Return of Organization Exempt From Income Tax

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

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



Α	For the	e 2011 calendar year, or tax year beginning and	ending		
В	Check if applicabl	e: C Name of organization		D Employer identific	cation number
	Addre chang	FLATHEAD LAND TRUST			
	Name chang	e Doing Business As		36-34	479966
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Termi ated	PO BOX 1913			752-8293
	Amen	City or town, state or country, and ZIP + 4		G Gross receipts \$	767,261.
		KALISPELL, MI 59905		H(a) Is this a group re	
	pendi	F Name and address of principal officer: ALLSON YOUNG		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates incl	uded? Yes No
		empt status: $X 501(c)(3) = 501(c) () $ (insert no.) 4947(a)(1)	or 52	,	list. (see instructions)
		te: WWW.FLATHEADLANDTRUST.ORG		H(c) Group exemption	
		organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔛 Other 🕨	L Year	of formation: 1985 M	State of legal domicile: ${f MT}$
Ρ		Summary			
e	1	Briefly describe the organization's mission or most significant activities: FLAT	HEAD	LAND TRUST I	S DEDICATED
Activities & Governance				AND AND WATE	
ern	2	Check this box 🕨 📖 if the organization discontinued its operations or dispo		1 1	
Š	3				8
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4	Number of independent voting members of the governing body (Part VI, line 1b)			8
ies	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			7
ivit	6	Total number of volunteers (estimate if necessary)			20
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 34	·····		0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		784,757.	721,087.
Revenue	9	Program service revenue (Part VIII, line 2g)		2,500.	44,416.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,694.	1,758.
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,101.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		794,052.	767,261.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		106,737.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		196,969.	186,337.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
- NA	b	Total fundraising expenses (Part IX, column (D), line 25)  22,2			
	11/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		673,953.	625,054.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	······	977,659.	811,391.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12		-183,607.	-44,130.
ts o			В	eginning of Current Year	End of Year
Net Assets or Euror Balances	20	Total assets (Part X, line 16)	······	495,953.	430,001.
let A	21	Total liabilities (Part X, line 26)		34,069. 461,884.	<u>14,017.</u> 415,984.
	22	Net assets or fund balances. Subtract line 21 from line 20		401,884.	413,904.
	art II	Signature Block	a and -+-+	and and to the basis of	Included and to Bet 21
		lities of perjury, I declare that I have examined this return, including accompanying schedule			knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	nich prepare	r nas any knowledge.	
				1	

Sign Here	Signature of officer ALISON YOUNG, PRESIDEN Type or print name and title	Т	Date					
Paid	Print/Type preparer's name GREGORY PECK	Preparer's signature	Date 07/18/12					
Preparer	Firm's name 🕞 JUNKERMIER , CLARK	, CAMPANELLA, STEVENS,	P.C. Firm's EIN	▶ 81-0348775				
Use Only	Firm's address PO BOX 9047							
	KALISPELL, MT 59	904	Phone no.	406-755-3681				
May the I	May the IRS discuss this return with the preparer shown above? (see instructions)							
132001 01-2	23-12 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form <b>990</b> (2011)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1990 (2011) FLATHEAD LAND TRUST 36-3479966	Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	
	FLATHEAD LAND TRUST IS DEDICATED TO THE CONSERVATION OF NORTHWEST	
	MONTANA'S LAND AND WATER LEGACY THROUGH VOLUNTARY AGREEMENTS WITH	
	PRIVATE LAND OWNERS. FLT'S PRIMARY PROGRAM SERVICE IS PRIVATE LAND	
	CONSERVATION THROUGH VOLUNTARY AGREEMENTS WITH LANDOWNERS	
2	Did the organization undertake any significant program services during the year which were not listed on	37
	the prior Form 990 or 990-EZ?	Ă No
-	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	<b>v</b>
3		A⊥ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to	
4a	others, the total expenses, and revenue, if any, for each program service reported.         (Code:       ) (Expenses \$ 736,671. including grants of \$ ) (Revenue \$ 44,4	16.)
та	CONSERVATION. IN 2011, 4 PROPERTIES WITH PRIORITY CONSERVATION VALU	/
	WERE PERMANENTLY PROTECTED BY CONSERVATION EASEMENTS. ONE OF THESE	
	PROPERTIES INVOLVED A BARGAIN SALE PURCHASE USING BOTH FEDERAL AND	
	NON-FEDERAL FUNDS TO PROTECT NEARLY 1.5 MILES OF THE FLATHEAD RIVER	AND
	RIPARIAN HABITAT IMPORTANT TO NATIVE FISH SPECIES. IMPORTANT SOILS A	ND
	TRADITIONAL AGRICULTURAL USES WERE ALSO PERMANENTLY PROTECTED. THE	
	OTHER 3 PROJECTS INVOLVED DONATED CONSERVATION EASEMENTS PROTECTING	A
	CERTIFIED AMERICAN TREE FARM, PORTIONS OF A WATERSHED ABOVE A NATURA	L
	LAKE WITH EXCEPTIONAL WATER QUALITY AND RECREATION VALUES, AND CRITI	CAL
	WETLANDS WITHIN A UNIQUE FOREST HABITAT IDENTIFIED BY MONTANA NATURA	L
	HERITAGE AS AN IMPERILED HABITAT. ALL OF THESE PROJECTS KEEP THE	
	PROPERTIES IN PRIVATE OWNERSHIP, MAINTAIN TRADITIONAL AGRICULTURAL U	SES
4b	(Code:) (Expenses \$8 , 536 . including grants of \$) (Revenue \$)	)
	STEWARDSHIP. ANNUAL MONITORING OF CONSERVATION EASEMENTS WAS COMPLE	
	BY PROFESSIONAL STAFF AND 2 VOLUNTEERS ON ALL 45 PROPERTIES. MONITOR	
	EFFORTS INCLUDE MEETING WITH THE LANDOWNERS, ASSESSING ANY CHANGE OF	
	CONDITIONS FROM THE TIME OF THE INITIAL DONATION OF THE EASEMENT, AN	
	ADDRESSING ANY SPECIFIC REQUESTS FROM LANDOWNERS REGARDING STEWARDSH	
	OF THEIR LAND. STAFF AND ATTORNEYS CONTINUED TO ADDRESS AN ISSUE WI ONE PROPERTY. A THOROUGH REVIEW OF ALL BASELINE REPORT REQUIRED FOR	
	EXISTING EASEMENTS WAS COMPLETED AS PART OF FLTØ PROCESS TOWARDS	•
	NATIONAL ACCREDITATION.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	)
		/
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ ) Total program service expenses ► 745,207.	
4e	Total program service expenses ► 745,207.	) (2011)
132002 02-09-		• (2011)

Pa	rt IV Checklist of Required Schedules		
			Yes
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-	
•	public office? If "Yes," complete Schedule C, Part I	3	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		
•	during the tax year? If "Yes," complete Schedule C, Part II	4	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		
	Schedule D, Part III	8	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X		
	as applicable.		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		
	Part VI	11a	Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	
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	11d	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		
	Schedule D, Parts XI, XII, and XIII	12a	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1	1

1 g complete Schedule G, Part III g g 19 **20a** Did the organization operate one or more hospital facilities? *If* "Yes," *complete Schedule H* 20a

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

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No

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### FLATHEAD LAND TRUST

Form 990 (2	
Part IV	Che

t IV Checklist of Required Schedules (continued)
Did the organization report more than \$5,000 of grants and other assistance to any government
United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
Did the organization report more than \$5,000 of grants and other assistance to individuals in the
column (A), line 2? If "Yes," complete Schedule I, Parts I and III
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of
and former officers, directors, trustees, key employees, and highest compensated employees?
Schedule J
Did the organization have a tax-exempt bond issue with an outstanding principal amount of me
Last days of the second that was issued of the Descent on Ot. 00000 If "Vec" approximate lines 24h three

ion report more than \$5,000 of grants and other assistance to any government or organization in the
Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
tion report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,
?? If "Yes," complete Schedule I, Parts I and III
tion answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current

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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 25	24a		Х
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 with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			<b>_</b> _
	If "Yes," complete Schedule R, Part 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			<b>_</b> _
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	<b>990</b> (	2011)

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FLATHEAD LAND TRUST

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Yes

No

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Form	990 (2011) FLATHEAD LAND TRUST 36-347	9966	P	Page 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1	)		
b		ז		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	7		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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 13b			
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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FLATHEAD	LAND	TRUST	
Monogomont	and Dia	alagura r-	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O c	ontains a response to ar	y question in this Part VI .
	oritanis a response to ar	

Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 8	3		
	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.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 8	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other			
-	officer, director, trustee, or key employee?		2		х
3	Did the organization delegate control over management duties customarily performed by or under the				
•	of officers, directors, or trustees, or key employees to a management company or other person?	-	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 99		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse		5		X
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app		Ť		
74	more members of the governing body?		7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		14		
5			7b	x	
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year		10		
a			8a	x	
b	The governing body? Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac				
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re		5		
				Yes	No
102	Did the organization have local chapters, branches, or affiliates?		10a	165	X
	If "Yes," did the organization have written policies and procedures governing the activities of such cha		104		
5	and branches to ensure their operations are consistent with the organization's exempt purposes?	• • •	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body		11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	before ming the form:			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	x	
iza b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t	o conflicts?	12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye		120		
с	in Onkadula O have this was done		12c	x	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approval		14		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by independent			
-	The organization's CEO, Executive Director, or top management official		15a	x	
a b	Other officers or key employees of the organization		15a		x
5	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		150		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	opt with a			
iva			16a		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		104		
b		· ·			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi		16b		
Sec	exempt status with respect to such arrangements?				
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section 501/c)/2)c colu	availab		
10	300 $101$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$ $102$		avaliat	10	

19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and fin	ancial
	statements available to the public during the tax year.	

for public inspection. Indicate how you made these available. Check all that apply.

 X
 Own website
 Another's website
 X
 Upon request

20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
	JORDAHL & SLITER, PLLC - 406-752-1040
	2 SUNSET PLAZA, KALISPELL, MT 59901

X

6

Form 990	(2011)
Part V	Gove

#### FLATHEAD LAND TRUST

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Employees, and Independent Contractors Check if Schedule O contains a response to any question in this Part VII Image: Check if Schedule O contains a response to any question in this Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 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.

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		officer and a director/trustee)		from	from related	other			
	(describe	rector						the	organizations	compensation
	hours for	ordi	ee			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		æ	suadu		(W-2/1099-MISC)		organization and related
	organizations in Schedule	ual tr	tional		ploy	it con vee				organizations
	O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JIM REGNIER	,				-		<u> </u>			
PRESIDENT - PAST	5.00	х		Х				0.	0.	0.
(2) SUSAN SHERMAN										
SECRETARY	2.00	Х		Х				0.	0.	0.
(3) MUFFIE THOMSON										
TREASURER	1.00	Х		Х				0.	0.	0.
(4) EDD BLACKLER										_
DIRECTOR	2.00	х						0.	0.	0.
(5) DENNIS HATTON										
DIRECTOR - PAST	0.50	х						0.	0.	0.
(6) DON HAUTH										<u> </u>
DIRECTOR	4.00	X						0.	0.	0.
(7) DEAN SIRUCEK	1 00	37						0.	0	0
DIRECTOR	1.00	X						0.	0.	0.
(8) ALISON YOUNG PRESIDENT	4.00	x		x				0.	0.	0.
(9) RICHARD KUHL	4.00	<u> </u>		~				0.	0.	0.
DIRECTOR	0.50	x						0.	0.	0.
(10) DAVID SANDLER	0.50	11							Ŭ.	
DIRECTOR	1.00	x						0.	0.	0.
(11) MARILYN WOOD										
EXECUTIVE DIRECTOR	40.00			х				54,219.	0.	0.
			<u> </u>							
100007 01 00 10										Form <b>990</b> (2011)

132007 01-23-12

Form 990 (2011)

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd I	High	est	Compensated Employ	ees (continued)		
(A)	(B)							(D)	(E)		(F)
Name and title	Average	(de		Posi		<b>1</b> than	one	Reportable	Reportable		mated
	hours per	box	, unles	ss pei	rson	is bot	h an	compensation compensatio		amo	ount of
	week		cer an	dad	recto	or/trus	tee)	from from relate			ther
	(describe hours for	Individual trustee or director						the	organizations		ensation
	related	e or di	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC	,	m the
	organizations	rustee	Institutional trustee		ee	npens		(00-2/1099-00150)		Ű,	nization related
	in Schedule	dual t	itiona	_	nploy	st cor	5				izations
	O)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former				
					_						
1b Sub-total								54,219.		0.	0.
c Total from continuation sheets to Part VI								0.		0.	0.
d Total (add lines 1b and 1c)								54,219.		0.	0.
2 Total number of individuals (including but ne	ot limited to th	iose	liste	ed at	bove	e) wł	no re	eceived more than \$100	,000 of reportable		
compensation from the organization 🕨											0
										<u>را</u>	res No
3 Did the organization list any former officer,	director, or tru	ustee	e, ke	y en	nplc	yee	or	highest compensated e	mployee on		
line 1a? If "Yes," complete Schedule J for su	uch individual									3	X
4 For any individual listed on line 1a, is the su									the organization		
and related organizations greater than \$150	),000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual		4	X
5 Did any person listed on line 1a receive or a	•				-		elat	ed organization or indivi	dual for services		
rendered to the organization? If "Yes," com	olete Schedul	e J f	or sı	ıch j	pers	son .				5	X
Section B. Independent Contractors											
1 Complete this table for your five highest con										ensation fro	om
the organization. Report compensation for t	the calendar y	ear e	endiı	ng w	vith	or w	ithir	n the organization's tax	year.		
(A)		170	<b>``</b>	-				(B)		(C)	
Name and business	address	NC	ONE	5			_	Description of s	ervices	Compens	sation
							$\dashv$				
							-				

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 ► 0

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FLATHEAD	LAND	TRUST
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Form 990 (	2011)
Dart VII	

1	Part VII		Statement of Revenue
	Form 990 (	2011	) FLATHEA

FLATHEAD LAND TRUST

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				<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns       1a         Membership dues       11         Fundraising events       1a         Related organizations       1a         Government grants (contributions)       1a         All other contributions, gifts, grants, and similar amounts not included above       11         Noncash contributions included in lines 1a-1f: \$       14	46,557. 46,557. 4 513,975.				
aS	h	Total. Add lines 1a-1f		721,087.			
			<b>Business</b> Code				
e	2 a	PROGRAM SERVICE FEES	900099	44,416.	44,416.		
Program Service Revenue	b						
S S	с						
eve eve	d						
БЩ	е						
ደ	f	All other program service revenue					
	g	Total. Add lines 2a-2f		44,416.			
	3	Investment income (including dividends,					
		other similar amounts)		1,758.			1,758.
	4	Income from investment of tax-exempt be					
	5	Royalties	►				
		(i) Rea	l (ii) Personal				
	6 a	Gross rents					
	b	Less: rental expenses					
		Rental income or (loss)					
			►				
		Gross amount from sales of (i) Securi					
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses					
	с	Gain or (loss)					
		Net gain or (loss)					
anu		Gross income from fundraising events (n- including \$ of					
Other Reven		contributions reported on line 1c). See					
۳,		Part IV, line 18	а				
the	h	Less: direct expenses					
ō		Net income or (loss) from fundraising eve					
		Gross income from gaming activities. See					
	5 4	Part IV, line 19					
	h	Less: direct expenses					
		Net income or (loss) from gaming activitie					
		Gross sales of inventory, less returns					
	.0 a	and allowances	a				
	h						
		Less: cost of goods sold					
ł	C	Net income or (loss) from sales of invento					
ŀ	11 -	Miscellaneous Revenue	Business Code				
	11 a						
	b						
	с с						
		All other revenue					
	е 12	Total. Add lines 11a-11d           Total revenue. See instructions.		767,261.	44,416.	0.	1,758.
	14			,	,;	<b>.</b>	_,

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Diele columns (B), (C), and (D).		- Deut IV		
	Check if Schedule O contains a respons	se to any question in thi	s Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
-	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	54,219.	43,375.	6,506.	4,338.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	122,321.	97,857.	14,679.	9,785.
8	Pension plan accruals and contributions (include				-
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	9,797.	7,838.	1,176.	783.
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
	Accounting	9,894.		9,894.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	6,120.		6,120.	
12	Advertising and promotion				
13	Office expenses	8,510.	6,808.	1,022.	680.
14	Information technology				
15	Royalties				
16	Occupancy	15,812.	12,650.	1,897.	1,265.
17	Travel	4,745.	3,796.	569.	380.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		0 804		
19	Conferences, conventions, and meetings	4,664.	3,731.	560.	373.
20	Interest				
21	Payments to affiliates	1 1 7 0	0.4.2	1 / 1	0.5
22	Depreciation, depletion, and amortization	1,179. 3,095.	943.	<u>141.</u> 371.	95. 248.
23	Insurance	5,095.	2,476.	3/1.	248
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 0.)				
а	EASEMENT PROJECT EXPENS	556,901.	556,901.		
b	DUES AND SUBSCRIPTIONS	6,505.	5,204.	781.	520.
с	MISCELLANEOUS	4,208.	3,628.	217.	363.
d	FUNDRAISING	3,421.			3,421.
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	811,391.	745,207.	43,933.	22,251
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Figure if following SOP 98-2 (ASC 958-720)				
12001	0 01-23-12				Form <b>990</b> (2011)

**(B)** End of year

70,716.

4,350.

	<b>(A)</b> Beginning of year		
Cash - non-interest-bearing	67,787.	1	
Savings and temporary cash investments	62,451.	2	
Pledges and grants receivable, net	4,505.	3	
Accounts receivable, net		4	
Receivables from current and former officers, directors, trustees, key			
employees, and highest compensated employees. Complete Part II			
of Schedule L		5	
Receivables from other disqualified persons (as defined under section			

	-	Dessivebles from a unant and former officers, di		twistees lieu			
	5	Receivables from current and former officers, dir					
		employees, and highest compensated employee	es. Con	nplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	defined	d under section			
		4958(f)(1)), persons described in section 4958(c)	(3)(B),	and contributing			
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instrue				6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
٩	9	Prepaid expenses and deferred charges				9	810.
		Land, buildings, and equipment: cost or other	I			<u> </u>	
	lua		100	9,818.			
		basis. Complete Part VI of Schedule D		8,084.	1,662.	40	1 73/
		Less: accumulated depreciation				10c	1,734.
	11	Investments - publicly traded securities			359,548.	11	319,730.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa			495,953.	16	430,001.
	17	Accounts payable and accrued expenses		34,069.	17	14,017.	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
s	21	Escrow or custodial account liability. Complete F			21		
Liabilities	22	Payables to current and former officers, directors					
liq		highest compensated employees, and disqualifie					
Li					22		
	23				23		
	23	Secured mortgages and notes payable to unrela			23		
		Unsecured notes and loans payable to unrelated			24		
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D		24 060	25	14 017	
	26	Total liabilities. Add lines 17 through 25	<u></u>	<b>V</b>	34,069.	26	14,017.
		Organizations that follow SFAS 117, check he	re 🕨	L▲ and complete			
Balances		lines 27 through 29, and lines 33 and 34.			425 221		150 070
anc	27	Unrestricted net assets			435,331.	27	150,072.
Bal	28	Temporarily restricted net assets			1,433.	28	240,792.
_	29	Permanently restricted net assets		·····	25,120.	29	25,120.
Ъ		Organizations that do not follow SFAS 117, ch	neck h	ere 🕨 📖 and			
P		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or Fund	32	Retained earnings, endowment, accumulated inc				32	
ž	33	Total net assets or fund balances			461,884.	33	415,984.
	34	Total liabilities and net assets/fund balances			495,953.	34	430,001.
					-		Form <b>990</b> (2011)

Form 990 (2011) Part X | Balance Sheet

1

2

3

4

Form **990** (2011)

Form	1990 (2011) FLATHEAD LAND TRUST	36-	3479966	Pa	ge <b>12</b>
Ра	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			61.
2	Total expenses (must equal Part IX, column (A), line 25)	2			91.
3	Revenue less expenses. Subtract line 2 from line 1	3			.30.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			84.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			70.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	41	5,9	84.
Ра	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				37
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			37	X
b	5 , i			X	
С	······································	,			
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		-		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	•		37	
	Act and OMB Circular A-133?			X	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	X	

Form **990** (2011)

Total

city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 9 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III - Functionally integrated dL Type III - Other aL ρ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No (i) the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization in col. (i) listed in your organization in col. organization support (i) organized in the (described on lines 1-9 aoverning document? (i) of your support? U.S.? above or IRC section (see instructions)) Yes No Yes No Yes No

# Public Charity Status and Public Support

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

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name.

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

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

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

FLATHEAD LAND TRUST

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

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

132021 01-24-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

SCHEDULE A

Department of the Treasury Internal Revenue Service

Part I

1

2 3

4

(Form 990 or 990-EZ)

Name of the organization

Open to Public

Inspection Employer identification number

36-3479966

	10. 10	-0 00	- /
2	0-	11	
~			

ONID No. 1545 0045

#### Schedule A (Form 990 or 990-EZ) 2011

Ochequie	
Part II	Sup

Page **2** 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	(a) 2007	(6) 2000	(0) 2000	(0) 2010	(0)2011	(i) iotai
	Gross income from interest,						
0							
	dividends, payments received on						
	securities loans, rents, royalties						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						_
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	,	,			12	
13	First five years. If the Form 990 is for				-		
Sar	organization, check this box and stop ction C. Computation of Publi		rcontago				<b>&gt;</b>
	Public support percentage for 2011 (li		•	(77)		14	%
	Public support percentage from 2010						. %
16a	33 1/3% support test - 2011. If the o						
	stop here. The organization qualifies a						
b	33 1/3% support test - 2010. If the o						
	and <b>stop here.</b> The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact			-	-	-	
	meets the "facts-and-circumstances"	-	-		•		
b	10% -facts-and-circumstances test	-	-				
	more, and if the organization meets th						
	organization meets the "facts-and-circ	umstances" test.	. The organization	qualifies as a publ	licly supported org	anization	▶∟
18	Private foundation. If the organization	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box a	and see instructio	ons 🕨 🛄

Schedule A (Form 990 or 990-EZ) 2011

#### Schedule A (Form 990 or 990-EZ) 2011 FLATHEAD LAND TRUST 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. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	161,828.	243,708.	1354003.	784,757.	721,087.	3265383.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				2,500.	44,416.	
3	Gross receipts from activities that				2,0000		
3	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
U	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	161,828.	243,708.	1354003.	787,257.	765,503.	3312299.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
k	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						0.
c	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6.)						3312299.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
9	Amounts from line 6	161,828.	243,708.	1354003.	787,257.	765,503.	3312299.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,000.	12,157.	8,404.	7,628.	1,758.	47,947.
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	18,000.	12,157.	8,404.	7,628.	1,758.	47,947.
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.)	10,547.	4,800.	61,270.	52.		76,669.
13	Total support (Add lines 9, 10c, 11, and 12.)	190,375.	260,665.	1423677.	794,937.	767,261.	3436915.
14	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
							<u></u>
	ction C. Computation of Publ						
15	Public support percentage for 2011 (	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	96.37 %
	Public support percentage from 2010					16	%
	ction D. Computation of Inves						1 40
	Investment income percentage for 20			ne 13, column (f))		17	1.40 %
	Investment income percentage from a					18	%
<b>19</b> a	<b>33 1/3% support tests - 2011.</b> If the	-					
_	more than 33 1/3%, check this box a						<b>X</b>
k	<b>33 1/3% support tests - 2010.</b> If the						
~	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n dia not check a	box on line 14, 19	a, or 190, check th			
1320	23 01-24-12				Sch	equie A (Form 99	0 or 990-EZ) 2011

Internal Revenue Service

# **Schedule of Contributors**

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

OMB No. 1545-0047

2011

Employer identification number

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30	- 3	4/	99	66

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	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

FLATHEAD LAND TRUST

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

**X** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

#### **Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

J 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 **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** 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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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) (2011)

(Form	990)
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Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► 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.

► Attach to Form 990. ► See separate instructions.

Nam	e of the organization FLATHEAD LAND TRUS	۲Ţ		Employer identification number $36 - 3479966$
Par			s or A	
1 41	organization answered "Yes" to Form 990, Part IV, lir		3 UI A	counts. complete il the
		(a) Donor advised funds	(h	) Funds and other accounts
-	Total number at and of year		(10	
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	-		
~	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor			•
Par		rappization answered "Vec" to Form 000		
		-	Fart IV, I	
1	Purpose(s) of conservation easements held by the organizat		atorically	important land area
	Preservation of land for public use (e.g., recreation of X Protection of natural habitat			•
	Protection of natural nabitat     Preservation of open space	Preservation of a cer	tified his	stone structure
•				
2	Complete lines 2a through 2d if the organization held a qual	ined conservation contribution in the form	1 OF A COF	iservation easement on the last
	day of the tax year.		Г	Held at the End of the Tax Year
2	Total number of conservation ecoments		t t	2a 49
a h			Г	2b 10,336.00
b		ructure included in (a)		20 10,550.00
d	Number of conservation easements on a certified historic st Number of conservation easements included in (c) acquired			
u	listed in the National Register		luie	2d
3	Number of conservation easements modified, transferred, re		L ne organi	
Ŭ	year		ie organi	
4	Number of states where property subject to conservation ea	asement is located  1		
5	Does the organization have a written policy regarding the pe			
	violations, and enforcement of the conservation easements			X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting			
7	Amount of expenses incurred in monitoring, inspecting, and			
8	Does each conservation easement reported on line 2(d) abo			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIV, describe how the organization reports conservation			
	include, if applicable, the text of the footnote to the organization			
	conservation easements.		-	-
Par	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or C	Other S	Similar Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ment an	d balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of p	oublic service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	ribes these items.		
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statemer	nt and ba	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	ublic serv	vice, provide the following amounts
	relating to these items:			
	(i) Revenues included in Form 990, Part VIII, line 1			
	···· · · · · · · · · · · · · · · · · ·			<b>N A</b>
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, p	
	the following amounts required to be reported under SFAS			
а	Revenues included in Form 990, Part VIII, line 1			► \$
b	Assets included in Form 990, Part X			► \$

OMB No. 1545-0047

**Open to Public** 

Inspection

1

Sche	dule D (Form 990) 2011 FLATHEA	D LAND TRU	ST			<u>36-34</u>	<u>7996</u>	б _{Раде} <b>2</b>			
Pa	t III Organizations Maintaining C	collections of A	rt, Historical Tr	easures, or Oth	ner Simila	ar Asse	<b>ts</b> (conti	inued)			
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that are a	significant	use of its	collectio	n items			
	(check all that apply):										
а	Public exhibition	d	I 🔄 Loan or exc	hange programs							
b	Scholarly research	e	Other								
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's ex	empt purpo	ose in Par	t XIV.				
5											
	to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Par	t IV Escrow and Custodial Arran		ete if the organizatio	on answered "Yes" t	o Form 990	, Part IV, I	line 9, or				
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribution	ns or other assets no	ot included	_	-				
	on Form 990, Part X?					L	Yes	└── No			
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:								
							Amount	t			
с	Beginning balance				1c						
d	Additions during the year				1d						
е	Distributions during the year				1e						
f	Ending balance										
2a	Did the organization include an amount on F	orm 990, Part X, line	21?			L	Yes	└── No			
	If "Yes," explain the arrangement in Part XIV.										
Pa	t V Endowment Funds. Complete i	f the organization an	swered "Yes" to Fo	1	1						
		(a) Current year	(b) Prior year	(c) Two years back		ears back	(e) Four	years back			
1a	Beginning of year balance	51,553.	49,120.		,						
b	Contributions		1,000.								
с	Net investment earnings, gains, and losses	-65.	2,935.	5,204.							
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs		1,502.	5,204.							
f	Administrative expenses										
g	End of year balance	51,488.	51,553,	,	,						
2	Provide the estimated percentage of the cur		e (line 1g, column (	a)) held as:							
а	Board designated or quasi-endowment	49.88	_%								
b	Permanent endowment  48.79	<u></u>									
С		<u>1.3</u> 3 %									
	The percentages in lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should										
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	and administered for	the organiz	zation	г				
	by:							Yes No			
	(i) unrelated organizations						3a(i)	<u> </u>			
	(ii) related organizations						3a(ii)	X			
	If "Yes" to 3a(ii), are the related organizations						3b				
4	Describe in Part XIV the intended uses of the										
Pa	t VI Land, Buildings, and Equipm					<u> </u>					
	Description of property	(a) Cost or o		• •	Accumulate		(d) Bool	k value			
<u> </u>		basis (investr	Dasis	(other) d	epreciation						
	Land										
	Buildings										
	Leasehold improvements			9,818.	8,0			1,734.			
d	Equipment			9,010.	0,0	<u></u>	-	1,134.			
	Other		V column (D) line	10(a))				1,734.			
Tota	Add lines 1a through 1e. (Column (d) must e	quai ronn 990, Part	л, соштіп (в), line	<i>i</i> U(C).)		P Sobodul-		990) 2011			

Schedule D (Form 990) 2011

Schedule D	(Form 990)	) 2011
Dart VII	Investo	nent

## FLATHEAD LAND TRUST

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36-3479966	5 Page 3
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Part vii investments - Other Securities. Se	e Form 990, Part X, III			
(a) Description of security or category (including name of security)	<b>(b)</b> Book value		c) Method of valuation: or end-of-year market value	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. So	ee Form 990, Part X, I			
(a) Description of investment type	(b) Book value		c) Method of valuation: or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line	15			
	Description		(b) Book val	10
	Description		(b) BOOK Val	ue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)			
Part X Other Liabilities. See Form 990, Part X,				
1.     (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	≥ 25.)			
Ein 48 (ASC 740) Ecotopie in Part XIV provide the text of the footpote to	o the organization's financial	statements that reports the organiza	tion's liability for uncertain tax positions under	
2. FIN 48 (ASC 740). 132053 01-23-12			Schedule D (Form 99	0) 2011

10

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Sche	dule D (Form 990)	2011 FLATHEAD LAND TRUST				36-	3479966	Page <b>4</b>
Pa	t XI Recond	iliation of Change in Net Assets from Form 990 to Au	udite	d Finan	cial Stat			0
1	Total revenue (Fo	orm 990, Part VIII, column (A), line 12)			1			,261.
2	Total expenses (	Form 990, Part IX, column (A), line 25)			2		811	,391.
3		) for the year. Subtract line 2 from line 1			3			,130.
4	Net unrealized ga	ains (losses) on investments			4		-1	,770.
5	Donated services	s and use of facilities			5			
6		nses			6			
7		stments			7			
8		n Part XIV.)			8			
9	Total adjustment	s (net). Add lines 4 through 8			9			<u>,770.</u>
10	Excess or (deficit	) for the year per audited financial statements. Combine lines 3 and 9			10			,900.
Par	t XII Recond	iliation of Revenue per Audited Financial Statements	s Wi	th Rever	nue per l	Retur		
1	Total revenue, ga	ains, and other support per audited financial statements				1	2,866	<u>,270.</u>
2		d on line 1 but not on Form 990, Part VIII, line 12:						
а		——————————————————————————————————————	2a	-	<u>1,770</u> 7,722	<u>.</u>		
b			2b	1	7,722	4		
С		, , , , , , , , , , , , , , , , , , ,	2c			4		
d	Other (Describe i	n Part XIV.)	2d	2,08	3,057	·		
е	Add lines 2a thro	•				2e	2,099	<u>,009.</u>
3	Subtract line 2e	from line <b>1</b>				3	767	,261.
4		d on Form 990, Part VIII, line 12, but not on line <b>1</b> :						
а			4a			4		
b	Other (Describe i	n Part XIV.)	4b			_		•
с	Add lines 4a and					4c		0.
5	Total revenue. A					5		,261.
		iliation of Expenses per Audited Financial Statement		-		1		170
1		nd losses per audited financial statements				1	2,912	,1/0.
2		d on line 1 but not on Form 990, Part IX, line 25:	ı.	1				
а			2a	1	7,722	4		
b			2b			-		
С		——————————————————————————————————————	2c	2 00	2 057	-		
d		,	2d		3,057	-	2 1 0 0	770
	Add lines 2a thro	•				2e	2,100	<u>,779.</u> ,391.
3		from line <b>1</b>				3	011	, 391.
4		d on Form 990, Part IX, line 25, but not on line <b>1</b> :	. 1					
			4a			-		
		···· =======,	4b					Δ
	Add lines <b>4a</b> and					4c	Q11	$\frac{0.}{,391.}$
5		Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18.) mental Information				5		, , , , , , , , , , , , , , , , , , , ,
		rovide the descriptions required for Part II, lines 3, 5, and 9: Part III, lines		and 4. Do	rt IV linco :	1h and	2h: Part V lina	1. Port

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 a and 4; Part IV, lines 1 b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2 d and 4b; and Part XIII, lines 2 d and 4b. Also complete this part to provide any additional information. **PART II, LINE 9: EASEMENTS ARE VALUED AT ZERO AND ARE NOT REPORTED** 

#### WITHIN THE FINANCIAL STATEMENTS.

PART	v,	LINE	4:	PART	v,	LINE	4:	THE	ENDOWMENT	FUNDS	WERE	ESTABLISHED	

TO HOLD AND GENERATE FUNDS TO SUPPORT THE ORGANIZATION AND ITS PRIVATE

LAND CONSERVATION ACTIVITIES. THE INTEREST AND EARNINGS MAY BE USED FOR

#### OPERATING EXPENSES RELATED TO THE ORGANIZATION © CONSERVATION WORK, SUCH

#### AS SALARIES, OVERHEAD COSTS, OR OTHER RELATED EXPENSES. THE PRINCIPLE

CANNOT BE USED.

#### PART XII LINE 2D: VALUE OF DONATED EASEMENT

PART XIII LINE 2D: VALUE OF DONATED EASEMENT

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. 2011 Open to Public Inspection

Employer identification number 36 - 3479966

OMB No. 1545-0047

FLATHEAD LAND TRUST

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

VOLUNTARY AGREEMENTS WITH PRIVATE LANDOWNERS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

(CONSERVATION EASEMENTS); WITHIN THAT PROGRAM SERVICE FLT DEVELOPS,

NEGOTIATES, AND ACCEPTS DONATED CONSERVATION EASEMENTS. IN ADDITION

WITH BOTH PRIVATE AND FEDERAL FUNDS, FLT PURCHASES CONSERVATION

EASEMENTS. NONE OF THE ACTIVITIES ARE NEW IN THE 2011 TAX YEAR.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

WHILE PROTECTING OPEN SPACE, WILDLIFE HABITAT AND WATER QUALITY.

FORM 990, PART VI, SECTION A, LINE 6: FLATHEAD LAND TRUST HAS ONLY ONE CLASS OF MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7B: ALL MEMBERS HAVE EQUAL VOTING RIGHTS. A VOTE OF THE MEMBERSHIP IS OBTAINED WHEN REQUIRED BY MONTANA STATE LAW TO APPROVE SUBSTANTIAL ORGANIZATIONAL SUCH AS CHANGING THE NUMBER OF COMPOSITION OF THE BOARD OF DIRECTORS, DISSOLUTION OF THE ORGANIZATION, ETC.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY THE ORGANIZATION'S ACCOUNTING FIRM, REVIEWED BY THE ORGANIZATION'S EXECUTIVE DIRECTOR, AND PROVIDED TO THE ORGANIZATION'S BOARD OF DIRECTORS FOR REVIEW AND COMMENT PRIOR TO FILING THE RETURN WITH THE IRS.

Schedule O (Form 990 or 990-EZ) (2011)	
Name of the organization FLATHEAD LAND TRUST	Employer identification number 36-3479966
FLATHEAD LAND TRUST	30-34/9900
FORM 990, PART VI, SECTION B, LINE 12C: THE "CONFLICT OF	INTEREST" POLICY
IS PROVIDED TO EACH BOARD MEMBER IN THEIR BOARD NOTEBOOK	•
FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DI	

COMPENSATION IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS. THE TOTAL EMPLOYEE COMPENSATION BUDGET IS REVIEW AND APPROVED BY THE BOARD OF DIRECTORS AS PART OF THE ANNUAL BUDGET AND APPROVAL PROCESS. EMPLOYEE COMPENSATION (OTHER THAN THE EXECUTIVE DIRECTOR) IS NOT INDIVIDUALLY REVIEWED BY THE BOARD, BUT BY THE EXECUTIVE DIRECTOR. PUBLISHED SALARY SURVEYS BY THE LAND TRUST ALLIANCE AND TRAINING RESOURCES FOR THE ENVIRONMENTAL COMMUNITY ARE USED TO PROVIDE COMPARATIVE COMPENSATION GUIDELINES.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:

-1,770.

## Application for Extension of Time To File an Exempt Organization Return

► X

0 1

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing** (*e-file*) • You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

#### Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or		
File by the due date for filing your return. See instructions.	FLATHEAD LAND TRUST	X 36-3479966		
	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 1913	Social security number (SSN)		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>KALISPELL, MT</b> 59903			

Enter the Return code for the return that this application is for (file a separate application for each return)

Applicatio	n	Return	Application			Return		
Is For		Code	Is For		Code			
Form 990		01	Form 990-T (corporation)			07		
Form 990-E	3L	02	Form 1041-A			08		
Form 990-E	Z	01	Form 4720			09		
Form 990-F	PF	04	Form 5227			10		
Form 990-T	Г (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T	Γ (trust other than above)	06	Form 8870			12		
	JORDAHL & SLITI bks are in the care of $\ge \frac{2}{1040}$ SUNSET PLAZA	•	LISPELL, MT 59901					
	one No. $\blacktriangleright$ 406-752-1040		FAX No. 🕨					
	ganization does not have an office or place of business		ited States, check this box		🕨			
	for a Group Return, enter the organization's four digit	1						
box 🕨 🗋	$_$ . If it is for part of the group, check this box $\blacktriangleright$ $_$				ers the extension is	for.		
I is for	uest an automatic 3-month (6 months for a corporation AUGUST 15, 2012, to file the exemp the organization's return for:				The extension			
	$\mathbb{X}$ calendar year 2011 or							
	tax year beginning	, an	d ending		·			
2 If the	e tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: 🗌 Initial return 🔲 Fina	ıl retur	n			
3a If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any					
nonre	efundable credits. See instructions.			3a	\$	0.		
<b>b</b> If this	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
estim	nated tax payments made. Include any prior year overp	ayment a	llowed as a credit.	Зb	\$	0.		
c Bala	c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,							
by us	sing EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	0.		
Caution. If	you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453-EO and Form	8879-	EO for payment inst	ructions.		
LHA Fo	r Privacy Act and Paperwork Reduction Act Notice,	see Instr	uctions.		Form <b>8868</b> (Re	ev. 1-2012)		