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Extended to November 15, 2016

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

and ending

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

A For the 2015 calendar year, or tax year beginning

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

В	Check if applicab	C Name of organization		D Employer identific	cation number
_	Addre				
늗	jchane]Name			- 01_1	331348
<u> </u>	chang		Room/suite		
F	lreturr Final	D O Box 4461	noom/saite		, 667-9708
_	returr⊥ term⊪ ated			G Gross receipts \$	1,870,450.
Г	Amer	ded Nonetahaa MA 00007		H(a) Is this a group re	
Ē	Appli			for subordinates	
	pend	same as C above		H(b) Are all subordinates in	
1	Tax-ex	empt status X 501(c)(3) 501(c)()◀ (insert no.) 4947(a)(1) o	r 52	-	list (see instructions)
		te: ▶ www.cdlandtrust.org		H(c) Group exemptio	n number 🕨
		organization: X Corporation Trust Association Other	L Year	r of formation: 1985 N	A State of legal domicile: WA
P	art I	Summary			
a	1		cquire	e land and ea	sements
Governance		for conservation purposes.			
ern	2	Check this box If the organization discontinued its operations or dispose	ed of more	e than 25% of its net ass	
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	16
		Number of independent voting members of the governing body (Part VI, line 1b)		4	16
Activities &	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)		5	14
ξ	6	Total number of volunteers (estimate if necessary)		6	114
Ąċ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	D	Net unrelated business taxable income from Form 990-T, line 34			
	8	Contributions and grants (Part VIII, line 1h)	-	Prior Year 1,390,976.	Current Year 1,596,370.
že	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	275,831.	248,602.
Be	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,266.	6,688.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	1,675,073.	1,851,660.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		458,000.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.
"	4-	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	513,704.	516,503.
Sec	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	. Б	Total fundraising expenses (Part IX, column (D), line 25) 28, 42	24. F		• 2
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ECEIVED		821,148.	382,542.
	18	Total expenses, Add lines 13.17 (must equal Part X, column (A) line 25)	ပ	1,792,852.	899,045.
	19	Revenue less expenses Subtract line 18 from line 12 MINI 12 5-2236	閿 -	<117,779.>	952,615.
ъ	4	19 149 1 149 1 1 1 1 1 1 1 1 1 1 1 1 1 1	en B	eginning of Current Year	End of Year
Assets	20			21,347,397.	22,256,401.
ASS	21	Total liabilities (Part X, line 26)		140,801.	321,913.
	22	Net assets or fund balances Subtract line 21 from line 20		21,206,596.	21,934,488.
_d P	art II	Signature Block			
~ □		alties of perjury, I declare that I have exampled this rejorn, including accompanying schedules		-	/ knowledge and belief, it is
<u>Jrue</u>	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich prepare	r has any knowledge.	
⇒		7000		<u></u>	·
_ Sig		Signature of other		Date	يدا . د
₽He	re	Robert Bugert, Executive Director		10/	31/16
·		Type or print name and title			==
IJ.	_	Print/Type preparer's name Preparer's signature]	Date Check	PTIN
Pai			2C/A-	10/11/16 sell employ	
)L	parer	Firm's name Cordell, Neher & Company, P.L.L.	<u>C.</u>	Firm's EIN	91-0950793
≸Use	Only	Firm's address P.O. Box 3068			001 666 4664
<u> </u>		Wenatchee, WA 98807-3068		Phone no. (5	
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

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

Form 990 (2015)

Form	m 990 (2015) Chelan-Douglas Land Trust	91-1331348	Page 2							
Pai	art III Statement of Program Service Accomplishments									
	Check if Schedule O contains a response or note to any line in this Part III									
1	Briefly describe the organization's mission									
	Conserving our land, our water, and our way of	of life through voluntary	7							
	land agreements, education, partnerships, ste	ewardship, and well								
	planned growth.	· ·								
2	Did the organization undertake any significant program services during the year which we									
	the prior Form 990 or 990-EZ?	Yes	X No							
	If "Yes," describe these new services on Schedule O									
3	Did the organization cease conducting, or make significant changes in how it conducts, a	iny program services? Yes	X No							
	If "Yes," describe these changes on Schedule O									
4	Describe the organization's program service accomplishments for each of its three larges									
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and										
	revenue, if any, for each program service reported.									
4a	(Code) (Expenses \$ 601,716. including grants of \$) (Revenue \$)							
	To acquire land and easements for conservation	on purposes.								
	4									
	-									
										
										
										
4b	No.	\ /-	<u>-</u>							
40	Code) (Expenses \$ including grants of \$	/ (Revenue \$,							
		··								
4c	Code (Code () (Expenses \$	\ (o								
	/ (Code / (Expenses a including grants of a									
										
			_							
		······································								
		· · · · · · · · · · · · · · · · · · ·								
										
	d Other program services (Describe in Schedule O)									
~u		(Payana e								
	601 116	(Revenue \$								

Form **990** (2015)

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	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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 98-197 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	. 8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
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, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	4.4	v	
L	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	441	х	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			Х
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		Λ.
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	44.4	Х	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
•	the organization's separate of consolidated infancial 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	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 		
	Schedule D, Parts XI and XII	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 and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? 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 other assistance to			1
	or for foreign individuals? 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	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	L.
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		X_
		_	990	

Page 4 Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes." complete Schedule I. Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete X 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X 24a Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х Schedule L. Part I. 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X complete Schedule L, Part II 26 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 Х 27 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). a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701 37 If "Yes," complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X Part V line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Х 35a b If "Yes" to line 35a, 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 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 Х

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

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Form 990 (2015) Chelan-Douglas Land Trust
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as chantable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1		
	were not tax deductible?	6b		Ĺ
7	Organizations that may receive deductible contributions under section 170(c).		-	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	L	,	ļ
	sponsoring organization have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		٠,
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter	-		
а	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		1	
1	Section 501(c)(12) organizations. Enter]		
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	Ь—		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1	ļ	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	ļ	<u> </u>
а	·	13a	 	ļ
	Note. See the instructions for additional information the organization must report on Schedule O	1	1	
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	1		
	Enter the amount of reserves on hand	 	 	37
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	├	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2015) Chelan-Douglas Land Trust 91-1331348 Page 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 in	structions.						
	Check if Schedule O contains a response or note to any line in this Part VI					X			
Sec	tion`A. Governing Body and Management								
			ī		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	16	1					
	If there are material differences in voting rights among members of the governing body, or if the governing	1]					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.]					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16	1		1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	iny other	<u> </u>					
	officer, director, trustee, or key employee?			2	Х				
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision	1		х			
	of officers, directors, or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5	7,	<u>X</u>			
6	Did the organization have members or stockholders?			6	X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	opoint o	one or	_	.				
	more members of the governing body?			7a	X				
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockno	ders, or	l <u></u> .		v			
	persons other than the governing body?		4-11	7b		<u> </u>			
8_	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the	tollowing:	-	Х				
	The governing body?			8a	X				
9	Each committee with authority to act on behalf of the governing body?	م اد داد	1 11 -	8b	^				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? If "Yes," provide the names and addresses in Schedule O	cned a	t the	9		х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re		0-4-1	1 9					
	This Section B requests information about policies not required by the internal Re	venue	Code.j		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a	163	X			
	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napters	affiliates	100					
	and branches to ensure their operations are consistent with the organization's exempt purposes?		, aa.oo,	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•	J	11a	X				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cont	licts?	12b	Х				
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? # "	Yes," d	escribe						
	in Schedule O how this was done	,		12c	X				
13	Did the organization have a written whistleblower policy?			13	Х				
14	Did the organization have a written document retention and destruction policy?			14	X				
15	Did the process for determining compensation of the following persons include a review and approve	al by inc	dependent		l '				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>			
b	Other officers or key employees of the organization			15b	Х				
	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 arrange	ment w	ith a	<u> </u>	,	لـــِـا			
	taxable entity during the year?			16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				*				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization	's	<u> </u>					
200	exempt status with respect to such arrangements? tion C. Disclosure			16b	i				
17 10	List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an arresponding to make the Forms 1003 (or 1004) from the body and 1003.		== E01(=\(0\)= ==\\\\ -	ا ط دارون					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7 for public repression. Indicate how you made these qualible. Check all that each	(Section)	on out(c)(3)s only) a	vanabl	E				
	for public inspection Indicate how you made these available Check all that apply X Own website X Another's website X Upon request Other (explain)								
10	(explain in concess c)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	HIHCT O	interest policy, and	шапо	ıdı				
20	statements available to the public during the tax year	oko az	l records:						
20	State the name, address, and telephone number of the person who possesses the organization's bo- Robert Bugert, Executive Director - 509-667-9708	oks and	records						
	P.O. Box 4461, Wenatchee, WA 98807								
	DOR HOMUCOMEE, HA JUUU/								

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

List persons in the following order: individual trustees or directors: institutional trustees, officers, key employees; highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per	box	not cl	Posi heck i	more 'son ::	than o	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Geordie Romer	1.60						Į	1		
Past President		X		<u></u>		<u> </u>		0.	0.	0.
(2) Ann Schaechtel	2.20		ŀ			l		_	_	_
Treasurer / Secretary	ļ <u>.</u>	X	_	Х	<u> </u>	<u> </u>	L	0.	0.	0.
(3) David Visser	1.60							_	_	
President	ļ	X		Х	L	<u> </u>		0.	0.	0.
(4) Andy Dappen	1.10							<u> </u>	_	_
Board Member		X		<u> </u>		<u> </u>		0.	0.	0.
(5) Anne Hessburg	1.10									_
Board Member		X	_	<u> </u>	L.	<u> </u>		0.	0.	0.
(6) Paul Hessburg	1.10	ļ								
Board Member	<u> </u>	X	L.			<u> </u>	ļ	0.	0.	0.
(7) Jennifer Korfiatis	1.10	ļ								
Board Member	ļ	X	_	_		<u> </u>	_	0.	0.	0.
(8) Steve Milner	1.10	ļ						_		
Board Member	<u> </u>	X	1_	_		<u> </u>	ļ	0.	0.	0.
(9) Heather Ostenson	1.10				ļ				_	
Board Member	 	Х	ļ			ļ	<u> </u>	0.	0.	0.
(10) John Lehmkuhl	1.10							_	_	_
Vice President	<u> </u>	X		X	L	ļ	_	0.	0.	0.
(11) Chris Stahler	1.10]				ľ	ŀ			
Board Member		X	<u>.</u>				<u> </u>	0.	0.	0.
(12) Hans Van Someren Greve	1.10]	İ					_	_	_
Board Member	<u> </u>	X	<u> </u>		<u> </u>	↓_		0.	0.	0.
(13) Jack Mynatt	1.10]				İ				
Board Member		Х		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(14) John Zanol	1.10]	1				1		_	_
Board Member		X					L	0.	0.	0.
(15) Suzanne Hartman	1.10					1				
Board Member		X			L		L	0.	0.	0.
(16) Bruce Williams	1.10]					[İ	
Board Member		X		_			L	0.	0.	0.
(17) Jennifer Taylor	1.10]								_
Board Member		X				<u> </u>		0.	0.	<u>0.</u>

(A)	(B)						it C	(D)	(E)		(F)	
Name and title	hours per week (list any . hours for related	box	not cl unles cer an	heck i ss per	more son i	than is both	tee)	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)		Estimate amount of other compensation the organization	of tion e on
	lorganizations below line)	Individual tru	Institutional trustee	Officer	кеу етріоуее	Highest compensate employee	Former				and related organizations	
(18) Tina Scull	1.10										-	
Board Member									0.			
(19) Charlie Naismith Board Member	1.10	х						0.	0			0.
		-						· ·		†		
		-				\vdash				\dagger	<u> </u>	
						-				\parallel		
						 				+		
		_				-				\dashv		
		_			<u> </u>	-				+		
					Ĺ		<u> </u>			1		
1b Sub-total	l C4: A							0.		$\cdot \mid$		0.
 Total from continuation sheets to Part VI Total (add lines 1b and 1c) 	i, Section A							0.		$^{+}$		0.
Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	o re		L			
compensation from the organization				_							Yes	0 No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplc	yee.	ori	highest compensated er	nployee on			
line 1a? If "Yes," complete Schedule J for s								_		-	3	Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$150								•	he organization	ŀ	4	Х
5 Did any person listed on line 1a receive or a									dual for services	<u> </u>	-	
rendered to the organization? If "Yes," com	•				•						5	Х
Section B. Independent Contractors												
 Complete this table for your five highest co the organization. Report compensation for 									·	Isati	on from	
(A) Name and business			ONI					(B) Description of s		Co	(C) empensation	n
		TA	2141									
					_							
								· · · · · · · · · · · · · · · · · · ·				
	··-										-	
								-			·	
2 Total number of independent contractors (i \$100,000 of compensation from the organi	-	ot lır	nited	d to	tho	se lis O	ted	above) who received m	ore than			

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		Check if Schedule O conta	ins a response o	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b b	Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grants)	s, and	92,578. 227,968. 275,824.				
플Q	_	similar amounts not included above		$\frac{273,624.}{164,673.}$,			
i d	g	Noncash contributions included in lines 1a Total. Add lines 1a-1f	a-1f 5		1,596,370.			
Ora		Total. Add lines Ta-11		Business Code				
	2 a			Business Code		-	· · · · · · · · · · · · · · · · · · ·	
Š	b	· · · · · · · · · · · · · · · · · · ·						
Ser	c	· · · · · · · · · · · · · · · · · · ·	i					
E 3	d							
Program Service Revenue	e				-			
<u>r</u>	f	All other program service rever	nue					
	. 9	Total. Add lines 2a-2f	,	>		,		
	3	Investment income (including of	dividends, intere	st, and				
		other similar amounts)		>	79,987.			79,987.
	4	Income from investment of tax	exempt bond p	roceeds	<u> </u>			
	5	Royalties		•				
			(ı) Real	(II) Personal	, ,	,	,	_
	6 a				,		,	,
- 1	b					, ,	,	,
	С	Rental income or (loss)						1
		Net rental income or (loss)						<u> </u>
l	7 a	Gross amount from sales of	(i) Securities	(ii) Other		,		1' -1
		•	170,611.		,		•	, ,
	b	Less cost or other basis	1,996.			1,17	,	
ĺ	_	and sales expenses	1,996. $168,615.$, s	
	_		100,013.	<u> </u>	168,615.	168,615.		
	d	Gross income from fundraising	evente (not		100,013.	100,013.		 -
e le	0 4	including \$	of				,	
Other Revenue		contributions reported on line] '	,		
æ		Part IV, line 18	а.	23,482.	٠,			
her	b	Less direct expenses	ь ь	16,794.	1	, , ,	•	-
ŏ		Net income or (loss) from fund	raising events	>	6,688.			6,688.
		Gross income from gaming act	_					,
		Part IV, line 19	а					
	b	Less direct expenses	b		. ,	- 1		
1	С	Net income or (loss) from gami	ng activities					
l	10 a	Gross sales of inventory, less r	eturns					
		and allowances	а					1
	b	Less cost of goods sold	b					
Ļ	С	Net income or (loss) from sales						
		Miscellaneous Revenue	<u> </u>	Business Code		<u> </u>		
	11 a							
	b		 		· · · · · · · · · · · · · · · · · · ·			
	С							
	d	All other revenue		<u> </u>		<u> </u>		-
		Total. Add lines 11a-11d		>	0.54 5.55	1.20.55-		06 655
	12	Total revenue. See instructions.			ц,851.66U•	168,615.	0.	86,675.

Form 990 (2015) Chelan-Douglas Land Trust
Part IX Statement of Functional Expenses

<u>5800</u>	on 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a response		-		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	140,163.	59,242.	62,841.	18,080.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	308,085.	247,780.	57,194.	3,111.
8	Pension plan accruals and contributions (include	2 22-			4.4.5
	section 401(k) and 403(b) employer contributions)	3,825.	2,513.	1,173.	139.
9	Other employee benefits	27,649.	23,025.	4,624.	
10	Payroll taxes	36,781.	19,501.	16,228.	1,052.
11	Fees for services (non-employees)				
a	Management	704	402	100	2.2
b	Legal	704.	483.	188.	33.
C	Accounting	17,832.		17,832.	
d	, , , , , , , , , , , , , , , , , , ,				
e	Professional fundraising services. See Part IV, line 17	00 100	· · · · · · · · · · · · · · · · · · ·	00 100	
f	Investment management fees	82,123.		82,123.	
g	, ,	7 011	2 444	F 200	1.60
	column (A) amount, list line 11g expenses on Sch O.)	7,911.	2,444.	5,298.	169.
12	Advertising and promotion	12,070.	8,274.	3,225.	E71
13	Office expenses Information technology	1,013.	694.	271.	571. 48.
14	Royalties	1,013.	094.	2/1.	40.
15 16	· · · · · · · · · · · · · · · · · · ·	15,791.	10,825.	4,219.	747.
17	Occupancy Travel	5,263.	3,608.	1,406.	249
18	Payments of travel or entertainment expenses	3,203.	3,000.	1,400.	247
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,708.	8,026.	3,128.	554.
20	Interest	11,700.	0,020.	3,120.	
21	Payments to affiliates			• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	15,369.	10,535.	4,107.	727.
23	Insurance	9,555.	6,550.	2,553.	452
24	Other expenses. Itemize expenses not covered	3,0001	0,3301	2,3331	152.
	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.)			,	
а	Program: Land and open	114,015.	114,015.		
þ	7 7 7 7	31,263.	31,263.		
c	Outreach	17,528.	17,528.		
ď	Program: Trails/trails	15,530.	15,530.		···
	All other expenses	24,867.	19,880.	2,495.	2,492
25	Total functional expenses Add lines 1 through 24e	899,045.	601,716.	268,905.	28,424
26	Joint costs. Complete this line only if the organization		,		
	reported in column (B) joint costs from a combined		1		
	educational campaign and fundraising solicitation.				
	Check here fifther if following SOP 98-2 (ASC 958-720)				
	ir following 5OP 98-2 (ASC 958-720)			<u></u>	= 000 (aa)

Pai	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest bearing	215,865.	1	305,040.
	2	Savings and temporary cash investments	321,973.	2	597,675.
	3	Pledges and grants receivable, net	161,325.	3	29,281.
	4	Accounts receivable, net		4	58,560.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other 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			
sts		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖ :	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	24,800.	9	17,714.
	10 a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 559,588.			440 070
		Less accumulated depreciation 10b 116,718.	457,275.	10c	442,870.
	11	Investments · publicly traded securities	F F01 202	11	F 700 143
	12	Investments other securities See Part IV, line 11	5,501,283.	12	5,789,143.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets	14,664,876.	14	15,016,118.
	15	Other assets See Part IV, line 11	21,347,397.	15 16	22,256,401.
	<u>16</u> 17	Total assets. Add lines 1 through 15 (must equal line 34)	140,801.	17	41,913.
	18	Accounts payable and accrued expenses Grants payable	140,001.	18	41,513.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees,	, , , , , , , , , , , , , , , , , , , ,		3 67
Liabilities		key employees, highest compensated employees, and disqualified persons			
ig		Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	280,000.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of		l	
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	140,801.	26	321,913.
		Organizations that follow SFAS 117 (ASC 958), check here X and			,
S	,	complete lines 27 through 29, and lines 33 and 34.			, , ,
2	27	Unrestricted net assets	6,317,476.	27	6,753,423.
<u>a</u>	28	Temporarily restricted net assets	6,263,609.	28	6,411,008.
9 B	29	Permanently restricted net assets	8,625,511.	29	8,770,057.
ם		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances		and complete lines 30 through 34.	`	<u> </u>	
ets	30	Capital stock or trust principal, or current funds		30	
\ss(31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et 🌶	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	21,206,596.		21,934,488.
	34_	Total liabilities and net assets/fund balances	21,347,397.	34	22,256,401.

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Par	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
				0.5			
1	Total revenue (must equal Part VIII, column (A), line 12)	_1		, 85			
2	Total expenses (must equal Part IX, column (A), line 25)	2			9,04		
3	Revenue less expenses Subtract line 2 from line 1		952,615				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		, 20				
5	Net unrealized gains (losses) on investments	5		224	<u>,72.</u>	<u>3.></u>	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	21	<u>,93</u>	4,48	<u>88.</u>	
Pai	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
			r		Yes	No	
1	Accounting method used to prepare the Form 990:				-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule)				لــــا	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis				,	ш	
þ	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		- `]			
	consolidated basis, or both.					i l	
	X Separate basis Consolidated basis Both consolidated and separate basis		l			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	ŀ	· · · · ·		r	
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	L.,	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
	Act and OMB Circular A-133?						
b	b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b			
				Form	990	(2015)	

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Name of the organization

Employer identification number

_				Land II ust				1-1331340					
Pa	п П	Reason for Public C	harity Status (A	All organizations must co	mplete thi	s part.) Se	e instructions						
he	organi	zation is not a private founda	ation because it is (F	or lines 1 through 11, ch	neck only o	ne box.)							
1	Ň	A church, convention of chu					YAYi).						
2	一	A school described in secti					N- 11.7-						
3	Ħ	A hospital or a cooperative l					۸.						
	님	·	· -				•	the beentel's same					
4		A medical research organiza	ation operated in con	ijunction with a nospital	described	in section	n 170(b)(1)(A)(iii). Entei	ine nospitai s name,					
	_	city, and state						_					
5	لـــا	An organization operated fo	r the benefit of a coll	lege or university owned	or operate	ed by a go	vernmental unit describe	d 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	X												
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)		•								
8		A community trust describe	•	1)(A)(vi). (Complete Part	11.)								
9		An organization that normal				ontribution	ne mamharshin faas an	d aross receints from					
_	لسبا	activities related to its exem	•	• •			· ·	-					
			,	•	, ,		• •						
		income and unrelated busin		(less section 5 Lax) iro	m busines	ses acquir	ed by the organization a	iter June 30, 1975.					
		See section 509(a)(2). (Cor	•										
10	닉	An organization organized a	•	•	•								
11		An organization organized a	and operated exclusive	vely for the benefit of, to	perform th	ne function	ns of, or to carry out the	purposes of one or					
		more publicly supported org	ganizations described	d in section 509(a)(1) o	r section (509(a)(2)	See section 509(a)(3). (Check the box in					
		lines 11a through 11d that of	describes the type of	supporting organization	and com	olete lines	11e, 11f, and 11g.						
а		Type I. A supporting orga	nization operated, si	upervised, or controlled l	by its supp	orted orga	anization(s), typically by	giving					
		the supported organization	n(s) the power to reg	jularly appoint or elect a	majority o	f the direc	tors or trustees of the su	pporting					
		organization You must c	omplete Part IV, Se	ections A and B.			•						
ь		Type II. A supporting orga	•		on with its	s supporte	d organization(s), by hay	ina					
_		control or management of	· .										
		-			ine persor	is that coi	inor or manage the supp	ortea					
	Γ	organization(s) You mus	•				10 1 10 4 -1.	4 45					
С		Type III functionally inte						a witn,					
	_	ts supported organization	n(s) (see instructions)	You must complete F	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in coi	nection w	rith its supported organiz	ation(s)					
		that is not functionally into	egrated The organiz	ation generally must sat	isfy a distr	bution req	uirement and an attentiv	reness					
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.						
е		Check this box if the orga	inization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III						
		functionally integrated, or					, , , , , , , , , , , , , , , , , , ,						
f	Ente	r the number of supported o	• •	, g pp									
		ide the following information	•	d organization(s)									
_9) Name of supported	(ii) EIN		(IV) Is the o	rganization	(v) Amount of monetary	(vi) Amount of					
	٠,	organization	,	(described on lines 1-9	listed i	n your	support (see	other support (see					
		- 3		above (see instructions))	governing		instructions)	instructions)					
					Yes	No		·					
					 								
_								 					
		· · · · · ·											
				i				1					

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	1928457.	6610844.	2235784.	1390976.	1596370.	13762431.
2	Tax revenues levied for the organ-						
-	ization'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	1928457.	6610844.	2235784.	1390976.	1596370.	13762431.
	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,	,	_		- '	` `	ļ
	column (f)	, '					2296146.
6	Public support. Subtract line 5 from line 4		* ` `				11466285.
	ction B. Total Support	<u>'</u>					
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4	1928457.	6610844.	2235784.	1390976.	1596370.	13762431.
	Gross income from interest,						
-	dividends, payments received on]		
	securities loans, rents, royalties						
	and income from similar sources	87,266.	88,886.	99,852.	84,906.	79,987.	440,897.
۵	Net income from unrelated business			22,002.			
9	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						14203328.
	Gross receipts from related activities,	etc /see instruction	l		1	12	96,510.
	First five years. If the Form 990 is for	•	•	d fourth or fifth to	v vear as a soction	L	20,310.
13	organization, check this box and stop	_	mat, accond, thirt	a, rourin, or murta	in year as a section	1 50 1 (6)(3)	▶□
Sed	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2015 (I	``		olumn (f))		14	80.73 %
	Public support percentage from 2014	• • • • • • • • • • • • • • • • • • • •	•			15	76.40 %
	33 1/3% support test - 2015. If the			n line 13, and line	14 is 33 1/3% or m		
.50	stop here. The organization qualifies	-				,	► X
ь	33 1/3% support test - 2014. If the		•		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual	•			10 10 00 17070	5. 111616, 61166K III	▶
17:	10% -facts-and-circumstances test	, ,	• • •		e 13 16a or 16b a	and line 14 is 10%	or more.
.,,	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"			•	•		>
1-	10% -facts-and-circumstances test	=		• •	-	I7a and line 15 is	10% or
£,	more, and if the organization meets the	_					
	organization meets the "facts-and-circ				•		_
12							
10	Private foundation. If the organization	an alla not crieck a	DUA UITHINE TO, TO	a, 100, 110, 01 1/L	, check this box a	na aco manacido.	

SCHEDULE D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Chelan-Douglas Land Trust

Employer identification number 91-1331348

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, lin	ne 6				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds			
	are the organization's property, subject to the organization's		Yes No			
6	Did the organization inform all grantees, donors, and donor a	•	used only			
	for charitable purposes and not for the benefit of the donor of		•			
	impermissible private benefit?		Yes No			
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7			
1	Purpose(s) of conservation easements held by the organization					
	X Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area			
	X Protection of natural habitat	Preservation of a cer	tified historic structure			
	X Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last			
	day of the tax year		Held at the End of the Tax Year			
а	Total number of conservation easements		2a 15			
b	Total acreage restricted by conservation easements		2b 3,664.00			
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c 0			
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structi	1 1			
	listed in the National Register		2d 0			
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	organization during the tax			
	year ▶0	•				
4	Number of states where property subject to conservation ear					
5						
	violations, and enforcement of the conservation easements it holds?					
6						
	▶ <u>473</u>					
7	,					
_	► \$ <u>10,130.</u>					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170				
_	and section 170(h)(4)(B)(ii)?		X Yes No			
9	In Part XIII, describe how the organization reports conservati					
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	the organization's accounting for			
Pa	conservation easements t III Organizations Maintaining Collections or	f Art Historical Treasures or O	ther Similar Assets			
<u> </u>	Complete if the organization answered "Yes" on Form	·	ther offitial Assets.			
			want and belongs about warts of ort			
ıa	If the organization elected, as permitted under SFAS 116 (AS	·				
	historical treasures, or other similar assets held for public ext	·	ance of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that described as a second of the company o					
b	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide the following amounts			
	relating to these items		> 0			
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
_	(ii) Assets included in Form 990, Part X		\$			
2	If the organization received or held works of art, historical tre		ai gain, provide			
	the following amounts required to be reported under SFAS 1	To (ASC 958) relating to these items	• •			
a	Revenue included on Form 990, Part VIII, line 1		\$			
h	Assets included in Form 990, Part X		▶ %			

		Douglas Lan					<u>31348</u>	Page 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	r Similar	Assets	(continue	d)
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that are a s	ignificant u	se of its c	ollection ite	ms
	(check all that apply)			-				
а	Public exhibition	d	Loan or excl	nange programs				
b	Scholarly research	е	Other					
c	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	mot purpos	se in Part	XIII	
5	During the year, did the organization solicit or	•	•	•				
•	to be sold to raise funds rather than to be ma				. 400010	[Yes [No
Par	t IV Escrow and Custodial Arrang				n Form 990	Part IV		
	reported an amount on Form 990, Par		te ii tile organizatio	Tanswered 163 O	111 01111 330	, aitiv,	1110 0, 01	
10	Is the organization an agent, trustee, custodia		an for contributions	ar ather assets set	unali idad			
ıa		an or other intermedia	ary for contributions	or other assets not	included	_	ا	□ No
	on Form 990, Part X?					L	_ Yes	NO
р	If "Yes," explain the arrangement in Part XIII a	and complete the folk	owing table					
					<u> </u>		Amount	
	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for escrow or cu	stodial account liab	ılıty?		_ Yes _	No
	If "Yes," explain the arrangement in Part XIII							
Par	t V Endowment Funds. Complete	f the organization ans	wered "Yes" on Fo	rm 990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four year	ars back
1a	Beginning of year balance	3,695,627.	3,679,656.	3,210,422.	2,9	05,651.	3,01	18,178.
b	Contributions	50.	1,564.	672.		21,640.	3	36,216.
С	Net investment earnings, gains, and losses	22,387.	191,974.	630,763.	4	27,424.		2,736.
d	Grants or scholarships	151,000.	126,800.	116,000.	1	01,600.		8,000.
e	Other expenditures for facilities			· · · · · · · · · · · · · · · · · · ·				
_	and programs				1		ĺ	
f	Administrative expenses	49,694,	50,767.	46,201.		42,693.	4	13,479.
g	End of year balance	3,517,370.	3,695,627.	3,679,656.		10,422.		5,651.
2	Provide the estimated percentage of the curr			\	1			-,
		ent year end balance	,	i ileiu as				
a	Board designated or quasi-endowment ► Permanent endowment ► 76.16		_%					
		% 3_94						
С		3.84 %						
	The percentages on lines 2a, 2b, and 2c short							
За	Are there endowment funds not in the posse	ssion of the organizat	tion that are held ar	id administered for t	the organiza	ation		
	by						Ye	
	(i) unrelated organizations						3a(i) X	
	(ii) related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		vment funds					
Par	t VI Land, Buildings, and Equipm	ent.						
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a S	ee Form 990, Part X	(, line 10			
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accumulate	ed	(d) Book v	alue
	. , , .	basis (investm	1	1 ' '	epreciation			
1a	Land	36,5	590.	,			36.	590.
b	Buildings	471,8			70,5	83.		303.
2	Leasehold improvements	1,2,0			, , ,			
d	Equipment	51,1	12.		46,1	35.		977.
	• •	71,1			- TU, I.		<i></i>	<u> </u>
	Other						442	970
rota	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part 🕽	(. column (B), line 1	0c.)			<u> </u>	870.

Schedule D (Form 990) 2015

2. Liability for uncertain tax positions. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII. X

Schedule D (Form 990) 2015

(8) (9)

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

Schedule D (Form 990) 2015 Chelan-Douglas Land Trust			331348 Page 4		
Part XI Reconciliation of Revenue per Audited Financial State		turn.			
Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total revenue, gains, and other support per audited financial statements	12a	1	1,641,385.		
 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12. 		 -'- 	1,011,505.		
a Net unrealized gains (losses) on investments	2a <224,723.>				
b Donated services and use of facilities	2b 14,448.	1			
c Recoveries of prior year grants	2c	i i			
d Other (Describe in Part XIII)	2d	1			
e Add lines 2a through 2d		2e	<210,275.>		
3 Subtract line 2e from line 1		3	1,851,660.		
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 XIII)	4b				
c Add lines 4a and 4b		4c	0.		
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,851,660.		
Part XII Reconciliation of Expenses per Audited Financial State		Return	·		
Complete if the organization answered "Yes" on Form 990, Part IV, line	<u>12a </u>		012 404		
Total expenses and losses per audited financial statements		1	913,494.		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1 - 1 4 4 4 9				
a Donated services and use of facilities	2a 14,448.	1 1			
b Prior year adjustments	2b	} }			
c Other losses	2c 1.	- I			
d Other (Describe in Part XIII)	2d 1.	+	14 440		
e Add lines 2a through 2d		2e	14,449. 899,045.		
3 Subtract line 2e from line 1		3	699,045.		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1 - 1	1 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1.1			
b Other (Describe in Part XIII)	4b	+ -	٥		
c Add lines 4a and 4b		4c	0. 899,045.		
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.		5	099,043.		
	Part IV lines the and the Part V line 4	Dort V	line O. Dort VI		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any		, Parl A	, line 2, Part AI,		
illes 20 and 40, and Fart XII, lines 20 and 40. Also complete this part to provide any	additional information				
Part II, line 9:					
		•			
The Trust accomplishes its land conservation	on objectives by, a	mong	other		
means, accepting donations of interests in	real property. The	Tru	ıst		
accepts donations or purchases "conservation	on easements" on di	alif	ivina		
decepts definetions of parenages constitution	ni casements on qu	<u>u i i i i</u>	. <u>Y</u> ±11g		
properties. Conservation easements are perp	petual agreements b	etwe	en the		
Trust and private landowners through whom t	the landowners agre	e to	abide by		
certain restrictions designed to preserve t	he open space or c	onse	rvation		
value of their land; these agreements are l	oinding on all futu	re			
1			- <i>6:6</i>		
landowners. The total number of easements	n lavor of the Tru	IST 1	s iliteen		
(15).					
Upon accepting a conservation easement, the Trust assumes a perpetual					
obligation to modification of the second			nronomb		
obligation to monitor, normally on an annual basis, the affected property Schedule D (Form 990) 2015					
09-21-15		Scried	uie D (FUI III 95U) 20 15		

Schedule D (Form 990) 2015 Chelan-Douglas Land Trust Part XIII Supplemental Information (continued)	91-1331348 Page 5
to ensure that the landowners comply with the restrictions of	f the
easement. Further, the Trust is perpetually obligated to enf	orce
provisions of the easements in the event of a violation to t	he terms of
the easement. Enforcing an easement violation could involve	costly legal
or other expenses. Although conservation easements are real	property
rights, they possess little or no market value due to a resa	le market that
is essentially limited to the owner of the fee title of the	restricted
property. Because of this limited market and due to the obli	gations
inherent in easement ownership, the Trust's easement holding	s are recorded
on the statements of financial position using a one dollar p	olaceholder.
Part V, line 4:	
To acquire land and easements for conservation purposes.	
Part X, Line 2:	
The Trust has adopted the provisions of FASB ASC 740-10. Man	agement has
evaluated the Trust's tax positions and concluded the Trust	has taken no
uncertain tax positions requiring adjustment to the financia	ıl statements
to comply with these provisions. With few exceptions, the Tr	rust is no
longer subject to income tax examinations by U.S. Federal ta	x authorities
for the years before 2012.	
Part XII, Line 2d - Other Adjustments:	
Rounding	1.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Inspection

Employer identification number

91-1331348 Chelan-Douglas Land Trust Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations eГ Solicitation of non-government grants а Solicitation of government grants b Internet and email solicitations Special fundraising events Phone solicitations C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) fundraiser have custody or control of contributions? to (or retained by) (ii) Activity from activity fundraiser or entity (fundraiser) organization listed in col (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and growth	•	· · · · · · · · · · · · · · · · · · ·			
		· ·	(a) Event #1 Trail Run	(b) Event #2 Annual Dinner	(c) Other events None	(d) Total events (add col (a) through	
			(event type)	(event type)	(total number)	col. (c))	
ne			(event type)	(CVCIII (ypc)	(total fioribol)		
Revenue	1	Gross receipts	10,534.	12,948.		23,482.	
	2	Less Contributions					
	3	Gross income (line 1 minus line 2)	10,534.	12,948.		23,482.	
	4	Cash prizes					
S	5	Noncash prizes					
xpense	6	Rent/facility costs					
Direct Expenses	7	Food and beverages				, , , , , , , , , , , , , , , , , , , 	
	8	Entertainment					
	9	Other direct expenses	1,993.	14,801.		16,794.	
	10	Direct expense summary Add lines 4 through	9 in column (d)		>	16,794.	
	11	Net income summary Subtract line 10 from li	ne 3, column (d)		> _	6,688.	
P	irt l		answered "Yes" on Forn	n 990, Part IV, line 19, or r	eported more than		
	,	\$15,000 on Form 990-EZ, line 6a	т	T	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
æ	١.	Crass reverse					
	1	Gross revenue				 	
ses	2	Cash prizes					
Direct Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					
			Yes%		Yes %		
	6	Volunteer labor	No	No	□ No	´= ` · · ·	
	7	Direct expense summary. Add lines 2 through	n 5 ın column (d)		>		
	_	Not coming upon a suppose Subtract	from line 4 . set / "				
	8	Net gaming income summary Subtract line 7	from line 1, column (a)				
9		ter the state(s) in which the organization condu	_	atataa?		Yes No	
a is the organization licensed to conduct gaming activities in each of these states? b if "No," explain						185 <u>[</u>] 140	
•							
10	We	ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax y	ear?	Yes No	
ŀ	o If "	If "Yes," explain					
	_		······································	· · · · · · · · · · · · · · · · · · ·			
				·			

Schedule G (Form 990 or 990-EZ) 2015 Chelan-Douglas Land Trust

91-1331348 Page 2

SCHEDULE L

Department of the Treasury

Internal Revênue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

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

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Chelan-Douglas Land Trust

Employer identification number

91-1331348 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990 EZ, Part V, line 40b (d) Corrected? (b) Relationship between disqualified (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) Relationship (d) Loan to or (h) Approved (c) Purpose (i) Written (e) Original (g) in (f) Balance due by board or from the interested person with organization of loan principal amount default? agreement? committee? organization? To From Yes No Yes No Yes No Total **\$** Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (c) Amount of (d) Type of (e) Purpose of (b) Relationship between assistance assistance assistance interested person and the organization

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

Schedule L (Form 990 or 990-EZ) 2015

Schedule L (Form 990 or 990 EZ) 2015 Chelan	-Douglas Land Trust		91-1331	348	Page 2
Part IV Business Transactions Involvi	ng Interested Persons.				
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	b, or 28c		(a) OF	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		aring of zation's nues?
Debaut Busant Busantine D	Debeut course on th		In 2015, Ch	Yes	No X
Robert Bugert, Executive D	Robert serves on th	U.	III 2015, CII		_
Part V Supplemental Information	<u> </u>	 		L	
Provide additional information Provide additional information for response	onses to questions on Schedule I. (see i	nstructions)			
Trovide additional mornation for respe	wided to questions on concease E (655)	1011 001101107.			
Sch L, Part IV, Business T	ransactions Involvin	g Intereste	d Persons:		
(a) Name of Person: Robert	Bugert, Executive D	irector			
(b) Relationship Between I	nterested Person and	Organizati	on:		
Robert serves on the Board	of the Icicle Fund,	a nonprofi	t organizat	ion.	
(c) Amount of Transaction			J		
(c) modific of framedector	y (d) Beschiperon o				
(d) Description of Transac	tion: In 2015, Chela	n-Douglas L	and Trust		
received grants and awards	from the Icicle Fun	d for opera	tional and		
program support in the amo	unt of \$251,268.				
(e) Sharing of Organization	n Revenues? = No				
		-			
					-, -, -,
		····			
				=	
					
	<u> </u>			· · · · · · · · · · · · · · · · · · ·	

91-1331348 Page 2

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Department of the Treasury Internal Revenue Service

Inspection

Name of the organization

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

91-1<u>331348</u> Chelan-Douglas Land Trust Types of Property Part I (d) (a) (b) (c) Noncash contribution Method of determining Check if Number of contributions or amounts reported on noncash contribution amounts applicable tems contributed Form 990, Part VIII, line 1q Art · Works of art Art · Historical treasures Art Fractional interests 3 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 4,859. Fair market value 2 Х 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other Real estate - Residential 15 16 Real estate - Commercial 159,814. Appraised fair value X 17 Real estate - Other 18 Collectibles Food inventory 19 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other 26 Other 27 Other 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes_ No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for X exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х 32a contributions? b If "Yes," describe in Part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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describe in Part II

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Chelan-Douglas Land Trust

Employer identification number 91-1331348

Form 990, Part VI, Section A, line 2:
Anne Hessburg is the daughter of Paul Hessburg
Form 990, Part VI, Section A, line 6:
Members
Form 990, Part VI, Section A, line 7a:
As set in our bylaws, current members are entitled to one vote for each of
the Director positions open at any given time. Directors are elected in
February each year through an election conducted by mail and online.
Form 990, Part VI, Section B, line 11:
The Finance committee reviews the Form 990 and then gives it to the Board
of Directors for approval prior to filing.
Form 990, Part VI, Section B, Line 12c:
At a minimum, at every Board or Committee meeting anyone, including
Counsel, who has a conflict with a topic being discussed, recuses
themselves when the topic comes up. This recusal is reflected in the Board
Minutes. When individuals are considered for nomination to the Board or a
committee, any potential conflicts are raised and ways they can be
addressed are discussed.
Form 990, Part VI, Section B, Line 15:
The process for determining compensation of officers and key employees is
based upon a review by the Executive Committee using salary surveys and
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Schedule O (Form 990 or 990-EZ) (2015)