Department of the Treasury

DLN: 93493198017548

2016

OMB No 1545-0047

Open to Public

Return of Organization Exempt From Income Tax

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

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

пста									Inspection
A Fo	or the	2016 ca	lendar year, or tax year beginn	ing 10-01-2016 , and endi	ng 09-3	0-2017	1		
		oplicable	C Name of organization AMERICAN FARMLAND TRUST				D Employe	er identifi	ication number
	aress c me cha	change ange					52-1190	211	
□ Ini	tıal reti	-	Doing business as						
Fin Detur		ninated	Number and street (or D.O. hov if man	Lio not delivered to etreet address.	I Daam /au		E Telephon	e number	
_		return	Number and street (or P O box if mai 1150 Connecticut Avenue NW No 600	is not delivered to street address)	Room/su	rte	(202) 3	31-7300	
☐ Apı	plicatio	n pending	City or town, state or province, count	y, and ZIP or foreign postal code			(202) 3	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
			WASHINGTON, DC 20036				G Gross re	ceipts \$ 12	2,728,502
			F Name and address of principal	officer		H(a) Is this	a group ref	urn for	
			JOHN PIOTTI 1150 Connecticut Avenue NW No	600		subor	dinates?		□Yes 🗹 No
			WASHINGTON, DC 20036			H(b) Are al	l subordinat	es	☐ Yes ☐No
Tax	x-exem	npt status	☑ 501(c)(3) ☐ 501(c)() ◄ (III	sert no)	J 527			ıst (see	instructions)
W	ebsite	e:► WW	W FARMLAND ORG			H(c) Group	exemption	number	>
						I Vaar of form	tion 1000	M Chata	of logal dominile. DC
∢ Forn	n of or	ganızatıon	Corporation Trust Associ	ation ☐ Other ►		L Year of forma	ation 1980	M State	of legal domicile DC
Pa	rt I	Sumr	marv						
			cribe the organization's mission or	most significant activities					
7.1			ON OF AMERICAN FARMLAND TRUS and keeping farmers on the land	ST is to save the land that sust	ains us b	y protecting fa	armland, pro	moting s	sound farming
ž	=	nactices a	ind keeping farmers on the land						
Ē	-								
ACUMUES & GOVERNANCE		Charle the	s box 🕨 🗌 If the organization disc	entinued its enerations or disp	acad of m	oro than 25%	of its not a	rcotc	
5			of voting members of the governing					3	19
O ∧ 1	4	Number o	of independent voting members of t	he governing body (Part VI, lir	ne 1b) .			4	19
	5	Total num	nber of individuals employed in cale	ndar year 2016 (Part V, line 2	a)			5	78
٥	6	Total num	nber of volunteers (estimate if nece	ssary)				6	19
٦,	7a -	Total unre	elated business revenue from Part \	/III, column (C), line 12 .				7a	0
	ь	Net unrela	ated business taxable income from	Form 990-T, line 34				7b	0
						Pri	or Year		Current Year
<u>q</u> :			ons and grants (Part VIII, line 1h)				8,687,1		10,400,685
Ravenua		-	service revenue (Part VIII, line 2g)				333,2	_	39,125
Ę.	l		nt income (Part VIII, column (A), li	· · ·	•		433,0	_	263,304
			enue (Part VIII, column (A), lines 5 enue—add lines 8 through 11 (musi		12)		107,1 9,560,6		58,974 10,762,088
			id similar amounts paid (Part IX, co	, , , , , , , , , , , , , , , , , , , ,			3,300,0	0	0
	l		paid to or for members (Part IX, col					0	0
ري دي			other compensation, employee ben				5,025,7	-	5,578,080
15.6	l	•	nal fundraising fees (Part IX, colum	, , , , , , , , , , , , , , , , , , , ,	•		297,3		180,000
Expenses	Ь.	Total fundra	aising expenses (Part IX, column (D), lin	≥ 25) ▶2,409,046			<u> </u>		·
Δ	17	Other exp	penses (Part IX, column (A), lines 1	1a-11d, 11f-24e)			5,531,3	315	5,123,563
	18	Total expe	enses Add lines 13–17 (must equa	Part IX, column (A), line 25)			10,854,3	357	10,881,643
	19	Revenue l	less expenses Subtract line 18 from	n line 12			-1,293,7	731	-119,555
S & S						Beginning	of Current Y	ear	End of Year
Net Assets or Fund Balances	20 .	Total acca	ets (Part X, line 16)				22,357,7	708	24,365,385
d B	l		lities (Part X, line 26)				2,235,3	_	1,888,355
E E			s or fund balances Subtract line 21				20,122,4	_	22,477,030
Par	t II		ature Block						
Jnder	pena	lties of pe	erjury, I declare that I have examır						
	eage nowle		f, it is true, correct, and complete	Declaration of preparer (other	than offic	er) is based o	n all informa	ation of v	vnich preparer nas
		TA							
••••		Signatu	re of officer			201 Dat	<u>8-07-17</u> e		
Sign Here		l Jahr Du	att. Described and CEO						
			otti President and CEO print name and title						
			rint/Type preparer's name	Preparer's signature	D	ate		TIN	
Paid	t	R	Michael Sorrells	R Michael Sorrells			ck 🔲 ıf F -employed	00001737	,
	pare	;ı ⊢	rm's name Tate & Tryon			Firr	n's EIN 🟲 52-		
-	Onl	1 =	rm's address ▶ 2021 I st nw suite 400			Pho	ne no (202) :	293-2200	
			washington, DC 20036						
			this return with the preparer show	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u></u> .	<u> </u>	✓ Y	es 🗆 No
or P	aperv	work Red	luction Act Notice, see the sepa	rate instructions.		Cat No 1	1282Y		Form 990 (2016)

Form	990 (20	016)					Page 2
Par	t III	Statement	of Program Servic	e Accomplis	hments		
		Check of Sched	lule O contains a respo	onse or note to a	any line in this Part III		🗹
1	Briefly		rganızatıon's mıssıon				
		N OF AMERICAN		to save the land	that sustains us by pro	otecting farmland, promoting sound	farming practices and
2	Did the	e organization (undertake any significa	int program serv	vices during the year wh	nich were not listed on	
	the pri	or Form 990 or	990-EZ?				☐ Yes 🗹 No
	If "Yes	," describe the	se new services on Sch	nedule O			
3	Did the	e organization d	cease conducting, or m	ake significant o	changes in how it condu	ıcts, any program	
	service	es?					🗌 Yes 🗹 No
	If "Yes	," describe thes	se changes on Schedul	e O			
4	Section	n 501(c)(3) and		ons are required	to report the amount o	largest program services, as measu f grants and allocations to others, t	
4a	(Code) (Expenses \$	5,543,414	including grants of \$) (Revenue \$	39,125)
	See Ad	ditional Data					
4b	(Code) (Expenses \$	1,882,377	including grants of \$) (Revenue \$)
	See Ad	ditional Data					
4c	(Code) (Expenses \$	287,010	including grants of \$) (Revenue \$)
	See Ad	ditional Data					
	(Code) (Expenses \$	341,642	ıncludıng grants of \$) (Revenue \$)
4d		program servic	es (Describe in Schedi	ıle O)) (Revenue \$)
4d			es (Describe in Schedi	,) (Revenue \$) (Revenue \$)

or X as applicable

Page 3

No

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Did the organization receive or hold a conservation easement, including easements to preserve open space,

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦

Yes

6

7

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9

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11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

Nο Nο No Yes

Yes

Yes

Yes

Yes

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

Nο

No

Nο

Form 990 (2016)

29

No

Νo

Nο

No

Nο

Nο

Nο

Νo

Nο

Page 4

Part IV Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,"

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

If "Yes," complete Schedule L, Part II

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

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

Yes

Yes

20a

20b

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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35a

35h

36

37

Yes

Form 990 (2016)

Nο Νo

orm	990 (2016)			Page !
Par	t 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
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 67			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	<u> </u>		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	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	2b	Yes	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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		
4a	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		No
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)			140
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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 charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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 service provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
c	Enter the amount of reserves on hand			
4-	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
.4a	bid the organization receive any payments for indoor tarning services during the tax year.			

OIIII	330 (Z	.010)							Page
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to li 8a, 8b, or 10b below, describe the circumstances, processes, or changes in					o" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI							✓
Se	ction	A. Governing Body and Management					-		
								Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax	year	1a		19			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committ r committee, explain in Schedule O							
b	Enter	the number of voting members included in line 1a, above, who are independ	dent	1b		19			
2		ny officer, director, trustee, or key employee have a family relationship or a r, director, trustee, or key employee?	busines:	s rela	tionship with an		2		No
3		ne organization delegate control over management duties customarily perfori cers, directors or trustees, or key employees to a management company or				pervisio	3		No
4	Did th	e organization make any significant changes to its governing documents sin	nce the p	rior F	orm 990 was file	ed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of th	ne organi	ızatıo	n's assets? .		5		No
6		ne organization have members or stockholders?				_	6		No
		ne organization have members, stockholders, or other persons who had the p	nower to	elec	t or appoint one	or more			
	memb	pers of the governing body?					7a 7b		No No
	perso	ns other than the governing body?				•	,,		110
	the fo	ne organization contemporaneously document the meetings held or written a illowing	actions u	ndert	aken during the	year by			
а	-	overning body?					8a	Yes	
b		committee with authority to act on behalf of the governing body?		•			8b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A ization's mailing address? If "Yes," provide the names and addresses in Sche			be reached at t	he •	9		No
Se	ction	B. Policies (This Section B requests information about policies no	t requii	red b	y the Internal	Revenu	ie Code	e.)	
								Yes	No
10a	Did th	e organization have local chapters, branches, or affiliates?					10a	Yes	
b		s," did the organization have written policies and procedures governing the a ranches to ensure their operations are consistent with the organization's exe				iliates,	10b	Yes	
11a	Has th	ne organization provided a complete copy of this Form 990 to all members o	of its gov	ernın	g body before fil	ing the •	11a	Yes	
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this	ıs Form 9	990					
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 1.	3				12a	Yes	
b	Were conflic	officers, directors, or trustees, and key employees required to disclose annu	ually inte	rests	that could give	rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance wi Jule O how this was done	ith the p	olicy	? If "Yes," descri	be ın	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?					13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?					14	Yes	
15		ne process for determining compensation of the following persons include a rins, comparability data, and contemporaneous substantiation of the deliberat				endent			
а	The o	rganization's CEO, Executive Director, or top management official					15a	Yes	
b	Other	officers or key employees of the organization					15b	Yes	
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a		e organization invest in, contribute assets to, or participate in a joint ventur le entity during the year?	re or sım	nılar a •	rrangement with	1 a	16a		No
b	ın joir	s," did the organization follow a written policy or procedure requiring the org it venture arrangements under applicable federal tax law, and take steps to s with respect to such arrangements?					16b		
Se	ction	C. Disclosure							
17	List th	, MI		1 , 2M	, CT , FL , GA , NH , NJ , NM , N' / . WI				
18		on 6104 requires an organization to make its Form 1023 (or 1024 if applicab ble for public inspection Indicate how you made these available Check all t	ole), 990	, and		3)s only)			
	✓ 0	Own website 🔲 Another's website 🗹 Upon request 🔲 Other (explai	ıın ın Sch	nedule	e O)				
19	Descr	ibe in Schedule O whether (and if so, how) the organization made its govern , and financial statements available to the public during the tax year			•	erest			
20	State	the name, address, and telephone number of the person who possesses the	e organiz	ation	's books and rec	ords			

orm 990 (2	2016)	Page 7
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	
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
La Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's	tax

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

(B)

(A)

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

11050 PIONEER TRAIL SUITE 202 TRUCKEE, CA 96161

KALBIAN HAGERTY LLP

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Form 990 (2016)												Page 8
Part VII Section A. Officers, Direct	tors, Trustees	, Key	Empl	loye	es,	and	High	nest Compensat	ed Employees (c	ontinue	!d)	
(A) Name and Title	(B) Average hours per week (list any hours for related	than d	one b	ox, u n off or/t	t che inles ficer	eck moss pers	son	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W 2/1099-MISC)	amo cor	mpens from t	ited f other sation
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 MISC)	2,1033 (1136)		relate ganiza	ed
See Additional Data Table												
b Sub-Total	Part VII, Sectio	nΑ.	· ·			*		1,368,074	0			186,78
d Total (add lines 1b and 1c) Total number of individuals (includin of reportable compensation from the	g but not limited	to thos			bove	e) who	rece	· · · · ·				100,700
Did the organization list any former	officer director	or truct	oo k	01/ 01	mple	0,400	or bu	ahost componento	d amplayee en	,	Yes	No
line 1a? If "Yes," complete Schedule For any individual listed on line 1a, i	J for such individ	dual .	٠	•	•		•			3	-	No
organization and related organization	ns greater than \$	150,00	0? <i>If</i>	"Yes	," c					4	Yes	
Did any person listed on line 1a rece services rendered to the organization									dividual for	5		No
Section B. Independent Contrac	tors											
Complete this table for your five high from the organization. Report competents.	ensation for the o								on's tax year	ensatio		
Name a	(A) and business addres	is						Desc	(B) ription of services	С	(C) ompen	
RODUCTION SOLUTIONS INC								DIRECT MAIL	PRODUCTION		1,	036,927
953 GALLOWS ROAD STE 600 IENNA, VA 221823988												
OAL GRIFFITH RAGULA LLC 30 ADMIRAL COCHRANE DRIVE SUITE 2								FINANCE SER	VICES			394,352
NNAPOLIS, MD 21401 IDOLON COMMUNICATIONS								DIRECT MAIL	PRODUCTION	+		230,866
.5 MAIDEN LANE SUITE 1401 IEW YORK, NY 10038												•
ONSERVATION SCIENCE PARTNERS								MAPPING/AN SERVICES	ALYSIS/COMMUNICATO	NS		197,470

888 17TH STREET NW SUITE 1000 WASHINGTON, DC 20006 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 6

LEGAL SERVICES

117,082

Part		(2016) Statement of	Revenue								Page 9
				a respo	onse or note to any l	ine in this Pa	rt VIII				<u> </u>
						(A) Total reven	ue	(B) Related or exempt function		(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1 a	Federated campaign	ns	1a	30,057			revenue			512-514
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues		1b							
3ra nou		c Fundraising events		1c							
IS. (d Related organizatio		1d							
Giff ilar		e Government grants (co		1e	1,863,412						
ıs,	١,	F All other contributions,	, gıfts, grants,		<u> </u>						
er S		and similar amounts na above	ot included	1f	8,507,216						
寶	٩	g Noncash contribution	ons included								
Contributions, Giffs, Grants and Other Similar Amounts		ın lınes 1a-1f \$									
ರ ಕ	<u> h</u>	Total.Add lines 1a-1	f			10,400,	585				
FI e					Business						
-Ver	2a	Conference Income				900004	39	9,125	39,125		
ı, Ç	b	•									
rvic	С										
ઝ	d e										
Jran		All other program se	rvice revenue	<u> </u>							
Program Service Revenue		Total. Add lines 2a-2f			:	39,125					
		Investment income (ii			nterest, and other						
	s	similar amounts) .			>		267,016				267,016
		Income from investme							4		
	5	Royalties	(ı) Rea		(II) Personal				+		
	6a	Gross rents	(I) Kea	ı	(II) Personal						
	-	0.000.000		9,000							
	b	Less rental expenses		0							
	c	Rental income or		9,000							
		(loss)					0.000				
	d	Net rental income o					9,000				9,000
	7a	Gross amount	(ı) Securi	ties	(II) Other						
		from sales of assets other	1,9	62,702							
		than inventory									
	b	Less cost or other basis and	1.0	966,414							
	_	sales expenses		-3,712							
		Gain or (loss) Net gain or (loss)		,		1	-3,712				-3,712
		Gross income from fi			<u> </u>		-/:		+		
e n		(not including \$		of							
-B		contributions reporte See Part IV, line 18		a	}						
Other Revenue	b	Less direct expense	s	b							
er	c	: Net income or (loss)	from fundrais	sing ev	ents	<u></u>					
Oth	9a	Gross income from g See Part IV, line 19		ies							
		2301 410 21, 11110 25		а	1						
	b	Less direct expense	s	b							
		: Net income or (loss)		activit	ies >						
	10a	Gross sales of invent returns and allowand									
				а	}						
	b	Less cost of goods s	sold	b							
	С	Net income or (loss)		invent							
	11	Miscellaneous aLIST RENTAL INCON			Business Code 900099		26,459				26,459
		aLIST RENTAL INCOM	/IE		300033		20,433				20,433
	h	recaptured expenses			900099		12,922		+		12,922
	_	recaptured expenses	•				,				
		other income			900099		10,593		+		10,593
	_	other miconie					,				
	d	All other revenue .							+		
		Total. Add lines 11a			▶				+		
	12	: Total revenue. See	Instructions				49,974		+		
					- P	10,	762,088	39,1	25		0 322,278 Form 990 (2016)

IV, line 22

and 16

b Legal

c Accounting

key employees

section 4958(c)(3)(B)

7 Other salaries and wages

9 Other employee benefits . 10 Payroll taxes . . .

11 Fees for services (non-employees) a Management . . .

d Lobbying

12 Advertising and promotion

14 Information technology

13 Office expenses

15 Royalties . 16 Occupancy .

17 Travel .

20 Interest

d

23 Insurance .

Part X Statement of Functional Expenses

1 Grants and other assistance to domestic organizations and

2 Grants and other assistance to domestic individuals. See Part

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

Pension plan accruals and contributions (include section 401

. .

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ If following SOP 98-2 (ASC 958-720)

g Other (If line 11g amount exceeds 10% of line 25, column

f Investment management fees . . .

.

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O)

a Newsletter & Publishing

b Equipmt/Software & Stor

c DONATIONS AWARDS

e All other expenses

(k) and 403(b) employer contributions) .

domestic governments See Part IV, line 21

4 Benefits paid to or for members

Statement of Functional Expenses										
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other org	janıza	tions	mus	st co	mp	lete	colu	ımn	(A)	
Check if Schedule O contains a response or note to any line in this Part IX										
		-	n \					\overline{a}		_

26,052

95,771

3,664

26,336

9,830

14,084

7,931

5,032

65,814

60,048

71,145

13.947

2,252

9,189

1,017

145

3,664

1,297

418,154

0

936

_

218,553

803,432

30,735

220,940

82,466

13,132

7,395

180,000

21,526

65,244

4.003

258,454

71,626

185.471

29,945

39,307

4,351

151,241

15,675

5,550

2,409,046

Form 990 (2016)

408,220

ion 50	1(c)(3) a	nd 501(c)(4) organization	s must c	complete all c	columns	All other o	rganı	zatio	ns r	nust	com	plet	e co	lum	n (A	4)	
	Check i	f Schedule C	contains a re	sponse o	or note to an	y line in t	hıs Part IX	.										

Check if Schedule O contains a response or note to any	/ line in this Part IX			
Oo not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	

✓

(D) Fundraisingexpenses

N 4			A . A 15	Cl-				(E	3)			C)		
C	Check If Sche	dule O c	ontains a r	esponse or r	ote to an	y line in this Part	ιx .							
,	, , ,	. ,. ,	-		•		_						` ′	

Do not include amounts reported on lines 6h	(4)		(B)		(C)			_
Check if Schedule O contains a response or note to an	y line in this Part IX									

898,961

3,304,712

126,422

908,781

339,204

121,131

68,211

180,000

105,994

19.712

1,504,154

1,270,911

477,173

507,974

82,014

193,550

21,425

646,802

77,185

27,327

10,881,643

2,290,596

654,356

2,405,509

92,023

661,505

246,908

93,915

52,885

79,436

14.773

952,409

334,402

308.556

49,817

145,054

16,057

495,416

57,846

20,480

8,054,443

1,882,376

1,373,096

Form 990 (2016)

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

II of Schedule L

Part II of Schedule L

Notes and loans receivable, net Inventories for sale or use . . .

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

basis Complete Part VI of Schedule D

Intangible assets

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Less accumulated depreciation

229 1 230 Cash-non-interest-bearing . 973.908 1.771.329 2 Savings and temporary cash investments . . . 2 3,896,455 3 4,475,285 3 Pledges and grants receivable, net . . . 589.782 4 544,498 Accounts receivable, net .

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 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 employees' beneficiary organizations (see instructions) Complete

1,540,406

981.749

10a

10b

5 6

8

9

10c

11

12

13

14

15

16

17

18

19

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21

22 23

24

25

26

27

28

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30

31

32

33

34

48.267

730.324

465.523

881.584

443,261

5.303

905.244

2,235,392

10.932.264

6,151,813

3.038.329

20,122,406

22.357.798

22,357,798

15.653.310

Page **11**

58.918

558,657

448.787

921,911

110,769

O

855.675

1,888,355

12.062.962

7,375,739

3.038.329

22,477,030

24.365.385

Form **990** (2016)

24.365.385

16.507.681

☐ Both consolidated and separate basis

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

2b

2c

3a

3b

Yes

Yes

Yes

Yes Form 990 (2016)

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 52-1190211

Name: AMERICAN FARMLAND TRUST

Form 990 (2016)

Form 990, Part III, Line 4a: STATE, LOCAL AND FEDERAL PROGRAMS -For almost 40 years AFT has led a national movement to advance farmland protection across the country. Since our founding in 1980, AFT has helped save 6.5 million acres of farmland from development and has led the way for the adoption of conservation practices on millions of acres more. The federal government, states, and localities nationwide now have programs and policies in place to protect farmland. In FY 2017, we maintained our focus on protecting farmland, promoting sound farming practices, and keeping farmers on the land. We devoted significant resources to major initiatives that advanced this mission, including efforts to (1) track the loss of ag land across the country ("Farms Under Threat"), (2) attract and support new farmers and ranchers ("Farms for the Next Generation"), and (3) provides on-the-ground support to women landowners ("Women for the Land,") AFT does this work through its headquarters in Washington, DC and six regional offices Progress addressing our mission 1 PROTECTING FARMLAND AFT continued its focus on making sure farmers and ranchers have enough high-quality land to raise crops and livestock - AFT took the next steps on its Farms Under Threat project, the cost comprehensive analysis and mapping project ever undertaken to document the state of America's farmland - AFT helped advance farmland protection efforts in multiple states - AFT released the publication Greener Fields Combatting Climate Change by Keeping Land in Farming in New York 2 PROMOTING SOUND FARMING PRACTICESAFT worked to help farmers and ranchers adopt smart farming practices that protect land, water, soil, and wildlife - In Michigan, AFT enlisted farmers to install high-quality pollinator habitation protected farmland in exchange for "credits" that can be sold to sustainably minded corporations and people - In Ohio and New York, AFT launched a major new project to reduce the amount of sediment and nutrients entering streams and rivers - In California, AFT showcased real-world examples of environmental stewardship by specialty crop farmers who grow fruits, vegetables and nuts - AFT's Women for the Land initiative hosted "learning circles" that educated women landowners about various conservation practices 3 KEEPING FARMERS ON THE LAND AFT helped both existing farmers and new farmers through various programs - AFT's Farms for the Next Generation program trained a core group of professionals to help beginning farmers and ranchers overcome one of the most significant barriers to entering the profession securing suitable land - AFT expanded its Hudson Valley Farmlink Network to help beginning and retiring farmers in New York and New Jersey - AFT completed Growing Food Connections, a landmark five-year partnership that worked with communities in eight states to increase opportunities for local farmers - AFT released the publication Growing Local A Community Guide to Planning for Agriculture and Food Systems - In

California, AFT released The Bay Area Food Economy Existing Conditions and Strategies for Resilience, a strategy for building the region's farm and food economy

Form 990, Part III, Line 4b:

Public Education - Advocate - AFT fights for programs and policies that save farmland, support farmers and enhance our environment. Educate - AFT educates the public

about our nation's farms, farmland, and farmers Innovate - AFT pioneers cutting-edge techniques that protect farmland and protect natural resources Investigate - AFT conducts respected research as the foundation of our programs Collaborate - AFT builds coalitions to achieve large-scale solutions and lasting change

Form 990, Part III, Line 4c: Communications and media outreach - AFT continuously engages the public through our direct communications with our members, various publications, and media outreach

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Key employee organizations Institutional MISC) related MISC) below dotted organizations line) Trustee 3 00 Barton Thompson Jr Х

John Hardın	3 00	Х	×			0	0	0
VICE CHAIR								
WILLIAM COHAN	3 00							
TREASURER		X	X			0	0	0
TREASURER								
ELIZABETH BECK	1 00					_		_
DIRECTOR	•••••	X				0	0	0
WILLIAM BOEHM	1 00	X				0	0	0
DIRECTOR		_ ^			l	I	ľ	ı

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DIRECTOR		_ ^			Ŭ	
WILLIAM BOEHM	1 00	×			o	
DIRECTOR					Ĭ	
Robert E Egerton Jr	1 00	l			0	
DIRECTOR		_ ^				
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CHAIR

Director

Director

DIRECTOR

DIRECTOR

Nancy Hirshberg

ELIZABETH JONES

Jennie Turner Garlington

Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099-Highest compen-employee organization and Office Former Individual truste or director Key employee Institutional MISC) organizations MISC) related below dotted organizations line) Ę

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AG Kawamura	1 00	l					0	0	
DIRECTOR		^						0	
Laurie Landeau	1 00	×					0	0	
Director		l ^	l				ľ	· ·	

Laurie Landeau	1 00	X			0	0	
Director		^					
James Moseley	1 00	х			0	0	
Director							
Ea'mon O'Toole	1 00	×			0	0	

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Manya K Rubinstein

Truman Semans

Director

Director

Director

DIRECTOR

John Piotti

Greg Watson

Grant Winthrop

President & CEO (Beg 7/16)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Director							
James Moseley	1 00	_v			0	0	0
Director		^			3	3	3
Ea'mon O'Toole	1 00	×			0	0	0
DIRECTOR		^				0	0
Joan Mari Poltior	1 00						

James Moseley	1 00	l 🗸			0	0	0
Director		_ ^			Ĭ		Ü
Ea'mon O'Toole	1 00	×			0	0	0
DIRECTOR		^					0
Jean-Marı Peltier	1 00	V			0	0	0
DIRECTOR		^			١	ľ	U

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112,861

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Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest co Individual to or director Office Former Key emplo Institution organizations MISC) MISC) related below dotted organizations line)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Assistant Treasurer

Assistant Secretary

VP of Development

Sr Director of Institutional Giving

Senior Planner & Policy Associate

Asst VP of Programs & Dir of Research

Rick Monk

Susan Sink

John Larson

Heidi Blythe

VP of Programs

Julia Freedgood

Serena Unger

Alice Sorensen

Asst VP of Programs

		trustee .	al Trustee		èei	നാലെ അവന			
Ralph Grossı	37 50			×			35,000	0	
Interim President & CEO (Thru 7/16)				^			33,000	0	
	25.00								

Ralph Grossi	37 50		х		35,000	0	
Interim President & CEO (Thru 7/16)			^		33,000		
Kathie Lwanga	35 00		х		64,112	0	
Secretary			^		04,112		
James Daukas	35 00						

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16 00

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14,829

39,955

21,509

36,246

6,496

17,671

16,954

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176,873

198,235

188,626

103,795

122,905

100,522

132,786

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (F) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation compensation

	week (list any hours					office (ustee		from the organization	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Edward Thompson	35 00							122 250		22 126

CA State Director

33,126

efile	e GRA	APHIC prii	nt - DO NOT PROCE	SS	As Filed Data -			DLN: 9	3493198017548
SCH	IED	ULE A	Publi	ic C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047
(For	m 990			ne org	janization is a secti	ion 501(c)(3) d	organization o		2016
990E	(Z)				1947(a)(1) nonexe ▶ Attach to Form 9				2010
•		the Treasury	► Information a		Schedule A (Form			ıctions is at	Open to Public Inspection
Name	e of th	ue Service ne organiza			WWW.113.gc	<u>54/10/11/1990</u> .		Employer identific	<u> </u>
MEKI	CAN FA	RMLAND TRUS	5					52-1190211	
Pa			for Public Charity S a private foundation bec					See instructions.	
ne o 1	rganiz		onvention of churches, o		•	•	•	(A)(i)	
2		•	·					(A)(i)i	
3			scribed in section 170(·	• • • • • • • • • • • • • • • • • • • •		
_		•	or a cooperative hospital		-				
4	Ш	name, city,	esearch organization op and state			-			<u> </u>
5			ation operated for the be (iv). (Complete Part II)		of a college or univer	sity owned or op	erated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local governmer	nt or g	jovernmental unit de	scribed in sectio	on 170(b)(1)(#	A)(v).	
7	✓		ation that normally receil (O(b)(1)(A)(vi). (Comp			s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust described in sec	ction :	170(b)(1)(A)(vi)	Complete Part I	I)		
9			ural research organization rant college of agricultur						ege or university or a
LO		from activit	ation that normally receives related to its exemptions and unrelated because section 509(a)(2).	t funct	tions—subject to cert ss taxable income (le	ain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
11	П	•	ation organized and oper	•	•	public safety S	ee section 509	(a)(4).	
12		more public	ation organized and oper ly supported organization through 12d that descr	ons de	scribed in section 5	09(a)(1) or sec	tion 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization on n(s) the power to regula Part IV, Sections A an	operat arly ap	ed, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting organization nt of the supporting organization plete Part IV, Sections	super anızat	ion vested in the san				
c		Type III f	unctionally integrated organization(s) (see inst	I. A su	pporting organization				ited with, its
d		Type III n	on-functionally integrated The organizes The organizes The organizes The organizes The organizes The organizes	r ated. zation	. A supporting organi generally must satisf	zation operated i y a distribution i	ın connection wi	th its supported organ	
e		Check this	box if the organization re or Type III non-function	eceive	ed a written determin	ation from the II	RS that it is a Ty	/pe I, Type II, Type II	I functionally
f	Enter		of supported organization		regrated supporting	organization			
g			ing information about th	ne sup	ported organization(s)			
(i)Na	ame of	f supported o	organization (ii)EIN		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No	1	
			l	\dashv					
Total			tion Act Notice, see th			Cat No 11285			<u> </u> 90 or 990-EZ) 2016

Sch	nedule A (Form 990 or 990-EZ) 2016						Page 2
	art II Support Schedule for	Organizations	Described in S	ections 170(b))(1)(A)(iv) an	d 170(b)(1)(A)	(vi)
	(Complete only if you ch						under Part
	III. If the organization fa	alls to qualify un	der the tests list	ed below, pleas	e complete Part	III.)	
	Section A. Public Support	———			Т		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	9,565,650	7,170,759	6,635,514	8,687,131	10,400,685	42,459,739
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	9,565,650	7,170,759	6,635,514	8,687,131	10,400,685	42,459,739
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)						5,202,159
6	Public support. Subtract line 5 from line 4						37,257,580
	Section B. Total Support		<u>.</u>				
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	9,565,650	7,170,759	6,635,514	8,687,131	10,400,685	42,459,739
8	_	9,303,030	7,170,739	0,033,314	0,007,131	10,400,083	42,439,739
•	dividends, payments received on securities loans, rents, royalties and	471,845	625,117	613,074	454,858	276,016	2,440,910
9	income from similar sources 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 VI)	21,589	49,099	48,633	93,617	49,974	262,912
11	Total support. Add lines 7 through						45,163,561
12	10 Gross receipts from related activities,	etc (see instructio	nns)			12	845,480
13	First five years. If the Form 990 is fo	r the organization'	's first, second, thi	rd, fourth, or fifth	tax year as a sect	tion 501(c)(3) orga	nization,
	check this box and stop here	<u> </u>				▶ □	
9	Section C. Computation of Public						
14	Public support percentage for 2016 (lir	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	82 490 %
15	Public support percentage for 2015 Sc	hedule A, Part II, l	ine 14			15	81 650 %
16	a 33 1/3% support test—2016. If the	organization did r	not check the box o	on line 13, and line	e 14 is 33 1/3% or	more, check this b	
ŀ	and stop here. The organization quali 33 1/3% support test—2015. If th				and line 15 is 33 1/	/3% or more, check	▶ ✓ this
17	box and stop here. The organization a 10%-facts-and-circumstances test is 10% or more, and if the organization in Part VI how the organization meets	t —2016. If the org n meets the "facts	ganization did not e -and-circumstance	check a box on lines s" test, check this	box and stop he	re. Explain	▶□
	organization 10%-facts-and-circumstances tes	st—2015. If the or	ganization did not	check a box on lu	ne 13 16a 16b o	ır 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization

Section A. Public Support	
the organization fails to qualify under the tests listed below, please complete Part II.)	
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT

Se	ection A. Public Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
_	membership fees received (Do not	I					
	ınclude any "unusual grants`")	<u> </u>					
2	Gross receipts from admissions,	I					
	merchandise sold or services performed, or facilities furnished in	I					
	any activity that is related to the	I					
	organization's tax-exempt purpose	I					
_	Cross receipts from activities that are						
3	Gross receipts from activities that are not an unrelated trade or business	I					
	under section 513	I					
4	Tax revenues levied for the						
	organization's benefit and either paid	I					
5	to or expended on its behalf The value of services or facilities						
,	furnished by a governmental unit to	I					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5	<u></u>					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I					
	5 received from disqualified persons	<u> </u>					
b	Amounts included on lines 2 and 3						
	received from other than disqualified	I					
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I					
	13 for the year	I					
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
31	ection B. Total Support	Г	1	T	Т		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f)Total
9	Amounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
ь	income from similar sources Unrelated business taxable income						
U	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
	Add lines 10a and 10b Net income from unrelated business						
11	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 VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12) First five years. If the Form 990 is fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization
14	check this box and stop here	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCOT 301(C)(3) 01	yanızatıon, ► □
<u> </u>	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2016 (lin			column (f))		15	
16	Public support percentage from 2015 S		· ·	(.,,		16	
	ection D. Computation of Invest	<u> </u>				10	
17	Investment income percentage for 20:			line 13, column (f))	17	
18	Investment income percentage from 2			,(••	18	
	331/3% support tests—2016. If the			on line 14, and lir	ie 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶ □
	33 1/3% support tests—2015. If the						. —

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

7

8

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	1 - '		l

	(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2)	L
	W 20010 305 (4)(1) 01 (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	Ĺ
	below	ſ
•	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	

	III Section 309(a)(1) or (2)	2	i
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	Ī

	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a	
	Did the eventualities have objected and discussion in deciding whather to make make to the fewering comparted	\Box	

		30	l
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections	·	
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		

	to the foleigh supported organization was used exclusively for section 170(e)(2)(b) purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by		
	amendment to the organizing document)	5a	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its		

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
C-	ection B. Type I Supporting Organizations			
se	ection B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗀	1.03	""
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such			
	powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
			•	•
Se	ection C. Type II Supporting Organizations		Yes	N.
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [res	No
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	or		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
				•
Se	ection D. All Type III Supporting Organizations		T.	
	Did the appropriate provide to each of the growth of account to the last the cold of the cold of the	,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of			
	Form 990 that was most recently filed as of the date of notification, and (III) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	<u> </u>	-	<u> </u>
2	Were any of the organization's officers, directors, or trustoss either (1) appointed or elected by the supported arrangement	n 1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization	"		
	maintained a close and continuous working relationship with the supported organization(s)	<u> </u>		
_	Divinion of the valeting described in (2) did the surround of	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	actions)		
a				
b				
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))
2	Activities Test Answer (a) and (b) below.	_	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the			
	supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3		
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>		
	substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the			
	organization's position that its supported organization(s) would have engaged in these activities but for the organization	s		
_	involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	<u> </u>	1	
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		
		,	1	

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .

Schedule A (i	Form 990 or 990-EZ) 2	2016	Page 8
Part VI	lines 1, 2, 3b, 3c, line 1; Part IV, Se Section B, line 1e;	formation. Instruction instructions of the section of the section of the section of the section instruction. Instruction of the section of t	C,
		Facts And Circumstances Test	
990 Sched	ule A, Supplemen	tal Information	
Reti	urn Reference	Explanation	
Schedule A.	Part II, Line 10,	List Rental Income - 2012 Amount \$ 2,375 2013 Amount \$ 17,744 2014 Amount \$ 12,712 2	

Explanation of Other Income 015 Amount \$ 19,302 2016 Amount \$ 26,459 recaptured expenses - 2012 Amount \$ 6,233 2 013 Amount \$ 22,303 2014 Amount \$ 18,818 2015 Amount \$ 45,402 2016 Amount \$ 12,922

mount \$ 28,913 2016 Amount \$ 10,593

other income - 2012 Amount \$ 12,981 2013 Amount \$ 9,052 2014 Amount \$ 17,103 2015 A

Schedule A (Form 990 or 990-F7) 2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE C (Form 990 or 990-

Department of the Treasury

EZ)

Political Campaign and Lobbying Activities

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2016

DLN: 93493198017548

Open to Public
Inspection

Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** AMERICAN FARMLAND TRUST 52-1190211 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes □ No 4a Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization fileForm 1120-POL for this year? 4 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (b) Address (a) Name (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political

				organization If none, enter -0-
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C (Form 990 or 990-EZ) 2016

(Some organizations that made a section 501(h) election do not have to complete all of the five

columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

(a) 2013

560,690

21,538

140,173

7,752

(b) 2014

575,106

16,340

143,777

(c) 2015

593,911

16,143

148,478

(d) 2016

664,294

40,930

166,074

Schedule C (Form 990 or 990-EZ)

(e) Total

2,394,001

3,591,002

94,951

598,502

897.753

7,752

2016

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e)) Total lobbying expenditures

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots ceiling amount

Lobbying ceiling amount

2a

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

Yes

No

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

As Filed Data -

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. OMB No 1545-0047

DLN: 93493198017548

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN FARMLAND TRUST

(Form 990)

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

Open to Public

					52-11902	211	
Pa	Tt I Organizations Maintaining Donor				ds or Accoun	its.	
	Complete if the organization answere	·		·	(In NErman	ls and other account	_
1	Total number at end of year	(a) Donor advised	Tunu	•	(B)Fund	is and other account	<u> </u>
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 funds are the organization's property, subject to				or advised	☐ Yes	□ No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?					se	. □ No
Pai	t III Conservation Easements. Complet	e if the organization a	nswe	red "Yes" on	Form 990, Pai	rt IV, line 7.	
1	Purpose(s) of conservation easements held by th	e organization (check all f	hat a	pply)			
	Preservation of land for public use (e g , red	reation or education)		Preservation o	of an historically	ımportant land area	ı
	✓ Protection of natural habitat			Preservation o	of a certified his	toric structure	
	✓ Preservation of open space						
2	Complete lines 2a through 2d if the organization	held a qualified conservat	ion co	ntribution in th			
а	easement on the last day of the tax year Total number of conservation easements				2a	eld at the End of th	ne Year 108
b	Total acreage restricted by conservation easemen	its			2b		44,996 00
c	Number of conservation easements on a certified		d ın (a	1)	2c		11/220 00
d	Number of conservation easements included in (c structure listed in the National Register		,	•	.		
3	Number of conservation easements modified, tra tax year ▶	nsferred, released, exting	uishe	d, or terminated	d by the organiz	ation during the	
4	Number of states where property subject to cons	ervation easement is loca	ted ▶	20			
5	Does the organization have a written policy regar	ding the periodic monitor		spection, hand	— ling of violations		-
						✓ Yes	」 No
6	Staff and volunteer hours devoted to monitoring, 1985 00	inspecting, handling of v	olatio	ns, and enforci	ng conservation	easements during ti	ne year
7	Amount of expenses incurred in monitoring, inspert \$\infty\$ \$ 129,276	ecting, handling of violation	ns, a	nd enforcing co	nservation ease	ments during the ye	ar
8	Does each conservation easement reported on line and section $170(h)(4)(B)(ii)^2$	ie 2(d) above satisfy the	equir	ements of secti	on 170(h)(4)(B)		No
9	In Part XIII, describe how the organization report	ts conservation easement	s in it	revenue and e	evnence statem	∟ Yes ∟ entand	J NO
,	balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the org					
Par	Organizations Maintaining Collect Complete if the organization answers				Other Simila	ır Assets.	
1a	If the organization elected, as permitted under S art, historical treasures, or other similar assets h provide, in Part XIII, the text of the footnote to it	eld for public exhibition, e	ducat	ion, or research	n in furtherance		cs of
b	If the organization elected, as permitted under S historical treasures, or other similar assets held f following amounts relating to these items						
() Revenue included on Form 990, Part VIII, line 1				•	\$	
(i	Assets included in Form 990, Part X				•		
2	If the organization received or held works of art, following amounts required to be reported under				financial gain, į	provide the	
а	Revenue included on Form 990, Part VIII, line 1	, , ,	, -		•	\$	
b	Assets included in Form 990, Part X				•	· \$	
For F	aperwork Reduction Act Notice, see the Inst	ructions for Form 990.		Cat	No. 52283D	Schedule D (Form	990) 2016

Par	Organizations Maintaining Col	lections of Art, F	HISTOPI	cai ii	reas	ures, or Otner	Similar Asse	ts (cont	inued)
3	Using the organization's acquisition, accession items (check all that apply)	n, and other records,	check	any of	the fo	ollowing that are a	significant use	of its co	llection
а	Public exhibition		d		Loar	n or exchange prog	rams		
b	Scholarly research		е		Othe	er			
c	Preservation for future generations								
4	Provide a description of the organization's col Part XIII	llections and explain	how the	ey furtl	ner th	ie organization's ex	kempt purpose i	n	
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to						ıılar] Yes	□ No
Pai	rt IV Escrow and Custodial Arrange	ments.							
	Complete if the organization answ X, line 21.		m 990	, Part	IV,	ine 9, or reporte	ed an amount	on Forr	n 990, Part
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other intermed	liary for	contri	butio	ns or other assets	_	Yes	□ No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowina	table			Amo	unt	
c	Beginning balance	, 22 23	•••			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	21, for	escrov	or c	ustodial account lia	ability?	Yes	 □ No
b	-		•						
Pa	art V Endowment Funds. Complete if		'			<u>'</u>			
	'	(a)Current year		rıor yea		(c)Two years back	(d)Three years b	ack (e)	Four years back
1 a	Beginning of year balance	15,653,310		17,015	5,260	20,215,304	20,784,	.538	17,290,706
b	Contributions					35,000	1,249,	.860	3,590,000
С	Net investment earnings, gains, and losses	2,973,090		2,038	3,597	-322,464	2,181,	.857	2,360,273
d	Grants or scholarships								
е	Other expenditures for facilities and programs	2,118,719		3,400),547	2,912,580	4,000,	.951	2,456,441
f	Administrative expenses								
g	End of year balance	16,507,681		15,653	3,310	17,015,260	20,215,	.304	20,784,538
2	Provide the estimated percentage of the curre	ent year end balance	(line 1	g, colu	mn (a	a)) held as			_
а	Board designated or quasi-endowment >	73 050 %							
b	Permanent endowment ► 18 410 %								
С	Temporarily restricted endowment ► 8 5	40 %							
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%							
3а	Are there endowment funds not in the posses organization by	ssion of the organizat	ion tha	t are h	eld ar	nd administered for	r the		Yes No
	(i) unrelated organizations							3a(i)	No
b	(ii) related organizations	ns listed as required	 on Sche	 dule R	,			3a(ii) 3b	No No
4	Describe in Part XIII the intended uses of the	organization's endo	wment 1	funds					<u> </u>
Pai	rt VI Land, Buildings, and Equipme								
	Complete if the organization answ								
	Description of property (a) Cost or oth (investme		or other	basis (d	other)	(c)Accumulated d	epreciation	(d)B	look value
1a	Land								
b	Buildings								
С	Leasehold improvements			6!	58,344	1	344,798		313,546
	Equipment			88	32,062	!	636,951		245,111
	Other				-				•
	Add lines 1a through 1e (Column (d) must e	aual Form 990 Part	X colu	mn (P)	line	10(c)			559 657

	(Form 990) 2016					Page 3
Part VII	Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	anızat	ion answ	vered 'Yes' on Form !	990, Part	IV, line 11b.
	(a) Description of security or category (including name of security)		(b)Book value		thod of va I-of-year r	luation narket value
	l derivatives					
(2) Closely- (3) Other	held equity interests	_				
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	nn (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related. Complete if the or See Form 990, Part X, line 13.	ganız	ation ans	swered 'Yes' on Form	990, Pa	rt IV, line 11c.
		(b) Bo	ook value		thod of va I-of-year r	iluation narket value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	nn (b) must equal Form 990, Part X, col (B) line 13)					
Part IX	Other Assets. Complete if the organization answered 'Yes' (a) Description	on For	m 990, Pa	rt IV, line 11d See For	m 990, Pa	rt X, line 15 (b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu Part X	umn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer	red 'Ye	es' on Fo	rm 990, Part IV, line	. ▶ 11e or 1	L1f.
1.	See Form 990, Part X, line 25. (a) Description of liability			ook value		
	income taxes		(-,-			
				_		
SPLIT-INTE	REST AGREEMENTS PAYABLE			204,555		
Deferred re	nt and lease incentives			650,445		
DEPOSITS				675		
(4)						
(5)						
(6)		\perp				
(7)						
(8)						
(9)						
	on (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text of the fo	▶ otnote	to the or	855,675	atements	that reports the
	of differential tax positions in Fart XIII, provide the text of the following is liability for uncertain tax positions under FIN 48 (ASC 740).					

Part XI

2

а

b

c

d

е

3

4

5

1

2

b

d

е 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

Page 4

2,588,258

10,762,088

10,762,088

10,995,722

114,079

10.881.643

10,881,643

Schedule D (Form 990) 2015

Add lines 4a and 4b . . .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Net unrealized gains (losses) on investments . . . Other (Describe in Part XIII) . .

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

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

Other (Describe in Part XIII)

Supplemental Information

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Add lines 2a through 2d . . . Subtract line 2e from line 1 . Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIII)

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

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

4a 4b Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2c

2d

4b

Explanation

2a

2b

2c

2d

114,079

2.505.429

114,079

-31,250

4c

2e

3

4c

5

2e

3

Page 5		Schedule D (Form 990) 2015
	ation (continued)	Part XIII Supplemental Infor
	Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 52-1190211

Name: AMERICAN FARMLAND TRUST

Supplemental Information

Return Reference	Explanation
Part II, Line 5	AFT's policy is to monitor each of our easements every other year, unless an issue or circ umstance regarding a particular property warrants more frequent visits. AFT has also adopt ed a violations policy that addresses the manner in which AFT determines and enforces viol ations of conservation easements. AFT continually evaluates each easement on a case-by-cas e basis to determine the appropriate monitoring and inspection needs required to ensure that the conservation purposes of the easement are upheld.

upplemental Information				
Return Reference	Explanation			
Part II, Line 9	IT is the Organization's policy, when acquiring or accepting an easement, to extinguish in perpetuity the development rights on the underlying property. Consequently, all such ease ments are valued at one dollar. Easements whose development rights are not so treated have also been valued at one dollar because it is management's opinion that the Organization will not recover its cost for these easements. Any proceeds from the sale of a conservation easement to a qualified entity are maintained in the Organization's Farmland Protection fund.			

Supplemental Information				
Return Reference	Explanation			
Part V, Line 4	The Organization is committed to a long-term approach with a balanced program of investmen ts to preserve and enhance the real purchasing power of the fund so as to provide a stable and, in real terms, constant stream of current income for annual operating needs. The Organization's investment objective is to attain a minimum rate of return of 5% plus the chan ge in the Consumer Price Index (after management fees) over an investment cycle. The primary measure of the Organization's investment performance will be a blended benchmark based on its target asset allocation. In pursuing these objectives, the Organization intends to select investment managers who are rigorous in the disciplines they utilize to produce returns at acceptable levels of risk and who avoid speculation explained or rationalized by short-term financial trends or momentum in specific economic sectors. Distribution of fund earnings to the operating budget is based on the spending policy and is managed on a total return basis. In most years, distributions comprise interest and dividends plus some appreciation. The Finance Committee plans for these distributions to avoid the necessity of liquidating investments at an unfavorable time. The fund shall be invested primarily in liquid securities, including equity and fixed income securities and commingled investment fund is			

upplemental Information	
Return Reference	Explanation
Part XI, Line 2d - Other Adjustments	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -31,250

SCHEDULE G

DLN: 93493198017548

OMB No 1545-0047

2016

Open to Public

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

Inspection

	ne of the organization ERICAN FARMLAND TRUST					Employer ide	entification number
						52-1190211	
P		tivities. Complete rs are not required			on answered "Yes" on F s part.	orm 990, Part IV, line	17.
1	Indicate whether the orga	nızatıon raısed funds	through	any of the	following activities Check	call that apply	
а	Mail solicitations				e 🗹 Solicitation of noi	n-government grants	
b	✓ Internet and email sol	ıcıtatıons			f 🗹 Solicitation of gov	vernment grants	
С	Phone solicitations				g 🔲 Special fundraisir	ng events	
d	✓ In-person solicitations						
2 a					dividual (including officers tion with professional func		es 🗆 No
b	If "Yes," list the ten higher to be compensated at leas			fundraise	rs) pursuant to agreement	s under which the fundrais	ser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust conf	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1	eidolon communications 15 maiden lane suite 1401	DIRECT MAIL		No	1,383,607	180,000	1,203,607
	new york, NY 10038						
2							
3							
4							
5							
6							
7							
_							
8							
9							
10							
	al	<u> </u>		•	1,383,607	180,000	1,203,607
3	List all states in which the oil licensing	rganization is registe	red or lice	ensed to s	colicit contributions or has	been notified it is exempt	from registration or

AL, AK, AR, CA, CT, DC, CO, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WÁ, WV, WI, MO, TX

	edule G (Form 990 or 990-EZ) 2016				Page 2
Pa	rt II Fundraising Events. Complethan \$15,000 of fundraising egross receipts greater than \$	event contributions and			
	gross receipts greater than \$	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col (a) through
Revenue		(event type)	(event type)	(total number)	col (c))
	1 Gross receipts				
	2 Less Contributions				
	4 Cash prizes				
S	5 Noncash prizes				
JSe	6 Rent/facility costs				
Expenses	7 Food and beverages				
១	8 Entertainment				
Direct	9 Other direct expenses				
_	10 Direct expense summary Add lines 4	through 9 in column (d)		•	
	11 Net income summary Subtract line 10) from line 3, column (d)		•	
Pai	Gaming. Complete if the org on Form 990-EZ, line 6a.		es" on Form 990, Part 1	IV, line 19, or reported	i more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Expenses	2 Cash prizes				
ង័	3 Noncash prizes				
ect	4 Rent/facility costs				
<u>ā</u>	5 Other direct expenses				
		☐ Yes%	☐ Yes %	☐ Yes %	
	6 Volunteer labor	□ No	□ No	□ No	
	7 Direct expense summary Add lines 2	through 5 in column (d)			
	8 Net gaming income summary Subtrac	t line 7 from line 1, colun	nn (d)	•	
9 a b	Enter the state(s) in which the organizat Is the organization licensed to conduct g If "No," explain	aming activities in each o	f these states?		☐ Yes ☐ No
10a b	If "Yes," explain	censes revoked, suspende	ed or terminated during the	e tax year?	☐ Yes ☐ No

Sche	dule G (Form 990 or 990-EZ) 2016					F	age
11	Does the organization conduct gaming	j activities with nonmember:	s?		☐Yes	□No	
12	Is the organization a grantor, benefici- formed to administer charitable gamin		member of a partnership or other entity		□Yes	□No	
13	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			
b	An outside facility			13b			(
14	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	cords			
	Name •						
	Address >						
15a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b			anization 🕨 \$ and th	e			
	amount of gaming revenue retained b	y the third party $ hildsymbol{\blacktriangleright}$ \$					
С	If "Yes," enter name and address of the	ne third party					
	Name ►						
	Address ►						
16	Gaming manager information						
	Name ►						
	Gaming manager compensation $ hilder$ $\$$						
	Description of services provided						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	,	te law to make charitable di	stributions from the gaming proceeds to		_		
_	retain the state gaming license?				☐ Yes	□No	
b	·		uted to other exempt organizations or spent				
В-	in the organization's own exempt activ			- (···) -	and (\. n	ad Dawt	
Pal		l5c, 16, and 17b, as app	cions required by Part I, line 2b, column licable. Also complete this part to provid				
	Return Reference		Explanation				
			<u>'</u>	ule G (F	orm 990 or	990-EZ)	201

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493198017548 Compensation Information

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

Schedule J

(Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

AMERICAN FARMLAND TRUST 52-1190211 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4с Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5а Νo 5h Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

5 Edward Thompson

CA State Director

132,359

(i)

(ii)

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(I)-(D) column(B) reported (ii) (mi) Base as deferred on prior compensation Bonus & incentive Other reportable (1) compensation compensation compensation Form 990 1 lames Daukas 176.873 (i) 9,605 34,368 220.846 Assistant Treasurer Ω n O 2 Susan Sink 198,235 10,079 12,939 221,253 (i) VP of Development n n 0 (ii) 3 John Larson 188,626 6,584 31,731 226,941 VP of Programs (ii) 4 Alice Sorensen 132,786 6,937 14,557 154,280 Asst VP of Programs & Dir of Researc 0 (ii)

6,701

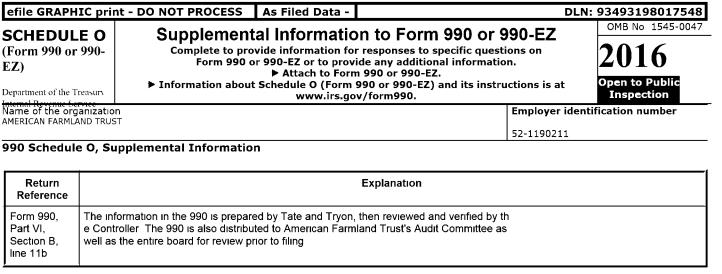
28,434

Schedule J (Form 990) 2015

167,494

Return Reference	Explanation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Part IIII Supplemental Inform	nation
Schedule J (Form 990) 2015	Page 3

Schedule J (Form 990) 2015



Return Explanation

Form 990,
Part VI,
Section B,
I locard members submit a conflict of interest statement on an annual basis following the fal
I board meeting The statements are sent to the AFT General counsel for review Any conflicts are reported to AFT. All employees are notified annually of the conflict of interest p

olicy and are required to report any conflict to the general counsel.

990 Schedule O, Supplemental Information

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	The Board of Directors has delegated responsibility to the Executive Committee for approving any compensation arrangements with disqualified persons as defined under the Internal R evenue Code (generally senior management, persons who, at any time during the prior 5-year s, were in a position to exercise substantial influence over the affairs of the organization or persons related). The Committee functions as de facto compensation committee in addition to its other responsibilities. The Committee is comprised of outside, disinterested directors who possess the business experience and knowledge necessary to review and evaluate eithe comparability of compensation data obtained for the Committee. The Committee determines which AFT employees or contractors should be considered "disqualified persons" (in addition to the list of personnel who are per se disqualified) whose compensation should be subject to approval. Also, the Committee evaluates and approves the compensation arrangements entered into by AFT with all disqualified persons. (These include all compensation and benefits, including sales or other transfers of property). The Committee generally utilizes information from standard compensation surveys in conducting its evaluation. The Committee edocuments its proceedings with written records, setting forth the terms of the compensation arrangements approved and the date they were approved. The records include the names of the Committee members present and who voted, the comparability data obtained and relied upon by the Committee, how the data was obtained, and the actions taken with respect to consideration of compensation transactions by anyone who is otherwise a member of the Committee, but who had a conflict of interest with respect to the transaction or arrangement. This documentation is prepared by the later of (a) the next meeting of the Committee occurring after the decision is made or (b) the date 60 days after the date of approval.

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section C,
Inne 19

Return Explanation
Reference

990 Schedule O, Supplemental Information

11g

Form 990, Consultants/Temps Program service expenses 1,373,096 Management and general expenses 65, Part IX, line 814 Fundraising expenses 65,244 Total expenses 1,504,154

990 Schedule O, Supplemental Information Explanation Return Reference

Reference
Form 990, CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -28,552
Part XI, line

Explanation Return Reference

FORM 990. THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PREVIOUS YEAR PART XII,

LINE 2C

990 Schedule O, Supplemental Information