds are the organization's property, subject			onor advised	Yes	No	
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or done	g that grant fund or advisor, or foi	ds can be any other	Yes	No	
Par	rt II Conservation Easements. Compl	ete if the organization an	swered 'Yes'	to Form 90	0 Part IV line	7	
1				10 1 01111 33	70, 1 art 17, 11110	<u> </u>	
•	Preservation of land for public use (e.g., r		¬ ''''	of an historica	Ily important land	area	
	X Protection of natural habitat	coreation of education,	_		nistoric structure	bi ca	
	X Preservation of open space	L		or a certifica r	"Storie Structure		
2	Complete lines 2a through 2d if the organizations day of the tax year	on held a qualified conservation	n contribution in	the form of a	conservation ease	ement on the	
					eld at the End of the	ne Tax Year	
ā	Total number of conservation easements			2a 8			
t	Total acreage restricted by conservation ease	ments		2b 57	4		
C	Number of conservation easements on a certi	fied historic structure included i	n (a)	2 c			
C	d Number of conservation easements included in structure listed in the National Register			2d			
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguis	shed, or termina	ted by the org	janization during th	ne	
4	Number of states where property subject to co	onservation easement is located	d ►	<u>l_</u>			
5	Does the organization have a written policy re and enforcement of the conservation easement	garding the periodic monitoring nts it holds?	i, inspection, ha	ndling of viola	itions, X Yes	☐ No	
6	Staff and volunteer hours devoted to monitoring 1,040	ng, inspecting, and enforcing co	onservation ease	ements during	the year		
7	Amount of expenses incurred in monitoring, in • \$	nspecting, and enforcing consei	rvation easemer	its during the	year		
8	Does each conservation easement reported or 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the rec	quirements of se	ction	Yes	X No	
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements See Part XI	to the organization's financial s	evenue and exper tatements that c	nse statement, lescribes the	and balance sheet, organization's acco	and ounting for	
Par	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical 1 wered 'Yes' to Form 990,	reasures, or Part IV, line	Other Sim 8.	ilar Assets.		
1 a	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its final	s held for public exhibition, edu	ication, or resea	nue statemen rch in furthera	t and balance shee ance of public serv	et works of ice, provide,	
ŧ	If the organization elected, as permitted under historical treasures, or other similar assets he 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 a amounts required to be reported under SFAS	116 (ASC 958) relating to these	sımılar assets f e items	or financial ga	ain, provide the fol	lowing	
ā	a Revenues included in Form 990, Part VIII, line	e 1			► \$		
<u>t</u>	Assets included in Form 990, Part X				► \$		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	Schedule D (Form 990) 2011 PCC F			· · · ·	91-202			Page 2
a place chibition d Loan or exchange programs c Part VI Scholarly research c Other 5	Part III Organizations Maintai	ining Collect	ions of Art, Histo	rical Treasures, or	Other Similar Ass	ets (co	ontinu	ed)
b Scholarly research e Other	3 Using the organization's acquisition items (check all that apply)	on, accession,	and other records, che	eck any of the following	that are a significant u	se of its	collec	tion
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization's collection of the organization's collection? Yes No Part IV Excrew and Custodial Arrangements. Complete if the organization's collection? Yes No Part IV Excrew and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV. Inne 9, or reported an amount on Form 990, Part X, line 2] 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X bit 'Yes,' explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year i Ending balance a Did the organization include an amount on Form 990, Part X, line 21? In a Beginning of year balance b Contributions (a) Current year (b) Prior year (c) Two years task. (d) Three years back. (e) Four years back. The prematent earnings, gains, and losses and fusions of contributions c Net investment earnings, gains, and losses d Grants or scholarships f Administrative expenses g End of year balance b Contributions c Net investment earnings, gains, and losses a Board designated or quasi-endowment	a Public exhibition d Loan or exchange programs							
4 Provoke a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV Part XIV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV. In e.g. or reported an amount on Form 990, Part X, Inc. 2.1 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X inc. 2.1 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X inc. 2.1 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X inc. 2.1 1a is the organization and agent, trustee, custodian, or other intermediary for contributions or other assets not include an arrangement in Part XIV and complete the following table 1 c	b Scholarly research e Other							
Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes' to Form 990, Part IV, Inne 9, or reported an amount on Form 990, Part X, line 21 1a is the organization an agent, frustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 1 is the organization an agent, frustee, custodian, or other intermediary for contributions or other assets not include on Form 990, Part X, line 21 1 is the organization an agent, frustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 2 is gening balance 4 Amount 1 c 4 Additions during the year 6 Eleginning balance 9 Distributions during the year 1 is gening additional to the part XIV 2 and the organization include an amount on Form 990, Part X, line 21? 1 is the organization include an amount on Form 990, Part X, line 21? 1 is the organization include an amount on Form 990, Part X, line 21? 1 a Beginning of year balance 9 Can be the organization include an amount on Form 990, Part X, line 21? 1 a Beginning of year balance 1 a Beginning of year balance 9 Contributions 1 a Beginning of year balance 9 Contributions 1 organization and part XIV 2 organization and part XIV and p								
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b Buildings 245,000. 59,545. 185,455. c Leasehold improvements d Equipment e Other	Description of property	(8				(a) i	300K Va	aiue
c Leasehold improvements d Equipment e Other	1 a Land							
d Equipment e Other				59,545.		185	<u>, 455.</u>	
e Other								
	• •	<u> </u>					.	
		an (d) must s	121 Form 000, D=-1 Y	column (D) I = 10(-)			060	055
Total. Add lines to through the (Column (a) must equal to the 550, that A, Column (b), the to(c))	BAA	ııı (u) must equ	ат готті 990, Рап X, (colultili (b), line TU(C))		ule D (F		

	(Form 990) 2011 PCC Farmland Trust			91-2021165 Page 3
Part VII	Investments - Other Securities. See	Form 990, Part X,	line 12. N/A	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Cost or	Method of valuation end-of-year market value
	al derivatives			
(2) Closely	-held equity interests			
(3) Other				
(A)				
(B)			-	
(C)				
(D)			- -	
(E)				
				
<u>(F)</u>				
(G)				
<u>(H)</u>		}		
_(I)			<u> </u>	
	mn (b) must equal Form 990 Part X, column (B) line 12)	<u> </u>	<u> </u>	
Part VIII	Investments - Program Related. See			
	(a) Description of investment type	(b) Book value	(c) Cost or	Method of valuation end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13)			
Part IX	Other Assets. See Form 990, Part X,	line 15. N/A		
		scription		(b) Book value
(1)	(4)			37-22
(2)	·			
(3)	······································	<u> </u>		
<u>(4)</u>		 		
(5)				
(6)			· · · · · · · · · · · · · · · · · · ·	
(7)		 		
(8)				
(9)				
(10)				
	lumn (b) must equal Form 990. Part X, column (>
Part X	Other Liabilities. See Form 990, Part	X, line 25.		
	(a) Description of liability	(b) Book value		
(1) Fede	ral income taxes			
(2) Int	erest Payable	2,70	58.	
(3)				
(4)				
(5)		- 		
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total (Colun	nn (b) must equal Form 990, Part X, column (B) line 25)	▶ 2,70	58.	

2 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 liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2011 PCC Farmland Trust		-2021165	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)		1,	182,687.
2 Total expenses (Form 990, Part IX, column (A), line 25)			306,213.
3 Excess or (deficit) for the year Subtract line 2 from line 1			123,526.
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net) Add lines 4 through 8			
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3			123,526.
Part XII Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per Re		107 007
1 Total revenue, gains, and other support per audited financial statements	-	1 1,	197,887.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1		
a Net unrealized gains on investments	2a 15 200		
b Donated services and use of facilities	2b 15,200.		
c Recoveries of prior year grants	2c	1	
d Other (Describe in Part XIV)	2d		15 200
e Add lines 2a through 2d		2e	15,200.
3 Subtract line 2e from line 1	1 1	3 1,	182,687.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b	_	
c Add lines 4a and 4b.		4c 1.	100 607
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I. line 12)	ents With Evponsos por		182,687.
Part XIII Reconciliation of Expenses per Audited Financial Stateme	nts with Expenses per		321,413.
1 Total expenses and losses per audited financial statements2 Amounts included on line 1 but not on Form 990, Part IX, line 25	-	'	321,413.
	2a 15,200.		
a Donated services and use of facilities	2b 13,200.	1	
b Prior year adjustments c Other losses	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d		2e	15,200.
3 Subtract line 2e from line 1	ł		306,213.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		300/223.
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18))	5 1,	306,213.
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines additional information	art III, lines 1a and 4, Part IV, nes 2d and 4b Also complete	lines 1b and 2 this part to pro	b, ovide
Part_II, Line 9 - Organization Reporting Of Conservation Easeme	nts		
The_Trust_owns_three_organic_farms,_which_it_monits	ors,_inspects_and_s	tewards i	n
accordance_with_the_Land_Trust_Alliance_Standards_A	& Practices, as if.	the Trust.	_did
_ hold conservation easements on them. The farms are	3		
a)_Delta_Farm,_ 74_acres_on_the_Dungeness_Delta	_just_north_of_Seg	uim,_Wash	ington
b)_Bennington Place_Farm, 174_acres_located_west	t_of_Walla_Walla,_W	ashington	
c) Ames_Creek Farm, 20 acres_located_near_Carna	tion,_Washington		

91-2021165

Schedule V (10111 930) 2011 FCC FAILIII and Trusc	91-2021165	Page 5
Part XIV Supplemental Information (continued)		
Part II, Line 9 - Organization Reporting Of Conservation Easements (continued)	λ	
The Trust holds 8 conservation easements on 574 acres of prope	<u>rty.</u>	
a)_ Two separate easements are held on the Ames Creek Farm,	totaling 159 acres	<u>-</u> ,
located_near_Carnation,_Washington		
b) Three separate easements are held on Orting Valley Farms	<u>, which is a total</u>	<u>of</u>
100_acres, south of Orting, Washington		
c) One easement of 15 acres is held on the Camelot Downs Fa	rm, near Coupevill	_e,
Washington		
d)_Two easements of 300 acres is held on the Williams Farm	in Washington	
~		

Schedule D (Form 990) 2011 PCC Farmland Trust	91-2021165	Page 5
Schedule D (Form 990) 2011 PCC Farmland Trust Part XIV Supplemental Information (continued)		
		_

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Schedule **D** (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Employer identification number 91-2021165 PCC Farmland Trust Form 990, Part III, Line 4c - Program Service Accomplishments Farmland Stewardship Program: The goal of the Farmland Stewardship Program is to ____ <u>_develop_collaborative_and_scientifically-relevant_stewardship_plans_for_each_of_the___</u> Trust's properties, including outlines for Organic Certification, Salmon Safe Certification and implementation of agricultural Best Management Practices. Annual____ monitoring will ensure the land is used as prescribed in the conservation easement (organic agricultural use) and that it is being actively farmed. The innovative farmer_outreach component of the stewardship program is unlike traditional_land trust stewardship programs in that farmers are selected and vetted from the outset to help for a smoother transition when the land eventually changes owners. Farmers who are fully committed to organic agriculture, and interested in raising the next_ generation of farmers, are more likely to create internship and transition programs to ensure the viability of the farm into the future. Form 990, Part VI, Line 11b - Form 990 Review Process The draft 990 is provided by the preparer to the Executive Director and Finance Committee of the Board. The Board reviews and recommends changes to the preparer before the Board as a whole approves it. Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts Annual conflict of interest pledge sheet is collected from each Board and key staff member. In addition, as the Board considers the acquisition of an easement or fee simple property, the Chair queries the decision makers on any relevant conflicts of interest and follows procedure where one is identified. The meeting minutes reflect the question and response. Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Exec. Dir., or Top Mgtment The Board President reviews the annual salary for the Executive Director and uses comparable salary information to make needed adjustments which must be approved by

Schedule 0 (Form 990 or 990-EZ) 2011	Page 2
Name of the organization	Employer identification number 91-2021165
PCC Farmland Trust	91-2021165
Form 990, Part VI, Line 15a - Compensation Review & Approval Proce	ess for CEO, Exec. Dir., or Top Mgtment (continue
the Board of Directors.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly	y_Available
Policies and procedures provided upon request. An ar	nnual report with year-end
financial informatiOn is provided at the Trust's webs	site with hard copies provided
by request and mailed to major donors.	

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or print |X| 91-2021165 PCC Farmland Trust File by the due date for Number street, and room or suite number If a P O box, see instructions Social security number (SSN) filing your return See instructions 1917 First Avenue, Level A #100 City town or post office, state, and ZIP code. For a foreign address, see instructions Seattle, WA 98101 01 Enter the Return code for the return that this application is for (file a separate application for each return) **Application Application** Return Return Code Is For Code Is For Form 990 01 Form 990-T (corporation) 07 08 Form 990-BL 02 Form 1041-A Form 990-EZ 01 Form 4720 09 Form 5227 10 Form 990-PF 04 11 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 Form 8870 12 Form 990-T (trust other than above) Telephone No. ► (206) 547-9855 FAX No -____ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, ▶ and attach a list with the names and EINs of all members check this box If it is for part of the group, check this box the extension is for 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15 , 20 12 , to file the exempt organization return for the organization named above The extension is for the organization's return for X calendar year 20 11 or tax year beginning _____, 20 ___, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return | |Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a \$ 0. nonrefundable credits. See instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

payments made Include any prior year overpayment allowed as a credit

0.

3b|\$

3c|\$