Form **990** 

Department of the Treasury Internal Revenue Service

#### Return of Organization Exempt From Income Tax

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

u Do not enter Social Security numbers on this form as it may be made public. u Information about Form 990 and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

OMB No. 1545-0047

For the 2013 calendar year, or tax year beginning 07/01/13, and ending 06/30/14D Employer identification number C Name of organization Check if applicable: The Wilderness Land Trust Address change Doing Business As 84-1192823 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Initial return 970-963-1725 PO Box 1420 Terminated City or town, state or province, country, and ZIP or foreign postal code Carbondale 81623 CO 2,486,327 Amended return **G** Gross receipts\$ Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? Reid J. Haughey PO Box 1420 H(b) Are all subordinates included? Carbondale CO 81623 If "No," attach a list. (see instructions) **X** 501(c)(3) 501(c) ( ) t (insert no.) www.wildernesslandtrust.org Website: U H(c) Group exemption number  ${f u}$ Year of formation: 1992 Form of organization: X Corporation Trust Association M State of legal domicile: Summary 1 Briefly describe the organization's mission or most significant activities: We Keep the Promise of Wilderness - By acquiring and transferring private Governance lands (inholdings) to public ownership that complete designated and proposed wilderness areas, or directly protect wilderness values. 2 Check this box u if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) 10 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 4 5 6 Total number of volunteers (estimate if necessary) ...... 12 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 ırrent Year 556,800 Revenue 9 Program service revenue (Part VIII, line 2g) 0 **10** Investment income (Part VIII, column (A), lines 3, 4, and 7d) ... 200,701 155,177 -14,840 14,000 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 790,687 825,977 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) ... 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 261,501 323,249 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) u  $\dots$ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 582,724 480,128 844,225 803,377 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 22,600 -53,538 19 Revenue less expenses. Subtract line 18 from line 12 5 Beginning of Current Year 4,768,925 5,313,844 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 2,979,744 3,502,063 22 Net assets or fund balances. Subtract line 21 from line 20 1,789,181 1,811,781 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sian President Here Reid J. Haughey Type or print name and title Print/Type preparer's name Preparer's signature Check Paid Ken Roth 11/13/14 self-employed P01389203 **Preparer** Taylor Roth and Company Firm's name Firm's EIN } **Use Only** 800 Grant St Ste 205 303-830-8109 Denver, CO 80203-2944 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

4e Total program service expenses  ${f u}$ 

(Expenses \$

4d Other program services. (Describe in Schedule O.)

525,908

) (Revenue \$

including grants of \$

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? X 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes." complete Schedule C. X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Х 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? If "Yes." X complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Х 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X complete Schedule D. Part VI 11a complete Schedule D, Part VI

Did the organization report an amount for investments—other securities in Part X, line 12 that of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, line 16? If "Yes," complete Schedule D X X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Х 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 12a **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a

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

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			٦,
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			٦,
	If "Yes," complete Schedule L, Part I	25b		X
26	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		37	
	disqualified persons? If so, complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
00	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		_^
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	<b>\</b> /		х
a	A current of former officer, director, frustee, or key employee2 if Yes Complete Schedule L, Part IV	Koa		
b	A family member of a current or former officer, director, trustee, or key employee? If Yes," complete	28b		x
•	Schedule L, Part IV	200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
29 30		29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		$ \mathbf{x} $
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
31	Port I	21		×
32	Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		_ <u> </u>
JZ	accomplete Calcadyle N. Dart II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		
34	NV ID (VE)	34		x
35a	or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	555		
-	valeted eventing 16 (Wes 2) complete Calcadala D. Dart V. line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		├ <u></u>
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Port VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>		† <u></u>
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	х	
	and the same are required to complete contract of the same and the same are same and the same are same	, J.	<del></del>	

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V No 13 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 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 ...... **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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 X account)? If "Yes," enter the name of the foreign country: **u** See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  $\dots$ X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or b gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Х and services provided to the payor? 7b Did the Х required to file Form 8282 If "Yes," indicate the number of Forms 8282 filed during the year X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 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 Section 501(c)(12) organizations. Enter: 11 Gross income from members or shareholders а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14h If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .....

Form 990 (2013) The Wilderness Land Trust 84-1192823 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 11 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 10 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ....... X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Did the organization have local chapters, branches or affiliates? 10a Х ensure their operations are consistent X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **u** AZ, CA, WA, CO 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 123 Emma Rd, Ste 200 organization: u Reid Haughey

CO 81621

Basalt

# 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

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

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

		•									
(A) Name and Title	(B) Average			(C Posit	tion		(D) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated		
	hours per week (list any	box	x, unle	ss per	son is	than one s both an or/trustee)	compensation from the	compensation from related organizations	amount of other compensation		
	hours for related			Officer		<u> </u>	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related		
	organizations below dotted line)	Individual trustee or director	Institutional trustee	ar .	Key employee	Former Highest compensated employee			organizations		
		tee	ıstee		-	ensated					
(1) Jim Blomquist	2.00										
Secretary/Treasurer	0.00	X		Х			0		0		
(2) Jean Hocker				13	5	D	<del>U</del> CLIOI		DV		
Chair	0.00	$ \mathbf{x} $		$ \mathbf{x} $			0	0	0		
(3) Doug Scott											
Director	1.00	$ \mathbf{x} $					0	0	0		
(4) Liz Braund											
Director	1.00	x					0	0	0		
(5) Jon Mulford	0.00	1									
	1.00										
Director - Emeritus	0.00	X					0	0	0		
(6) William Pope	1.00										
Director	0.00	$ \mathbf{x} $					0	0	0		
(7) Karen Fisher								-			
Director	1.00	x					0	0	0		
(8) Paul Torrence	0.00	^					0	0	0		
•	1.00										
Director	0.00	x					0	0	0		
(9) Andy Wiessner											
	2.00										
Secretary	0.00	X		X			0	0	0		
(10) Mark Trautwein											
Vice Chair	2.00	x		x			0	0	0		
(11) Jacqueline Van	Dine										
	1.00	.									
Director	0.00	X					0	0			
DAA									Form <b>990</b> (2013)		

TWLT 11/13/2014 10:30 AM
Form 990 (2013) **The Wilderness Land Trust** 84-1192823 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (C) (D) (E) (F) Name and title Position Reportable Reportable Estimated Average (do not check more than one compensation compensation from amount of hours per related box, unless person is both an from week other officer and a director/trustee) organizations compensation (list any the organization (W-2/1099-MISC) from the hours for Individual or director (W-2/1099-MISC) -lighest compensatec employee organization nstitutional related and related organizations employee organizations below dotted trustee line) trustee Schlener (12) Denise 1.00 0.00 X 0 0 Director (13) Reid J. Haughey 40.00 123,320 0 President 0.00 X 33,985 (15)(16)(17)(18) (19)123,320 33,985 Total from continuation sheets to Part VII, Section A ...... C u 123,320 33,985 Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **u** 1 Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated 3 employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 individual ...... Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . X Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (C) Compensation

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  ${\bf u}$ 

0

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (D) Revenue excluded from tax (B) Related or exempt husiness function under sections revenue 512-514 revenue Gifts, Grants ilar Amounts 1a Federated campaigns ..... 1a **b** Membership dues ..... 1b **c** Fundraising events ..... 1c d Related organizations ..... 1d **e** Government grants (contributions) .... 7,334 f All other contributions, gifts, grants, and similar amounts not included above 649,466 77,257 g Noncash contributions included in lines 1a-1f: \$ 656,800 h Total. Add lines 1a-1f. Program Service Revenue Busn. Code f All other program service revenue ...... g Total. Add lines 2a-2f. Investment income (including dividends, interest, and other similar amounts) ..... 526 526 Income from investment of tax-exempt bond proceeds  ${\bf u}$ Royalties ... (i) Real (ii) Personal 6a Gross rents **b** Less: rental **c** Renta d Net ental in 7a Gross amount from (ii) Other (i) Securities sales of assets 1,815,001 other than inventory **b** Less: cost or other 1,660,350 basis & sales exps. 154,651 c Gain or (loss) 154,651 154,651 d Net gain or (loss) ..... **8a** Gross income from fundraising events Other Revenue (not including \$ ..... of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses ..... b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses ..... b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold ...... b **c** Net income or (loss) from sales of inventory 11 Busn. Code Miscellaneous Revenue 531390 11,000 11,000 11a Expense reimbursements 900002 3,000 3,000 Rental Income d All other revenue e Total. Add lines 11a–11d 14,000 825,977 526 12 Total revenue. See instructions. . . 168,651

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX X (A) Total expenses (B) Program service (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 ..... Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees ..... 160,308 112,216 12,824 35,268 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages ..... 127,085 88,960 27,958 10,167 Pension plan accruals and contributions (include 7,687 5,381 1,691 615 section 401(k) and 403(b) employer contributions) 6,380 Other employee benefits ..... 4,466 510 1,404 9 Payroll taxes 21,789 15,252 1,743 4,794 Fees for services (non-employees): a Management ..... 648 648 **b** Legal ..... c Accounting 38,754 9,960 28,794 8,040 8,040Lobbying d Professional fundraising se vices. See Part IV line 17 e Investment manager Other. (If line 11g amount 50,720 165,939 114,219 (A) amount, list line 11g expenses on Schedule O.) 1,000 12 Advertising and promotion 17,8703,57414,29624,515 16,148 3,292 5,075 13 Office expenses 14 Information technology 20,234 16,531 89 3,614 Royalties 6,560 4,592 525 1,443 16 Occupancy 77,118 39,581 25,097 12,440 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 32,144 6,571 23,508 Conferences, conventions, and meetings 2,065 19 23,657 22,612 1,045 20 Interest Payments to affiliates ..... 21 177 Depreciation, depletion, and amortization 2,224 1,558 489 22 8,513 5,959 681 1,873 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 40,975 40,975 Appraisals and surveys Closing fees 7,339 7,339 Rehabilitation costs 4,502 4,502 1,046 Property taxes 1,046 e All other expenses 803,377 525,908 113,410 164,059 25 Total functional expenses. Add lines 1 through 24e . . 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 **u** |**X**| if following SOP 98-2 (ASC 958-720)

#### Part X **Balance Sheet** X Check if Schedule O contains a response or note to any line in this Part X ... (B) (A) Beginning of year End of year 657,541 392,397 Cash—non-interest bearing 1,279,194 2 Savings and temporary cash investments ...... 1,667,727 50,000 3 Pledges and grants receivable, net 3 423 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 12,541 8,838 10a Land, buildings, and equipment: cost or 14,871 other basis. Complete Part VI of Schedule D 10a 12,050 3,487 b Less: accumulated depreciation 10b 2,821 10c Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 15 Other assets. See Part IV, line 11 2,377,206 3,630,594 15 4,768,925 5,313,844 16 Total assets. Add lines 1 through 15 (must equal line 34) ..... 16 44,74439,501 Accounts payable and accrued expenses 17 17 18 Grants payable 9,562 19 Def 20 Tax-exempt 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 10,000 10,000 Secured mortgages and notes payable to unrelated third parties 1,893,000 23 2,468,000 24 Unsecured notes and loans payable to unrelated third parties ..... 100,000 75,000 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 900,000 of Schedule D 900,000 Total liabilities. Add lines 17 through 25 ... 2,979,744 26 3,502,063 Organizations that follow SFAS 117 (ASC 958), check here u X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 1,324,434 465,916 27 464,747 1,345,865 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here u and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund ..... 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances ..... 1,789,181 1,811,781 33 4,768,925 Total liabilities and net assets/fund balances ..... 5,313,844

Form **990** (2013)

Accounting method used to prepare the Form 990:	Pa	art XI Reconciliation of Net Assets				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 22,60 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis Doth: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis Consolidated basis Consolidated hasis Both consolidated and separate basis Consolidated basis Consolidated hasis Both consolidated and separate basis Consolidated basis Consolidated hasis Both consolidated and separate basis Consolidated basis Consolidated hasis Both consolidated and separate basis Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Both consolidated and separate basis Consolidated basi						
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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 Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		If the organization charged either its oversight process or selection process during the tax year, explain in				
the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		the Single Audit Act and OMR Circular A-1332		3	а	X
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	b					
		required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	<u></u> .	<u></u> 3	b	

Form **990** (2013)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

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

u Attach to Form 990 or Form 990-EZ.

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

2013

Open to Public Inspection

The Wilderness Land Trust

Employer identification number 84-1192823

-													
Pa	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this pa	art.) Se	ee ins	truction	ns.		
The	orgai	nization is not	a private foundation becaus	e it is: (For lines 1 through 11, o	check only	one box	<b></b> )						
1		A church, co	nvention of churches, or ass	sociation of churches described	in <b>sectio</b> i	170(b)(	1)(A)(i).						
2		A school des	cribed in section 170(b)(1)(	(A)(ii). (Attach Schedule E.)									
3		A hospital or	a cooperative hospital servi	ce organization described in se	ction 170	(b)(1)(A)	(iii).						
4		A medical re-	search organization operated	d in conjunction with a hospital	described	in <b>sectio</b>	n 170(k	o)(1)(A)(i	iii). Ente	er the h	ospital's nan	ne,	
		city, and stat	=	,			•	,,,,,	•		•		
5		•		of a college or university owned	or operat	ed by a c	overnme	ental uni	t descri	bed in			
	ш	ŭ	(b)(1)(A)(iv). (Complete Part	,			, -						
6				•	section 1	70(b)(1)(A	()(v)						
7	X		-	Il government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> rmally receives a substantial part of its support from a governmental unit or from the general public									
•		_	•	170(b)(1)(A)(vi). (Complete Part II.)									
8			,,,,,,,										
9	$\vdash$	-	ity trust described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II.) ation that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross										
9	Ш	_								_	)55		
		•		npt functions—subject to certain									
				nd unrelated business taxable in				k) IIOIII I	Jusines	ses			
40			=	0, 1975. See section 509(a)(2)									
10	$\vdash$	•	•	exclusively to test for public safe	•					_			
11	Ш	J	•	exclusively for the benefit of, to	•			•					
				ted organizations described in s					•	Section	l		
				the type of supporting organizati		•	1	— ·					
		a Type	_ <del>_ </del> ''	c Type III–Function	, ,	_	d				ionally integ	rated	
е	Ш			ganization is not controlled direc									
				er than one or more publicly sur	ported of	ganizatioi	is descr	ibea in (	ection	509(a)(	'L J V	,	
		or section 50	. , , ,		I		, II I						
f				rmination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting		•		
		_	check this box										. Ш
g		•	<u> </u>	tion accepted any gift or contrib	ution from	any of th	ne						
		following per											_
			•	ontrols, either alone or together			,	,				Yes	No
				supported organization?							11g(i	)	_
		(ii) A family	member of a person describ	oed in (i) above?							<u>11g(i</u>		
				described in (i) or (ii) above?							11g(i	ii)	
h		Provide the	following information about t	the supported organization(s).	,								
(i		e of supported	(ii) EIN	(iii) Type of organization	1 ' '	organization		ou notify		Is the	(vii) Amour	nt of mone	tary
	org	anization		(described on lines 1–9	1 ''	sted in your document?		nization in of your	organizati	on in coi. zed in the	su	pport	
				above or IRC section (see instructions))	governing	uocument:	١ ، ، ،	oort?		S.?			
				, , , , , , , , , , , , , , , , , , , ,	Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)													
` '													
(D)													
(E)													
<b>.</b>													
Tota													

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

Schedule A (Form 990 or 990-EZ) 2013

Page 2

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

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

Sec	tion A. Public Support										
Caler	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	471,852	1,217,237	1,114,927	604,826	656,800	4,065,642				
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	471,852	1,217,237	1,114,927	604,826	656,800	4,065,642				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1 775 240				
6	Public support. Subtract line 5 from line 4.						1,775,348 2,290,294				
	tion B. Total Support						2,290,294				
	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total				
7	Amounts from line 4	471,852	1,217,237	1,114,927	604,826	656,800	4,065,642				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	884	836		890	526					
	sources	884	836	1,027	890	526	4,163				
9	Net income from unrelated business activities, whether or not the business is regularly carried on	Ins	spe	ctio	n C	op	<del>/</del>				
11	(Explain in Part IV.)						4,069,805				
12	Gross receipts from related activities, etc.	(see instructions)				12	3,527,277				
13	First five years. If the Form 990 is for the	· .		rth or fifth tay yea			3,321,211				
13	organization, check this box and <b>stop her</b>	•		•		. , . ,	▶ □				
Sec	tion C. Computation of Public Su										
14	Public support percentage for 2013 (line 6	<del> </del>		) (f))		14	56.28%				
	B.I.I						71.25 %				
16a	33 1/3% support test—2013. If the organ	ization did not chec	k the box on line 1	3. and line 14 is 3	3 1/3% or more. c	heck this	72020 70				
	box and <b>stop here.</b> The organization quali			ion			► X				
b	33 1/3% support test—2012. If the organ					ore.					
	check this box and <b>stop here.</b> The organiz						▶ □				
17a	10%-facts-and-circumstances test—201										
	10% or more, and if the organization mee										
	Part IV how the organization meets the "fa	acts-and-circumstan	ces" test. The orga	anization qualifies	as a publicly supp	orted					
	organization	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
b	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line										
	15 is 10% or more, and if the organization	meets the "facts-a	nd-circumstances"	test, check this bo	ox and stop here.						
	Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly										
	supported organization			-		-	▶ □				
18	<b>Private foundation.</b> If the organization did	d not check a box o	n line 13, 16a, 16b	, 17a, or 17b, che	ck this box and se	e					
	instructions						▶ □				

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

Sac	tion A. Public Support	quality under t	ne tests listed i	below, please o	ompiete Part i	1.)	
	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual	<b>(a)</b> 2003	(8) 2010	(6) 2011	(d) 2012	(6) 2013	(i) Total
2	grants.")  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 201	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	-11-15		<b>UUU</b>			V
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	organization's fire	st, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	_
	organization, check this box and stop here						<b>. L</b>
Sec	tion C. Computation of Public Su					<u> </u>	
15	Public support percentage for 2013 (line 8,	column (f) divide	d by line 13, colum	nn (f))		15	%
16	Public support percentage from 2012 Sched					16	%
<u>Sec</u>	tion D. Computation of Investmer						
17	Investment income percentage for 2013 (lin	ne 10c, column (f	) divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2012 S	Schedule A, Part	III, line 17			18	%
19a	33 1/3% support tests—2013. If the organ	ization did not ch	neck the box on line	e 14, and line 15 is	more than 33 1/3	3%, and line	_
	17 is not more than 33 1/3%, check this box	-	=				▶ ∟
b	33 1/3% support tests—2012. If the organ						. —
	line 18 is not more than 33 1/3%, check this	-	=				🟲 📙
20	Private foundation. If the organization did	not check a box	on line 14, 19a, or	19b, check this be	ox and see instruc	tions	🕨

	Form 990 or 990-EZ)						84-1192823	Page 4
Part IV							0; Part II, line 17a o	r 17b; and
	Part III, line 12	. Also comple	te this part for a	any additio	onal informa	ation. (See ins	tructions).	
•								
•								
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•								
•								

Schedule B (Form 990, 990-EZ, or 990-PF)

**Schedule of Contributors** 

OMB No. 1545-0047

2013

The Wilderness Land Trust

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

Department of the Treasury Internal Revenue Service u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number

84-1192823

Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	$\boxed{\mathbf{X}}$ 501(c)( $3$ ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	overed by the <b>General Rule</b> or a <b>Special Rule</b> .  (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
	g Form 990, 950-EZ, or 950-PF that veceived, during the year, 15,000 or more (in money or contributor Complete ears I and II.						
Special Rules							
under sections 509(a)(1	organization filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the regulations I) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of 0 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1.						
during the year, total co	, (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, ontributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, s, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
during the year, contrib not total to more than \$ year for an exclusively applies to this organiza	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or						
Caution. An organization that is 990-EZ, or 990-PF), but it mus	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, t answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number The Wilderness Land Trust 84-1192823

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 22,438	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 98,411	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b)	(c) Total contributions	(d) Type of contribution
3	Public Inspec	\$ 100,000	Person X Payroll Noncash (Complete Part II for oncast contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions  \$ 270,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 15,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 28,846	Person Payroll Noncash X (Complete Part II for noncash contributions.)

Name of organization

The Wilderness Land Tru

Employer identification number 84-1192823

<u> Tne</u>	wilderness Land Trust		84-1192823
Part II	Noncash Property (see instructions). Use duplicate	copies of Part II if additional sp	pace is needed.
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	Fedex Corp. Stock	\$ 48,411	02/04/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	Loan foregivness	\$ 28,846	09/01/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Public Inspe	ection (	Copy
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

#### SCHEDULE C (Form 990 or 990-EZ)

#### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

 ${f u}$  Complete if the organization is described below.  ${f u}$  Attach to Form 990 or Form 990-EZ.

u See separate instructions.

 $\boldsymbol{u}$  Information about Schedule C (Form 990 or 990-EZ) and its

instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to 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," to 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-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nan	e of organization  The Wilderness Land	Trust		Employer identificati			
Pai	t I-A Complete if the organization is exer		or is a section				
1	Provide a description of the organization's direct and indir			<b>J</b>			
2	Political expenditures			<b>u</b> \$			
3	Volunteer hours						
Pai	t I-B Complete if the organization is exer	mpt under section 501(c	)(3).				
1	Enter the amount of any excise tax incurred by the organi			u \$			
2	Enter the amount of any excise tax incurred by organizati	on managers under section 495	5				
3	If the organization incurred a section 4955 tax, did it file F	orm 4720 for this year?			Yes No		
4a	Maria a samuratian marada 0				Yes No		
	If "Yes," describe in Part IV.						
Pai	t I-C Complete if the organization is exer	· ·	<del></del>	ion 501(c)(3).			
1	Enter the amount directly expended by the filing organization activities  Enter the amount of the filing organization's funds control	SNACTI		Cop	y		
_	527 exempt function activities			u \$			
3	Page 470			¢			
4				u\$ <sub></sub>	☐ Yes ☐ No		
5	Did the filing organization file Form 1120-POL for this year.				les   leo		
,	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 commi						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
	(a) raine	(b) Addiss	(9) 2	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

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

Schedule C (Form 990 or 990-EZ) 2013

Sch	edule C (Form 990 or 990-EZ) 2013 <b>The V</b>	Vilderness Land Trust	84-1192823	Page <b>2</b>
P	art II-A Complete if the organ section 501(h)).	nization is exempt under section 501(c)(	3) and filed Form 5768 (election	n under
	Check <b>u</b> if the filing organizar name, address, EIN	tion belongs to an affiliated group (and list I, expenses, and share of excess lobbying tion checked box A and "limited control" pr	expenditures).	nember's
_	Limits on Lo	obbying Expenditures ' means amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1	a Total lobbying expenditures to influence	public opinion (grass roots lobbying)	0	
		a legislative body (direct lobbying)		
		a and 1b)		
	d Other exempt purpose expenditures	789 505		
	e Total exempt purpose expenditures (add	lines 1c and 1d)	002 277	
	f Lobbying nontaxable amount. Enter the a columns.		145,507	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
	g Grassroots nontaxable amount (enter 25	36,377		
	h Subtract line 1g from line 1a. If zero or le			
	i Subtract line 1f from line 1c. If zero or le		0	
	j If there is an amount other than zero on reporting section 4911 tax for this year?	4720	Yes No	

#### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2anthrough 2f on page 41

Columns	below. See the ins	structions for lines	za uniough zi on p	aye	
	obbying Expenditu	ires During 4-Year	Averaging Period		$\mathcal{M}$
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount		155,401	151,634	145,507	452,542
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					678,813
c Total lobbying expenditures		57,274	10,396	13,872	81,542
d Grassroots nontaxable amount		38,850	37,909	36,377	113,136
e Grassroots ceiling amount (150% of line 2d, column (e))					169,704
f Grassroots lobbying expenditures				0	

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 The Wilderness Land Trust 84-1	192	823				Page
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).			n 5768			
For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b	))	
description of the lobbying activity.	Yes	No		Amo	ount	
<ul> <li>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:</li> <li>Volunteers?</li> <li>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> <li>Media advertisements?</li> <li>Mailings to members, legislators, or the public?</li> <li>Publications, or published or broadcast statements?</li> </ul>						
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
<ul> <li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li> <li>i Other activities?</li> <li>j Total. Add lines 1c through 1i</li> </ul>						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	c)(5), 	or s	ection	1		
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) and it either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes.")</li> </ul>	c)(5),	or s	ection	1 2 3	Yes 3, is	
1 Dues, assessments and similar amounts from members		1				
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> </ul>		2a				
b Carryover from last year		2b				
c Total		2c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 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		4				
and political expenditure next year?		5				
5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information		่อ				
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 Part II-B, line 1. Also, complete this part for any additional information.  Schedule C, Part II-A, Explanation of Four Year Averaging  The 501(h) election was in effect for the fiscal years er	J			30	······	
2011, 2012, and 2013.						

Washington DC lobbyist and Executive Director of The Wilderness Land Trust

Schedule C, Part II-B, Line 1

Part IV Supplemental Information (continued)
made direct contact with legislative staff and members to educate them on
the need for appropriations from the Land and Water Conservation Fund for
the acquisitions of wilderness inholdings.
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer identification number

Tr1	he Wilderness Land Trust		84-1192823
	rt I Organizations Maintaining Donor Advised Fur	nds or Other Similar Funds or	
Га	Complete if the organization answered "Yes" to F		Accounts.
	Complete ii are organization anewords 100 to 1	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Bonor advised rands	(b) I dide did offer decoding
2	Total number at end of year		
3	Aggregate contributions to (during year)		
4	Aggregate yalue at end of year		
5	Aggregate value at end of year  Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised	
,	funds are the organization's property, subject to the organization's excl		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in		
٠	only for charitable purposes and not for the benefit of the donor or donor		
			Yes No
Pa	Int II Conservation Easements.		
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check	all that apply).	
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically im	portant land area
	Protection of natural habitat	Preservation of a certified historic	c structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	ervation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure incli	uded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17 (c) historic structure listed in the National Register	6. and not on a	
3	Number of conservation easements modified, transferred, released, ext	inquished or terminated by the organizat	tion during the
3	toy your TT	inguished, or terminated by the organization	during the
4	Number of states where property subject to conservation easement is	ocated 11	
5	Does the organization have a written policy regarding the periodic mon		
•	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce		
	u		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	conservation easements during the year	
	<b>u</b> \$		
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)	
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easeme	•	
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that d	lescribes the
Do	organization's accounting for conservation easements.  Int III Organizations Maintaining Collections of Art,	Historical Transuras or Other	Similar Assats
Га	Complete if the organization answered "Yes" to F		olilliai Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n		balance sheet
	works of art, historical treasures, or other similar assets held for public		
	public service, provide, in Part XIII, the text of the footnote to its financial	ial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	report in its revenue statement and bala	nce sheet
	works of art, historical treasures, or other similar assets held for public	•	
	public service, provide the following amounts relating to these items:	•	
	(i) Revenues included in Form 990, Part VIII, line 1		u \$
2	If the organization received or held works of art, historical treasures, or		
	following amounts required to be reported under SFAS 116 (ASC 958)		
а	Revenues included in Form 990, Part VIII, line 1	=	u \$
b	Assets included in Form 990, Part X		

Par	rt III Organizations Mai	ntaining Collections of	Art, Historical Tre	easures, or Othe	r Similar As	sets (	continue	ed)	
	Using the organization's acquisition collection items (check all that app		, check any of the folio	wing that are a signifi	cant use of its				
а	Public exhibition	d 🗌 I	Loan or exchange prog	grams					
b	Scholarly research	е 🗍 (	Other						
С	Preservation for future general								
4	Provide a description of the organi	zation's collections and explain	how they further the c	rganization's exempt	purpose in Part				
	XIII.		·						
5	During the year, did the organization	on solicit or receive donations of	of art, historical treasure	es, or other similar					
	assets to be sold to raise funds ra	ther than to be maintained as p	art of the organization'	s collection?			Yes		No
Par		odial Arrangements.							
		anization answered "Yes"	to Form 990, Part	IV, line 9, or repo	orted an amo	ount on	Form		
	990, Part X, line 21.								
	Is the organization an agent, truste		•						1
	included on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in	n Part XIII and complete the fol	lowing table:				A		
	<b>.</b>						Amount		
a	Additions during the year				1d				
	Distributions during the year								
1 22	Ending balance	ocupt on Form 000 Part V line	212				Yes		No
	If "Yes," explain the arrangement in								NO
	rt V Endowment Funds		planation has been pre	SVIGGO III I GIT XIII					
		anization answered "Yes"	to Form 990, Part	IV, line 10.					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back	(e) Four y	ears b	ack
1a	Beginning of year balance	1,230,404	557,253	623,142		0	62,30		309
b	Contributions	552,657	813,057	696,231	918	,500	00 6,00		000
С	Net investment earnings, gains, ar	nd	~ ~ ~ 4				<b>\</b> /		
	losses						<b>\</b>		
d	Grants or scholarships	0 1110				$\mathbf{M}$	<u>y</u> _		
е	Other expenditures for facilities an					•			
	programs		-139,906	-713,054	-173		-6	8,	309
	Administrative expenses			-49,066	-121				
	End of year balance		1,230,404	557,253	623	,142			0
	Provide the estimated percentage	•	e (line 1g, column (a)) h	neld as:					
	Board designated or quasi-endown								
	Permanent endowment u								
	Temporarily restricted endowment								
	The percentages in lines 2a, 2b, at		Can that are hald and	a daylalatanı difan day					
	Are there endowment funds not in	the possession of the organiza	tion that are neid and a	administered for the			[v		Na
	organization by:							es	No X
	(i) unrelated organizations						3a(i)	$\dashv$	X
	(ii) related organizations  If "Yes" to 3a(ii), are the related or	appizations listed as required a					3a(ii) 3b	$\dashv$	
	Describe in Part XIII the intended						30		
	rt VI Land, Buildings, a	**	Willett Turius.						
		anization answered "Yes"	to Form 990, Part	IV, line 11a. See	Form 990, F	Part X.	line 10.		
	Description of property	(a) Cost or other b			Accumulated		(d) Book va	lue	
		(investment)	(other	·) de	preciation				
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment		1	L4,871	12,050		:	2,8	321
	Other					1			201
rotal.	Add lines 1a through 1e. (Column	(a) must equal Form 990, Part	X, column (B), line 10	(C).)	u	.1		٤,٤	321

0	1	_	1	1	a	2	0	2	2
O	4		┸	. 上	"	Z	O	Z.	

Page 3

Investments—Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests ..... (A) (B) <u>(</u>C) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u Part VIII Investments—Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2)(3)(4)(5)(6)(7)(8) (9)Total. (Colum Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value Land available for sale or donation 3,630,594 (1) (2)Earnest money deposits (3)(4) (5)(6)(7) (8) (9) 3,630,594 Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) .... Other Liabilities. Part X Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes Land acquisition revolving fund 759,037 140,963 Assets held for 3rd parties--noncash (4) (5) (6) (7) (8) (9)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII .

900,000

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

Pa	Reconciliation of Revenue per Audited Financial Statements V	-	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV,  Total revenue, gains, and other support per audited financial statements		1	825,977
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		_	023,311
	Net unrealized gains on investments 2a			
b				
c				
d				
е			2e	
3	Subtract line 2e from line 1		3	825,977
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	825 <b>,</b> 977
Pa	Reconciliation of Expenses per Audited Financial Statements		Return.	
_	Complete if the organization answered "Yes" to Form 990, Part IV,			803,377
1			1	003,311
2				
a b				
C				
d				
e		-	2e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	803,377
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b				
С	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part ), inc. 18		5	803,377
	art XIII Supplemental Information			<del>' 】</del>
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines		art X, liffe	
	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac art V, Line 4 - Intended Uses for Endowment Fu			
·	art v, hine i - intended uses for Endowment Fo			
T	emporarily Restricted Endowment: Amounts are	spent in acco	rdanc	e with
d	onors' restrictions.			
P	art X - FIN 48 Footnote			
т.	he Trust is exempt from federal and state inco	ome taves unde	r the	
🛨	ile 11 ube 15 exempt 11 om 1ederal and 5 cate 111ec	ome cares ande	±	
р	rovisions of Internal Revenue Code Section 503	1(c)(3). Accor	dingly	y, no
p	rovision or liability for income taxes has bee	en provided in	the	
a	ccompanying financial statements. The Trust's	federal Retur	n of	
				instian be
	rganization Exempt from Income Tax (Form 990)	is subject to	exam	inacion by
t	he IRS, generally for three years.			
		•••••		

	Form 990) 2013			d Trust	84-	1192823	Page 5
Part XIII	Supplementa	I Information (	continued)				
			_		_		
					1100	Cop	
		)  ( ]					
	I UN					OOP	<b>y</b>
_							

#### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Compensation Information**

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

u Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
u Attach to Form 990. u See separate instructions.
uInformation about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2013

OMB No. 1545-0047

Open to Public Inspection

The Wilderness Land Trust

Employer identification number 84-1192823

	THE WITGETHERS Land	11 450	01 1172023		
Pa	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any		m		
	990, Part VII, Section A, line 1a. Complete Part III to provide				
	First-class or charter travel	Housing allowance or residence for persor			
	Travel for companions	Payments for business use of personal re			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, o	chef)		
b	If any of the boxes on line 1a are checked, did the organization	on follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses describe				
	explain	•	1b		
2	Did the organization require substantiation prior to reimbursing				
	directors, trustees, and officers, including the CEO/Executive	Director, regarding the items checked in line			
	1a?		2		
3	Indicate which, if any, of the following the filing organization u	ises to establish the compensation of the			
3	organization's CEO/Executive Director. Check all that apply.				
	related organization to establish compensation of the CEO/Ex				
	Compensation committee	X Written employment contract			
	Independent compensation consultant	X Compensation survey or study			
	X Form 990 of other organizations	X Approval by the board or compensation of	ommittee		
	- Plinic inc	7 14 11 11 14 15		7	
4	During the year, did any person listed in Form 990, Part VI,	Section A. line 1a. with respect to the filing			
	organization or a related organization:	, , , , , , , , , , , , , , , , , , , ,			
а	Receive a severance payment or change-of-control payment	?	4a		х
b	Participate in, or receive payment from, a supplemental nonc				х
С	Participate in, or receive payment from, an equity-based com		4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the				
	Out (in 504(-)(0)   504(-)(1)	amplete Proce 5.0			
_	Only section 501(c)(3) and 501(c)(4) organizations must c	-			
5	For persons listed in Form 990, Part VII, Section A, line 1a, d	id the organization pay or accrue any			
	compensation contingent on the revenues of:		_		- V
a					X
b			<u>5b</u>		X
	If "Yes" to line 5a or 5b, describe in Part III.				
6	For persons listed in Form 990, Part VII, Section A, line 1a, d	id the organization pay or accrue any			
	compensation contingent on the net earnings of:		6a		Х
а			6b		Х
	Any related organization?				
	If "Yes" to line 6a or 6b, describe in Part III.				
_	For account listed in Form 200 Dest VIII Continue A. II.				
7	For persons listed in Form 990, Part VII, Section A, line 1a, d		_		v
•	payments not described in lines 5 and 6? If "Yes," describe in			1	X
8	Were any amounts reported in Form 990, Part VII, paid or ac				
	to the initial contract exception described in Regulations secti				v
	in Part III				X
9	If "Yes" to line 8, did the organization also follow the rebuttab	le presumption procedure described in			
	Regulations section 53.4958-6(c)?		9		

#### Part 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 in 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.

		f W-2 and/or 1099-N		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	reported as deferred in prior Form 990
Reid J. Haughey	(i) 123,320	0	С	33,985	0	157,305	0
1 President	(ii) O		c	0			0
	(i)						
2	(ii)						
	(i)						
3	(ii)						
	(i)						
4	(ii)						
	(i)						
5	(ii)						
	(i)						
6	(ii)						
	(i)			<u></u> .			
	(ii)	0 10 0	410		0101		
. Publ	Ø	spe	CHO			<b></b>	
	(i)						
9	(ii)						
	(i)						
10	(ii)						
	(i)						
11	(ii)						
	(i)						[
12	(ii)						
	(i)						
13	(ii)						
	(i)	<u>.</u>					
14	(ii)						
	(i)						
15	(ii)						
	(i)	<u>.</u>					
16	(ii)						

Schedule J (Form 990) 2013

#### SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Transactions With Interested Persons**

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

**U** Attach to Form 990 or Form 990-EZ.

**u** See separate instructions.

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

OMB No. 1545-0047

Open To Public Inspection

Employer identification number Name of the organization

	The Wilderness Land Trust						84-1	19282	23					
Part I	<b>Excess Benefit Transactions</b>	s (section 501	(c)(3) and sect	ion 5	501(c	(4) organization	ons only).							
	Complete if the organization answered	d "Yes" on For	rm 990, Part IV	, line	25a	or 25b, or For	m 990-E	Z, Part V, I	ine 40	Ob.				
1	(a) Name of disqualified person	(b) Relation	nship between disq	ualified	d pers	on and	(c) Des	scription of tra	nsaction	1		(d)	Correc	ted?
	(a) Name of disqualities person		organization	1			(0) 500	onpuon or tra	riodotioi			Yes		No
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
	e amount of tax incurred by the organiza								_					
under se	ection 4958								u \$					
3 Enter the	e amount of tax, if any, on line 2, above	, reimbursed I	by the organiza	ition					u \$					
Part II	Loans to and/or From Intere													
	Complete if the organization answered				ine 3	38a or Form 99	0, Part I	/, line 26;	or if th	ne				
	organization reported an amount on F			_					1	1.6.110			11	
	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan		oan to m the	(e) Original principal amount	(f) B	alance due	(g) In	default?		proved ard or	٠,	/ritten ment?
		J. J. J.			g.?	, .,					comm		.,	
				То	From				Yes	No	Yes	No	Yes	No
Karen Fi	sher	Board memb	er											
(1)	land acquisition	ф.		X		10,00	00	10,000		X	X		X	
(2)														
	Dublio	lnc	100		-	Fi Or								
(3)	<del></del>	1115		1	_	Н( ) (	_	$\rightarrow$		Ш				ļ
							•					y		
(4)			-							_				
(5)														ļ
(6)														ļ
_(7)														ļ
(8)														ļ
(9)				_										-
(10)														
Total			· · · · · · · · · · · · · · · · · · ·			u\$		10,000						
Part III	Grants or Assistance Benefi													
	Complete if the organization answered	d "Yes" on Fo	rm 990, Part IV	, line	27.	T								
	(a) Name of interested person	1 ' '	ship between intere		(c) A	mount of assistance	(d) Type	of assistance		(e)	Purpos	e of ass	istance	
		person :	and the organization	1	_				_					
(1)									_					
(2)									+					
(3)									+					
(4)									+					
(5)									+					
(6)									+					
(7)														

(8) (9) (10)

Scriedule L	(FOIIII 990 01 990-EZ) 2013				Paç	je z
Part IV	Business Transactions Involvir Complete if the organization answered "Y		a 28h or 28c			
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha of or revenu	g. es?
(1)		Organization			Yes	No
(2)						
(3)						
(4)						
(5)						
<u>(6)</u> <u>(7)</u>						
(8)						
(9)						
(10)	Complemental Information					
Part V	Supplemental Information  Provide additional information for response	eas to quastions on Schodula I (	coo instructions)			
	Provide additional information for respons	ses to questions on Schedule L (	see instructions).			
Sche	dule L, Part V - Addit	ional Information	n			
			<del>-</del>			
The	Organization had an ou	tstanding note pa	ayable to K	Caren Fisher, who	)	
Gozza	es on the Board of Dire	ogtorg in the o	mount of ¢1	0 000 The proc	ooda	
serve	es on the Board of Dir	ectors, in the a	mount of \$1	.0,000. The prod	eeas	
from	the note are included	in the Organiza	tion's Wild	derness Opportuni	ty	
				122		
Fund	, a revolving loan fund	d used for land	acquisition	1.		
	<b>D</b> 1 11 1					
	Public I	nchac	tion	CONV		
		119hcr	UUII	COPY		
				1 7		

SCHEDULE M (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

u Attach to Form 990.

 ${f u}$  Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number The Wilderness Land Trust 84-1192823

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining			
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amou	unts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	х	1	48,411	Market value			
10	Securities — Closely held stock			- ,				
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other			1! _				
15	Real estate — Residential		inen		n con	\/		
16	Real estate — Commercial			<b>GOLIO</b>	H OD	V		
17	Real estate — Other					1		
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other u(Loan forgivenes)	Х	1	28,846	Balance of note	paya	able	∍
26	Other <b>u</b> ()			-				
27	Other <b>u</b> ()							
28	Other <b>u</b> (							
29	Number of Forms 8283 received by	the organiz	zation during the tax yea	r for contributions for				
	which the organization completed Fo	orm 8283,	Part IV, Donee Acknowl	edgement	29			
				•			Yes	No
30a	During the year, did the organization	receive by	contribution any proper	ty reported in Part I, lines 1	- 28, that			
	it must hold for at least three years f	rom the da	ate of the initial contributi	on, and which is not require	ed to be			
	used for exempt purposes for the en					30a		х
b	If "Yes," describe the arrangement in							
31	Does the organization have a gift ac		policy that requires the re	eview of any non-standard				
	and wile with a seco			•		31	X	
32a	Does the organization hire or use the							
	and the setting of th	·	•	•		32a	х	
b	If "Yes," describe in Part II.							
33	If the organization did not report an a	amount in	column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II.							

SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 **2013** 

Open to Public

Inspection

Department of the Treasury Internal Revenue Service u Attach to Form 990 or 990-EZ. u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

The Wilderness Land Trust

Employer identification number

84-1192823

Form 990, Part I, Line 6

Members of the Board of Directors serve on a volunteer basis.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Prior to filing the Form 990, a draft in PDF format is provided to the

Finance Committee along with an email calling their attention to portions

of the forms. Comments and corrections are strongly encouraged.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The conflicts of interest policy requires officers, directors, and key

employees to disclose interests that could give rise to conflicts. The

policy and disclosure form are distributed and conflicts and

individuals are required to update the disclosure form throughout the year

in the event that potential conflicts arise. Potential conflicts of

interest are reviewed by the Board of Directors.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
The Board of Directors reviews and approves the President's annual salary,
with no participation by the President or other interested persons.

The President's salary is established using comparable data for similarly
qualified persons in functionally comparable positions at similar
nonprofits; consideration of roles and responsibilities of the President;
and cost of living data. Comparable market data is obtained from salary
surveys and Form 990s filed by comparable not-for-profit organizations.

Discussions and decisions regarding the compensation are documented in

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Employer identification number Name of the organization The Wilderness Land Trust 84-1192823 Board meeting minutes. The President also receives reimbursements for routine, reasonable, and documented expenses incurred during the year under an accountable plan. The President travels throughout our service area. Form 990, Part VI, Line 15b - Compensation Process for Officers A line item budget is approved by the Board of Directors annually. The Board approves the overall salaries and benefits expenses. Discussions and decisions regarding the budget are documented in Board meeting minutes. The President reviews and approves the salaries of other officers or key employees, with no participation by the interested persons, in accordance with the annual budget. The President establishes salaries using comparable data for similarly nonprofits; consideration of roles and responsibilities of the officer or key employee; and cost of living data. Comparable market data is obtained from salary surveys and Form 990s filed by comparable not-for-profit organizations. Employees also receive reimbursements for routine, reasonable, and documented expenses incurred during the year under an accountable plan. Employees travel throughout our service area. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation We consider requests on a case-by-case basis.

Form 990, Part X - Additional Information

The beginning of the year balance for Line 22 was updated to reflect a

Name of the organization  The Wilderness Land	Employer identification number 84-1192823			
\$10,000 note payable to a board	d member. Detail or	n the note payable		
including the purpose of the no	ote, is explained in	n Schedule L, Part II.		
Form 990, Part IX, Line 11g - 0	Other Fees for Serv	ices		
Description				
Program Service	Mgt & General	Fundraising		
Professional services				
\$ 114,219	\$ 50,720	\$ 1,000		
Public Ins	spection	n Conv		
I GOILO II K	Specific	п оору		