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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form

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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

OMB No 1545-1150

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012, and ending 12-31-2012

B

Check if applicable

Address change

Name change

Initial return

Terminated

Amended return

Application pending

C Name of organization

DAKOTA LAND TRUST

Number and street (or P O box, if mail is not delivered to street address)

Room/suite

795 MAIN ST

City or town, state or country, and ZIP + 4

DEADWOOD, SD 57732

D Employer identification number

26-2437901

E Telephone number

(605) 578-1401

F Group Exemption Number

G Accounting Method

Cash

checked

Accrual

Other (specify)

H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: WWW.DAKOTALANDTRUST.ORG

J Tax-exempt status (check only one)—

checked

 501(c)(3)

501(c)()

(insert no)

4947(a)(1) or

527

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization **and** its gross receipts are normally **not** more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 97,050

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

checked

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	72,403
	2	Program service revenue including government fees and contracts	2	24,617
	3	Membership dues and assessments	3	
	4	Investment income	4	30
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events	6d	
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
Expenses	c	Less direct expenses from gaming and fundraising events	6c	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less cost of goods sold	7b	
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	97,050
	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	40,125
Net Assets	13	Professional fees and other payments to independent contractors	13	785
	14	Occupancy, rent, utilities, and maintenance	14	318
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	6,825
	17	Total expenses. Add lines 10 through 16	17	48,053
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	48,997
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	135,327
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	184,324

Part II

Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	46,964	22	12,767
23 Land and buildings	327,014	23	413,096
24 Other assets (describe in Schedule O)	1,444	24	38,634
25 Total assets	375,422	25	464,497
26 Total liabilities (describe in Schedule O)	240,095	26	280,173
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	135,327	27	184,324

Part III

Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

TO CREATE OPPORTUNITIES AND FOSTER STEWARDSHIP OF PERMANENTLY AFFORDABLE HOUSING FOR LOW-INCOME AND MODERATE-INCOME FAMILIES AND INDIVIDUALS WE ARE DESIGNED TO PROVIDE VOLUNTARY ASSISTANCE FOR WORKING FAMILIES BY PROVIDING EQUITY FUNDING TO PERMANENTLY REDUCE THE COST OF HOMES FOR QUALIFIED HOMEBUYERS BY REMOVING THE LAND COST FROM THE PURCHASE PRICE LIMITED- INCOME HOMEBUYERS WILL PURCHASE THEIR HOMES AND RECEIVE A 99-YEAR GROUND LEASE TO THE LOT ON WHICH THEIR HOME SITS - A LEASE THAT IS ASSIGNABLE TO QUALIFIED HEIRS AND RENEWABLE FOR A SECOND 99-YEAR TERM WE PLACE EQUITY LIMITATIONS INTO THE GROUND LEASE AGREEMENT THAT RESTRICT THE RESALE PRICE OF THE HOUSING IN ORDER TO MAINTAIN ITS LONG-TERM AFFORDABILITY - IN AN ATTEMPT TO BALANCE THE COMPETING GOALS OF PROVIDING A FAIR RETURN ON THE INITIAL OWNER'S HOUSING INVESTMENT, ON THE ONE HAND, WHILE ASSURING THAT THE HOUSING UNIT IS KEPT AFFORDABLE FOR THE NEXT BUYER WITHOUT REQUIRING ADDITIONAL SUBSIDY, ON THE OTHER IN SO DOING, THE

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28

THE PURPOSE OF DAKOTA LAND TRUST SHALL BE TO PROVIDE OPPORTUNITITES FOR LOW- AND MODERATE-INCOME PEOPLE TO SECURE HOUSING THAT IS DECENT AND AFFORDABLE AND THAT IS CONTROLLED BY THE RESIDENTS ON A LONG-TERM BASIS TO PRESERVE THE QUALITY AND AFFORDABILITY OF HOUSING FOR FUTURE LOW- AND MODERATE-INCOME RESIDENTS OF THE COMMUNITIES OF WESTERN SOUTH DAKOTA TO ADDRESS COMMUNITY DETERIORATION IN ECONOMICALLY DISADVANTAGED NEIGHBORHOODS BY PROMOTING THE DEVELOPMENT, REHABILITATION, AND MAINTENANCE OF DECENT HOUSING IN THESE NEIGHBORHOODS, BY PROMOTING ECONOMIC OPPORTUNITIES FOR LOW-INCOME RESIDENTS OF THESE NEIGHBORHOODS, BY MAKING LAND AVAILABLE FOR PROJECTS AND ACTIVITIES THAT IMPROVE THE QUALITY OF LIFE IN THESE NEIGHBORHOODS, BY ASSISTING RESIDENTS OF THESE NEIGHBORHOODS IN IMPROVING THE SAFETY AND WELL-BEING OF THEIR COMMUNITY, AND TO PROTECT THE NATURAL ENVIRONMENT AND TO PROMOTE THE ECOLOGICALLY SOUND USE OF LAND AND NATURAL RESOURCES AND THE LONG-TERM HEALTH AND SAFETY OF THE COMMUNITIES OF WESTERN SOUTH DAKOTA AT DECEMBER 31, 2012, DLT HOLDS 20 PROPERTIES FAMILIES HAVE BEEN PLACED IN HOMES AND LAND LEASES ON ALL BUT ONE PROPERTY INCOME FROM THESE LEASES IS CHARGED AT BELOW MARKET RATES

(Grants \$) If this amount includes foreign grants, check here

28a38,738

29

(Grants \$) If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30a

31

Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here

31a

32

Total program service expenses (add lines 28a through 31a)

3238,738

Part IV

List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c)Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See Additional Data Table				

Part V

Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☒

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	Yes
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ☐ 37a		
b	Did the organization file Form 1120-POL for this year?	37b	No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ☐ _____, section 4912 ☐ _____, section 4955 ☐ _____		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	No
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ☐ _____		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ☐ _____		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41	List the states with which a copy of this return is filed ☐ _____		
42a	The organization's books are in care of ☐ JOY MCCracken Telephone no ☐ (605) 578-1401 Located at ☐ 795 MAIN ST DEADWOOD, SD ZIP + 4 ☐ 57732		
b	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)? If "Yes," enter the name of the foreign country ☐ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .	42b	No
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ☐ _____	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ☒ and enter the amount of tax-exempt interest received or accrued during the tax year ☐ 43		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	No
b	Did the organization operate one or more hospital facilities during the year? <i>If "Yes," Form 990 must be completed instead of Form 990-EZ</i>	44b	No
c	Did the organization receive any payments for indoor tanning services during the year?	44c	No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	44d	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	No
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

Part VI

Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

		Yes	No
47	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		No
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a	Did the organization make any transfers to an exempt non-charitable related organization?		No
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization If there is none, enter "None "

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ☒ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer		2013-07-09 Date			
	JOY MCCracken EXECUTIVE DIRECTOR Type or print name and title					
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature JEAN SMITH CPA	Date 2013-11-05	Check ☐ if self-employed	PTIN
	Firm's name ☐ KETEL THORSTENSON LLP					Firm's EIN ☐
	Firm's address ☐ PO BOX 3140 RAPID CITY, SD 577093140					Phone no (605) 342-5630

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Additional Data

Software ID:
Software Version:
EIN: 26-2437901
Name: DAKOTA LAND TRUST

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
MALCOM CHAPMAN  VICE PRESIDE	1 00	0		
DAN LEIKVOLD  PRESIDENT	1 00	0		
SHAWN ROST  TREASURER	1 00	0		
SHERRY SCUDDER  SECRETARY	1 00	0		
MIKE STAHL  BOARD MEMBER	1 00	0		
FRANCIS TOSCANA  BOARD MEMBER	1 00	0		
FLOYD RUMMEL  BOARD MEMBER	1 00	0		
JOEL EDGAR  DIRECTOR	1 00	0		
BRYAN WALKER  BOARD MEMBER	1 00	0		
JOY MCCracken  EXECUTIVE DI	40 00	0		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
DAKOTA LAND TRUST

Employer identification number
26-2437901

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")		350	32,635	75,000	72,403	180,388
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3		350	32,635	75,000	72,403	180,388
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)						
6 Public support. Subtract line 5 from line 4						180,388

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4		350	32,635	75,000	72,403	180,388
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		438	789	232	30	1,489
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						181,877
12 Gross receipts from related activities, etc (see instructions)					12	51,691
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here					☒	

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14
15	Public support percentage for 2011 Schedule A, Part II, line 14	15
16a	33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐
b	33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐
17a	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐
b	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	☐

Part IIISupport 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						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 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						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization DAKOTA LAND TRUST	Employer identification number 26-2437901
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Identifier	Return Reference	Explanation
OTHER EXPENSES	FORM 990-EZ, PART I, LINE 16	EXPENSES ADVERTISING AND PROMOTION 313 SUPPLIES 941 TRAVEL 1,942 CONFERENCES/MEETINGS 1,431 INTEREST 2,198 TOTAL 6,825
OTHER ASSETS	FORM 990-EZ, PART II, LINE 24	OTHER RECEIVABLES 1,444 479 GRANTS RECEIVABLE 0 38,155 TOTAL 1,444 38,634
OTHER LIABILITIES	FORM 990-EZ, PART II, LINE 26	ACCOUNTS PAYABLE AND ACCRUED EXPENSES 17,690 1,149 MORTGAGE AND OTHER NOTES PAYABLE 222,405 279,024
PRIMARY EXEMPT PURPOSE	FORM 990-EZ, PART III	TO CREATE OPPORTUNITIES AND FOSTER STEWARDSHIP OF PERMANENTLY AFFORDABLE HOUSING FOR LOW-INCOME AND MODERATE-INCOME FAMILIES AND INDIVIDUALS WE ARE DESIGNED TO PROVIDE VOLUNTARY ASSISTANCE FOR WORKING FAMILIES BY PROVIDING EQUITY FUNDING TO PERMANENTLY REDUCE THE COST OF HOMES FOR QUALIFIED HOMEBUYERS BY REMOVING THE LAND COST FROM THE PURCHASE PRICE LIMITED- INCOME HOMEBUYERS WILL PURCHASE THEIR HOMES AND RECEIVE A 99-YEAR GROUND LEASE TO THE LOT ON WHICH THEIR HOME SITS - A LEASE THAT IS ASSIGNABLE TO QUALIFIED HEIRS AND RENEWABLE FOR A SECOND 99-YEAR TERM WE PLACE EQUITY LIMITATIONS INTO THE GROUND LEASE AGREEMENT THAT RESTRICT THE RESALE PRICE OF THE HOUSING IN ORDER TO MAINTAIN ITS LONG-TERM AFFORDABILITY - IN AN ATTEMPT TO BALANCE THE COMPETING GOALS OF PROVIDING A FAIR RETURN ON THE INITIAL OWNER'S HOUSING INVESTMENT, ON THE ONE HAND, WHILE ASSURING THAT THE HOUSING UNIT IS KEPT AFFORDABLE FOR THE NEXT BUYER WITHOUT REQUIRING ADDITIONAL SUBSIDY, ON THE OTHER IN SO DOING, THE BENEFIT OF THE INVESTMENT OF PUBLIC AND PRIVATE DOLLARS NEEDED TO CREATE AFFORDABILITY IS PRESERVED FOR GENERATIONS TO COME
FIRST ACCOMPLISHMENT	FORM 990-EZ, PART III, LINE 28	THE PURPOSE OF DAKOTA LAND TRUST SHALL BE TO PROVIDE OPPORTUNITIES FOR LOW- AND MODERATE-INCOME PEOPLE TO SECURE HOUSING THAT IS DECENT AND AFFORDABLE AND THAT IS CONTROLLED BY THE RESIDENTS ON A LONG-TERM BASIS TO PRESERVE THE QUALITY AND AFFORDABILITY OF HOUSING FOR FUTURE LOW- AND MODERATE-INCOME RESIDENTS OF THE COMMUNITIES OF WESTERN SOUTH DAKOTA TO ADDRESS COMMUNITY DETERIORATION IN ECONOMICALLY DISADVANTAGED NEIGHBORHOODS BY PROMOTING THE DEVELOPMENT, REHABILITATION, AND MAINTENANCE OF DECENT HOUSING IN THESE NEIGHBORHOODS, BY PROMOTING ECONOMIC OPPORTUNITIES FOR LOW-INCOME RESIDENTS OF THESE NEIGHBORHOODS, BY MAKING LAND AVAILABLE FOR PROJECTS AND ACTIVITIES THAT IMPROVE THE QUALITY OF LIFE IN THESE NEIGHBORHOODS, BY ASSISTING RESIDENTS OF THESE NEIGHBORHOODS IN IMPROVING THE SAFETY AND WELL-BEING OF THEIR COMMUNITY, AND TO PROTECT THE NATURAL ENVIRONMENT AND TO PROMOTE THE ECOLOGICALLY SOUND USE OF LAND AND NATURAL RESOURCES AND THE LONG-TERM HEALTH AND SAFETY OF THE COMMUNITIES OF WESTERN SOUTH DAKOTA AT DECEMBER 31, 2012, DLT HOLDS 20 PROPERTIES FAMILIES HAVE BEEN PLACED IN HOMES AND LAND LEASES ON ALL BUT ONE PROPERTY INCOME FROM THESE LEASES IS CHARGED AT BELOW MARKET RATES
CHANGES TO ORGANIZATIONAL DOCUMENTS	FORM 990-EZ, PART V, LINE 34	THE ORGANIZATION CHANGED ITS BYLAWS TO NOW HAVE MEMBERS MEMBERS HAVE THE RIGHT TO PARTICIPATE IN MEETINGS OF THE MEMBERSHIP, VOTE ON ALL MATTERS PUT BEFORE THE MEMBERSHIP FOR CONSIDERATION, TO NOMINATE AND PARTICIPATE IN THE ELECTION OF THE BOARD OF DIRECTORS, TO SERVE ON THE BOARD OF DIRECTORS OR ON COMMITTEES, AND TO RECEIVE NOTICES AND MINUTES OF MEMBERSHIP MEETINGS AND ANNUAL REPORTS OF THE ORGANIZATION

TY 2012 Compensation Explanation**Name:** DAKOTA LAND TRUST**EIN:** 26-2437901

Person Name	Explanation
MALCOM CHAPMAN	
DAN LEIKVOLD	
SHAWN ROST	
SHERRY SCUDDER	
MIKE STAHL	
FRANCIS TOSCANA	
FLOYD RUMMEL	
JOEL EDGAR	
BRYAN WALKER	
JOY MCCracken	