Open To Public Inspection

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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the 2	2006 calendar year, or tax year beginning	and	ending			
В	Check if applicable	Please use IRS C Name of organization D Em				Employer i	dentification number
	Addres	ress label or rest in the print or INDIAN LAND TENURE FOUNDATION				41-20	014273
	Name change	e type			Telephone	number	
	Initial return	Specific 151 E COUNTY RD B2				651-	766-8999
	Final	Instruc- tions. City or town, state or country, and ZIP + 4	,		F	Accounting met	
	Amend return	LITTLE CANADA, MIN 53				Other (specify)	
	Applica pendin	ocoulon oo r(o)(o) organizations and to tr (a)(i	nonexempt charitable trusts	H a	nd are not applic	able to sec	tion 527 organizations.
		must attach a completed Schedule A (Form 99)	1 01 990-EZ).		Is this a group reti		
		► WWW.INDIANLANDTENURE.ORG		-	If "Yes," enter num		
		tion type (check only one) ► X 501(c) (3) <		27 H(c)	Are all affiliates inc (If "No," attach a lis		N/A Yes No
		ere Lifthe organization is not a 509(a)(3) support		H(d)	is this a senarate r	eturn filed by	y an or-
		are normally not more than \$25,000. A return is not require	ed, but if the organization		ganization covered	l by a group	ruling? Yes X No
	cnooses	to file a return, be sure to file a complete return.		1	Group Exemption		N/A
			4 540 056	M			ion is not required to attach
		ceipts: Add lines 6b, 8b, 9b, and 10b to line 12	1,749,256.		Sch. B (Form 990,	990-EZ, 01	990-PF).
Pa		Revenue, Expenses, and Changes in N		lance	S	[3, 56]	
	1	Contributions, gifts, grants, and similar amounts receive	1	. 1		5.0	
	a	Contributions to donor advised funds			140 62	1	
	b	Direct public support (not included on line 1a)			140,62		
	C	Indirect public support (not included on line 1a)			546,00		
	d	Government contributions (grants) (not included on line			445,73		1 122 260
	e	Total (add lines 1a through 1d) (cash \$1, 13 Program service revenue including government fees and)		1,132,360.
	2						58,017.
	3	Membership dues and assessments		21,412.			
	4	Interest on savings and temporary cash investments Dividends and interest from securities					495,044.
	5					5	433,044.
	6 a	Gross rents				- 43	
	D	Less: rental expenses Net rental income or (loss). Subtract line 6b from line 6a)		- 60	
ne	7 C	Other investment income (describe			************	6c	
Revenue	8 a	Gross amount from sales of assets other	(A) Securities		(B) Other	3656	
Re	oa				(b) Other	- 44	
		Language and an albert bank and astronomy	0.1				
	C						
	d	Gain or (loss) (attach schedule) Net gain or (loss). Combine line 8c, columns (A) and (B)	00			8d	
	9	Special events and activities (attach schedule). If any am			<u> </u>	- Ou	
	a		ntributions reported on line 1b) 9		7,82	2	
	ь	Less: direct expenses other than fundraising expenses		-	10,88		
	C	Net income or (loss) from special events. Subtract line 9		_			-3,061.
	10 a	Gross sales of inventory, less returns and allowances			26,94		0,000
	b	Less: cost of goods sold				0.00	
	C	Gross profit or (loss) from sales of inventory (attach sch	edule). Subtract line 10b from lin		STMT 3	10c	26,942.
	11	Other revenue (from Part VII, line 103)					7,659.
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c					1,738,373.
-	13	Program services (from line 44, column (B))					2,100,937.
Expenses	14	Management and general (from line 44, column (C))		******		14	357,595.
ens	15	2 0 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					263,707.
Exp	16	Payments to affiliates (attach schedule)				**	
_	17	Total expenses. Add lines 16 and 44, column (A)					2,722,239.
	18	Excess or (deficit) for the year. Subtract line 17 from line	12	1000		18	-983,866.
et	19	Net assets or fund balances at beginning of year (from lin	e 73, column (A))			19	21,151,705.
Net Assets	20	Other changes in net assets or fund balances (attach exp					2,240,014.
*	21	Net assets or fund balances at end of year. Combine lines					22,407,853.
62300	01 3-07	LHA For Privacy Act and Paperwork Reduction Act No					Form 990 (2006)

Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) **Functional Expenses** and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I. services and general 22a Grants paid from donor advised funds (attach schedule) 0 • noncash \$ des foreign grants, check here Other grants and allocations (attach schedule) STATEMENT 607.530. 607.530. 22b If this amount includes foreston grants, else \$5 here. 23 24 Benefits paid to or for members (attach 24 25a Compensation of current officers, directors, key 506,228. 80,605 698,817. 111,984. employees, etc. listed in Part V-A STMT 6 b Compensation of former officers, directors, key 0. 0 0. 0 . employees, etc. listed in Part V-B e Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 250 26 Salaries and wages of employees not included on lines 25a, b, and c 193,296. 97.881. 50,644. 44.771. 26 27 Pension plan contributions not included on lines 25a, b, and c 27 28 Employee benefits not included on lines 48,271. 25,949 9,808. 12,514. 25a - 27 28 59,703. 40,001 8,955. 10,747. 29 Payroll taxes 29 Professional fundraising fees Accounting fees 31 Legal fees 9,585. 6,422. 1,438. 1,725. Supplies 33 33 23,176. 15,528. 4,172. 3,476. Telephone 3,623. 24,159. 16,187. 4,349. Postage and shipping 35 35 Occupancy 36 3.943. 2.642. 591. 710. Equipment rental and maintenance 37 Printing and publications 24,984. 16,739. 3,748. 4,497. 38 38 102,861. 34,537. 8,885. 59,439 39 Travel 39 40 Conferences, conventions, and meetings ... 4,549. 25,270. 16,931. 3,790. Interest 41 6,338. 42,256. 28,312. 7.606. Depreciation, depletion, etc. (attach schedule) Other expenses not covered above (itemize): 43a 43b 43c 43d 43e 43f 150.042 47.198. • SEE STATEMENT 5 858,388, 661,148. 43g 44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), 357.595 263,707. carry these totals to lines 13-15) 722,239. 2,100,937. Joint Costs. Check Implication if you are following SOP 98-2. Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ______ Yes X No N/A N/A ; and (iv) the amount allocated to Fundraising \$ (iii) the amount allocated to Management and general \$ Form 990 (2006) **623011** 01-23-07

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Wh	nat is the organization's primary exempt purpose? SEE STATEMENT 8	Program Service Expenses
clie	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ents served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	TO EDUCATE INDIAN AND NON-INDIAN PEOPLE ON LAND TENURE ISSUES; TO REDUCE POVERTY AND DETERIORATION AMONG INDIAN COMMUNITIES; AND TO PRESERVE TRIBAL CULTURE, HISTORY AND NATURAL RESOURCES BY ASSISTING INDIAN PEOPLE IN ACQUIRING AND MANAGING THEIR LAND.	
b	(Grants and allocations \$) If this amount includes foreign grants, check here	2,100,937.
С	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
d	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
0	(Grants and allocations \$) If this amount includes foreign grants, check here Definition of their program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here Definition of the program services (attach schedule)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,100,937.
		Form 990 (2006)

Part IV Balance Sheets (See the instructions.) Note: Where required, attached schedules and amounts within the description column (A) Beginning of year should be for end-of-year amounts only. End of year 78,790. 71,806. 45 45 Cash - non-interest-bearing Savings and temporary cash investments 486,519. 1,942,465. 46 47 a Accounts receivable 47a 175.956. Less: allowance for doubtful accounts 12.127. 175.956. 47h 47c 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48b 48c 361,365. Grants receivable 50,365. 49 49 50 a Receivables from current and former officers, directors, trustees, and key employees 50a Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 50b 51 a Other notes and loans receivable 51a b Less: allowance for doubtful accounts 51b 51c 52 Inventories for sale or use 52 Prepaid expenses and deferred charges 33,955. 53 3,490. 53 54 a Investments - publicly-traded securities Cost 54a b Investments - other securities Cost FMV 54b 55 a Investments - land, buildings, and equipment: basis 55a b Less: accumulated depreciation 55b 55c Investments - other SEE STATEMENT 9 20.596.088. 56 20,609,279. 624,293. 57 a Land, buildings, and equipment: basis 57a 429,463. 413,064. b Less: accumulated depreciation STMT 10 194,830. 57b 57c Other assets, including program-related investments 58 60,238. 54,002. (describe ► INTEREST RECEIVABLE 58 22.724,910. 23,654,062. 59 Total assets (must equal line 74). Add lines 45 through 58 59 71,454. 83,139. Accounts payable and accrued expenses 60 60 001,751. 663,070. Grants payable 61 62 62 Deferred revenue Loans from officers, directors, trustees, and key employees 63 64 a Tax-exempt bond liabilities 64a 500,000. h Mortgages and other notes payable 500,000. 64b Other liabilities (describe 65 Total liabilities. Add lines 60 through 65 1.573.205. 1.246,209. 66 Organizations that follow SFAS 117, check here 67 through 69 and lines 73 and 74. Net Assets or Fund Balances 265,908. 238,965. 67 67 Unrestricted 20,885,797. 22,168,888. Temporarily restricted 68 Permanently restricted 69 Organizations that do not follow SFAS 117, check here complete lines 70 through 74. Capital stock, trust principal, or current funds 70 Paid-in or capital surplus, or land, building, and equipment fund 71 Retained earnings, endowment, accumulated income, or other funds 72 72 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. 21,151,705 22,407,853. (Column (A) must equal line 19 and column (B) must equal line 21) 73 23,654,062. 74 Total liabilities and net assets/fund balances. Add lines 66 and 73 724.910. 74

	instructions.)								
	Total revenue, gains, and other support per audited financial stateme	nts				a	4,	003,5	537.
b	Amounts included on line a but not on Part I, line 12:	***************************************	******						
1	Net unrealized gains on investments		b1	2,254,2	81.				
	Donated services and use of facilities								
	Recoveries of prior year grants								
	Other (specify):		b4						
	Add lines b1 through b4					b	2,	254,2	281.
С	Subtract line b from line a					С		749,2	
d	Amounts included on Part I, line 12, but not on line a:								
-1	Investment expenses not included on Part I, line 6b		d1						
	Other (specify): SPECIAL EVENT EXPENSES		d2	-10,8	83.				
	Add lines d1 and d2					d		-10,8	
е	Total revenue (Part I, line 12). Add lines c and d Irt IV-B Reconciliation of Expenses per Audited Fina					е	1,	738,3	<u>373.</u>
Pa	art IV-B Reconciliation of Expenses per Audited Fina	ancial Statements	Wit	h Expenses	per	Ret			
2	Total expenses and losses per audited financial statements					a	2,	733,1	<u>L22.</u>
	Amounts included on line a but not on Part I, line 17:								
	Donated services and use of facilities								
	Prior year adjustments reported on Part I, line 20								
3	Losses reported on Part I, line 20		b3						
4	Other (specify): SPECIAL EVENT EXPENSES		b4	10,8	83.				
	Add lines b1 through b4					b		10,8	
C	Subtract line b from line a					С	2,	722,2	<u> 239.</u>
	Amounts included on Part I, line 17, but not on line a:	ı	1						
	Investment expenses not included on Part I, line 6b		d1						
2	Other (specify):		d2						
	Add lines d1 and d2					d		E00 6	0.
<u>e</u>	Total expenses (Part I, line 17), Add lines c and d	Employees #1.				e		722,2	
Pe	art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we	re not compensated \ (Si	ee th	e instructions.)					ee,
		(B) Title and average hours per week devoted to position	s (C) Compensation	(D) Co	ntribu	tions to	(E) Exp	ense
	(A) Name and address	per week devoted to	l) (H	not paid, enter) emplo	yee b	enefit erred	àccour other allo	it and wances
		розноп	+-	-0)	compe	nsauo	u biaua	Outor and	WELLINGS
SE	E STATEMENT 11			596,600.	102	2	17	1	0.
<u> </u>			+	330,000.	202	7 24			
			T						
				1					
			1						
								orm 990	

75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 1		orm 990 (2006) INDIAN LAND TENURE FOUNDATION	41-2014	273		age 6
meetings				-	Yes	No
b Are any officers, directors, trustees, or key employees lated in Form 990, Part VA, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractions lated in Schedule A, Part II, or Highest compensated professional and other independent contractions lated in Schedule A, Part II, or Highest compensated professional and other independent contractors lated in Schedule A, Part II, or Highest compensated employees listed in Schedule A, Part II, or Highest compensated professional and other independent contractors lated in Schedule A, Part II, or Highest compensated professional and other independent contractors lated in Schedule A, Part II, or Highest compensated professional and other independent contractors lated in Schedule A, Part II, or Highest compensated professional and other independent contractors lated in Schedule A, Part II, or Highest includes the information described in the Instructions. 4 Does the organization have a written conflict of interest coley? Part V-B Former Officers, Directors, Trustees, or key employee received compensation or other benefits (Genched below) during the year, list that person below and entire the amount of compensation or other benefits (Genched below) during the year, list that person below and entire the amount of compensation or other benefits in the employed accounts. School of the program of	75 a				- 1	10.0
The stand in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part I Ao rifl. Pretailed to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationships (in the individuals and explains the relationships) (in the part I Are highest compensated professional and other independent contractors listed in Schedule A, Part I Ao rithings and the individuals and explains the instructions for the definition of "related organizations," whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organizations," whether tax exempt or taxable, that are related to the organization? See the instructions in the instructions. 1 Does the committee or a written conflict of interest policy. 1 Part V-B Banefits (if any fam or officer, director, trusts, when yet propagates received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate control of the propagation or other benefits in the appropriate control of the propagation or other benefits in the appropriate control of the propagation or other benefits in the appropriate control of the propagation or other benefits in the appropriate control of the propagation of the propaga				200	3 Yes	WA NOW!
Part II A or IR3, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationships? c Do any officens, directors, nustees, or key employees listed in Schwidzle A, Part I, or Righest compensated professional and other independent contractions listed in Schwidzle A, Part I, or Righest compensated professional and other independent contractions listed in Schwidzle A, Part I, or Righest compensated professional and other independent contractions listed in Schwidzle A, Part I, or Righest compensated professional and other independent contraction listed in Schwidzle A, Part I, or Righest compensated professional and other independent contraction listed in Schwidzle A, Part I, or Righest compensation from the individual	Ŀ			1		
the individuals and explains the relationship(s) Do any officers, directors, furstees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensation from any other organizations, whether tax exempt or taxable, that are related to the organization PSee the instructions for the definition of "related organizations." If "Yes," sittach a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," statch a statement that includes the information described in the instructions. If "Yes," attach a statement that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions in the year, let that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions in the year, let "Yes," attach a detailed statement of each change in the satisfactions. If "Yes," attach a detailed statement of each change in the satisfactions. If yet in the person below the instructions in the year of the ye					1	
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V.A. or highest compensated employees listed in Schedule A, Part I, or highest compensation professional and other independent contractors listed in Schedule A, Part I, and II, Part I, and III, Part I, and III, Part I, and III, Part I, and III, Part III, III, Par		the individual and confine the valetime bir (a)	ulat luci tilles	75b		Х
Blated in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II Ao Tills, neaves compensation from any other organizations, whether tax exempt or traxable, that are related to the organization? See the instructions for the definition of 'related organizations,' the state as attained that includes the information described in the instructions. d. Does the organization have a written conflict of interest policy? Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (if any former officer, director, trustees, and Key Employees that Received Compensation or Other benefits (if any former officer, director, trustees, and Key Employees that Received Compensation or Other Benefits (if any former officer, director, trustees, and Key Employees That Received Compensation or Other Benefits (if in Organization the year, list that person below and enter the annount of compensation or other benefits in the appropriate business with the part of			omployooe	C 1. VI	X. 1	
Part II. of II-B, neselve compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of related organization. If "Yes," attach a statement that includes the information described in the instructions. If Yes, "Itach a statement that includes the information described in the instructions. If Yes, "Itach a statement that includes the information described in the instructions. Bonefits (II any former officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (described body) during the year, list that person below and enter the amount of compensation or other benefits (described body) during the year, list that person below and enter the amount of compensation or other benefits (described body) during the year, list that person below and enter the amount of compensation or other benefits (described body) during the year, list that person below and enter the amount of compensation or other benefits (described body) during the year, list that person below and enter the amount of compensation or other benefits (described body) during the year, list that person below and enter the amount of compensation or other benefits (described body) during the year list of the page possible of the page possible of the list allowances. (B) Loans and Advances (B) Loans and Advances (B) Loans and Advances (C) Compensation (C) Compens						
If "Yes," attach a statement that includes the information described in the instructions. Does the organization have a writing conflict of intensis policy?		Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are				
Part VI Other Information (See the instructions.) Ves. No.		organization? See the instructions for the definition of "related organization."		75c		X
Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (if any former office, director), tustee, or key employee received compensation or other benefits (if any former office, director), tustee, or key employee received compensation or other benefits (if cascable ablow), during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) (A) Name and address (B) Loans and Advances (B) Loans and Advances (C) Compensation (Prophysical Section of the compensation or other benefits in the appropriate column. See the instructions.) (B) Loans and Advances (B) Loans and Advances (C) Compensation (Prophysical Section of the compensation or other benefits in the appropriate column. See the instructions.) (B) Loans and Advances (B) Loans and Advances (C) Compensation (Prophysical Section of the compensation or other benefits in the appropriate column. See the instructions.) (B) Loans and Advances (B) Loans and Advances (C) Compensation (Prophysical Section Section of the section of the compensation or other benefits in the appropriate column. See the instructions.) (B) Loans and Advances (C) Compensation (Prophysical Section of the section of the compensation or other benefits in the appropriate column. See the instructions.) (B) Loans and Advances (C) Compensation of the columns at the appropriate columns of the compensation of the compensati					1 1	
Benefits (if any former officer, director, tustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits (in the appropriate column, See the instructions.) (A) Name and address NONE (8) Loans and Advances (10) Compensation (inter 0-) (B) Loans and Advances (10) Compensation (inter 0-) (B) Loans and Advances (10) Compensation (II) Contributions to the reference of the reference o		d Does the organization have a written conflict of interest policy?	Compensation			
the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. Set the instructions.) (A) Name and address NONE (B) Loans and Advances (C) Compensation (in or paid, onter -0-) (in or paid, o	ГС					ina
Part VI Other Information (See the instructions.) Yes No		the year, list that person below and enter the amount of compensation or other benefits in the app	ropriate column. Se	e the ir	nstructi	ons.)
Part VI Other Information (See the Instructions.) Yes No Ye		(C) Compens				
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Yes No		NONE (a) realist and address (in not part of the part	Ut I whoma's deformer	, I a		
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement as tatement or ganization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But and check whether it is exempt or						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement as tatement or ganization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But and check whether it is exempt or			}			
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement as tatement or ganization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But and check whether it is exempt or						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza				-		
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza				1		
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement as tatement or ganization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But and check whether it is exempt or						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement as tatement or ganization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But and check whether it is exempt or				-		
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza				+		
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement as tatement or ganization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But and check whether it is exempt or				+		
Part VI Other Information (See the instructions.) Part VI Other Information (See the instructions.) Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she here a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement she as a statement or undership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But "Yes," enter the name of the organization of the organiza						
Part VI Other Information (See the instructions.) 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change 77 Were any changes made in the organizing or governing documents but not reported to the IRS? 78 If "Yes," attach a conformed copy of the changes. 78 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78 Dif "Yes," has it filed a tax return on Form 990-T for this year? 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement or year is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80 If "Yes," enter the name of the organization N/A and check whether it is exempt or nonexempt organization file Form 1120-POL for this year? 81 Inter direct or indirect political expenditures. (See line 81 instructions.) 81 Inter direct or indirect political expenditures. (See line 81 instructions.)						
Part VI Other Information (See the instructions.) 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change 77 Were any changes made in the organizing or governing documents but not reported to the IRS? 78 If "Yes," attach a conformed copy of the changes. 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78 b If "Yes," has it filed a tax return on Form 990-T for this year? 78 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 X 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80 and check whether it is exempt or nonexempt 81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81 b Did the organization file Form 1120-POL for this year? 81 b J						
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement Was the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But a liquidation indirect political expenditures. (See line 81 instructions.) But a liquidation indirect political expenditures. (See line 81 instructions.) But a liquidation indirect political expenditures. (See line 81 instructions.) But a liquidation indirect political expenditures. (See line 81 instructions.)						
Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. But a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement Was the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? But a liquidation indirect political expenditures. (See line 81 instructions.) But a liquidation indirect political expenditures. (See line 81 instructions.) But a liquidation indirect political expenditures. (See line 81 instructions.) But a liquidation indirect political expenditures. (See line 81 instructions.)	_			\perp	5.7	
statement of each change Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. Build the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? If "Yes," enter the name of the organization \rightarrow \frac{N/A}{2} and check whether it is exempt or nonexempt Build the organization file Form 1120-POL for this year? Substitute of the IRS? If "Xes," attach a statement organization through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? Build the organization file Form 1120-POL for this year? Substitute of the IRS? If "Yes," attach a statement organization through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? Build the organization file Form 1120-POL for this year? Substitute of the IRS? If "Yes," attach a conformed by this return? In Text of the IRS? In Text					Yes	No
Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78 b If "Yes," has it filed a tax return on Form 990-T for this year? 78 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 X 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80 b If "Yes," enter the name of the organization N/A and check whether it is exempt or nonexempt 81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81 b Did the organization file Form 1120-POL for this year? 81 b X	76		etailed			707
If "Yes," attach a conformed copy of the changes. 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78 b If "Yes," has it filed a tax return on Form 990-T for this year? 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 X 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80 b If "Yes," enter the name of the organization 80 a N/A and check whether it is exempt or nonexempt 81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81 b Did the organization file Form 1120-POL for this year? 81 b X	77	w				
Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? N/A 78b 7	11					
b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 X 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80 a X b If "Yes," enter the name of the organization N/A and check whether it is exempt or nonexempt 81 a Enter direct or indirect political expenditures. (See line 81 instructions.) 81 b Did the organization file Form 1120-POL for this year? 81 b X	78 2		is return?	78a		X
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 X Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? If "Yes," enter the name of the organization ► N/A and check whether it is exempt or nonexempt and check whether it is exempt or nonexempt B1 a Enter direct or indirect political expenditures. (See line 81 instructions.) B1 b Did the organization file Form 1120-POL for this year?						
Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? N/A	79					X
membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? b If "Yes," enter the name of the organization	80 a					
and check whether it is exempt or nonexempt and check whether it is exempt or nonexempt b Did the organization file Form 1120-POL for this year?				80a		X
B1 a Enter direct or indirect political expenditures. (See line 81 instructions.) B1 a Enter direct or indirect political expenditures. (See line 81 instructions.) B1 a Enter direct or indirect political expenditures. (See line 81 instructions.) B1 a Enter direct or indirect political expenditures. (See line 81 instructions.)	b	b If "Yes," enter the name of the organization N/A				
b Did the organization file Form 1120-POL for this year?						
	81 a	, , , , , , , , , , , , , , , , , , , ,		041		v
	D	p Did the organization the Form 1120-POL for this year?			990	

and Financial Accounts.

h At any time during the calendar year, did the organization have an interest in or a signature or other authority over

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank

If "Yes," enter the name of the foreign country

a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

No

X

Yes

Form **990** (2006)

91b

Form 990 (2006) INDIAN LAND Part VI Other Information (continued)	TENURE	FOUNDATION		41-	2014273 Page 8 Yes No
		tain an office outside of	i din a 1.1	nited Chatan	
c At any time during the calendar year, did the orgal if "Yes," enter the name of the foreign country			the U	nited States?	91c X
92 Section 4947(a)(1) nonexempt charitable trusts fill	na Form 990 i	in liqu of E 4044 C	book b	1010	
and enter the amount of tax-exempt interest recei					
Part VII Analysis of Income-Producing				J	N/A
Note: Enter gross amounts unless otherwise		ed business income	Exclu	ded by section 512, 513, or 514	4=4
indicated.	(A)	(B)	(C)	(D)	(E)
	Business	Amount	Exclu- sion	Amount	Related or exempt function income
93 Program service revenue:	code		code		
a .PROGRAM FEES			1 mg	-4	58,017.
b					
c					
d					
e	-				
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14		
96 Dividends and interest from securities	900000	31,982.	14	463,062.	
97 Net rental income or (loss) from real estate:	4 109 30				
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets					
other than inventory					
101 Net income or (loss) from special events			01	-3,061.	
102 Gross profit or (loss) from sales of inventory			18	26,942.	
103 Other revenue:				20,512.	
a MISCELLANEOUS			03	7,659.	
			0.5	7,033.	
<u> </u>					
d					
404 Outstand (and and and (D) (D) and (D)		31,982.		516,014.	E0 017
104 Subtotal (add columns (B), (D), and (E))					58,017.
105 Total (add line 104, columns (B), (D), and (E)) Note: Line 105 plus line 1e, Part I, should equal the amo	unt on line 12	Part I		······	606,013.
			4 D	- Coo the instruction	
Part VIII Relationship of Activities to the					
Line No. Explain how each activity for which income is repu			import	antly to the accomplishment of	the organization's
exempt purposes (other than by providing funds	or such purpos	es).			
SEE STATEMENT 12					
Part IX Information Regarding Taxable	Subsidiario		d Er	751	
(A) (B) Name, address, and EIN of corporation, Percentage of		(C) Nature of activities		(D) Total income	(E) End-of-year
partnership, or disregarded entity ownership intere	st	Nature of activities		I OLAI IIILOITIE	assets
INDIAN LAND CAPITAL	%				
COMPANY, LLC - 151 E	%				
COUNTY RD B2, LITTLE	%				
		INANCING		-78,269.	23,626.
Part X Information Regarding Transfer			Bene		
(a) Did the organization, during the year, receive any funds,					Yes X No
(b) Did the organization, during the year, pay premiums, dire	-			ING WOODIE SOURIESTE	Yes X No
Note: If "Yes" to (b), file Form 8870 and Form 4720 (se			mauti	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	163 LAL NO
Table and the later and the la					Form 990 (2006)
					(2000)

	rt XI Information Regarding Transfers To and From (controlling organization as defined in section 512(b)(13).	Controlled Enti	ties. Complete only if the organia	2ation is a
106	Did the reporting organization make any transfers to a controlled entity	N/A as defined in sectio	n 512(b)(13) of the Code? If "Yes,	Yes No
	complete the schedule below for each controlled entity. (A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
а				(-in-
b				
С				
	Totals			
107	Did the reporting organization receive any transfers from a controlled en complete the schedule below for each controlled entity.	ntity as defined in se	ection 512(b)(13) of the Code? If "	Yes,* No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
а				
b				
С				
	Totals	A we a		
108 ———	Did the organization have a binding written contract in effect on August annuities described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompany and complete. Declaration of preparer (other than officer) is based on all information of which	ing schedules and statem	ents, and to the best of my knowledge and b	Yes No
Sign Here	Signature of officer		Date	
Paid Prepa Use C	Preparer's signature Laurence H. Mohn CAA Firm's name (or VTRCHOW, KRAUSE & COMPANY)	TE 2400	self-) 835-1344
				Form 990 (2006)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2006

Name of the organization			Employer identifi	cation number
INDIAN LAND TENURE FOUND	ATION		41 20142	73
Part I Compensation of the Five Highest Paid Em (See page 2 of the instructions. List each one. If there are none,		Officers, Dire	ctors, and T	rustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and othe allowances
NONE				
Total number of other employees paid over \$50,000	0	1 120	tata Santa da santa da sa	*** ***
Part II-A Compensation of the Five Highest Paid Ind (See page 2 of the instructions. List each one (whether individual)			onal Service	95
(a) Name and address of each independent contractor paid more the		(b) Type of s	service	c) Compensation
		(1)		
NONE				
Total number of others receiving over \$50,000 for professional services	0			
Part II-B Compensation of the Five Highest Paid Ind (List each contractor who performed services other than professi firms. If there are none, enter "None." See page 2 of the instruction	onal services, whether individu		ervices	
(a) Name and address of each independent contractor paid more the	nan \$50,000	(b) Type of s	ervice (c) Compensation
NONE				
Total number of other contractors receiving over \$50,000 for other services	0		* - * n **	

Schedule A (Form 990 or 990-EZ) 2006 INDIAN LAND TENURE FOUNDATION	41-20142	73	Page 2
Part III Statements About Activities (See page 2 of the instructions.)		Yes	No
During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 3 line i of Part VI-B.)			x
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contrib trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which an person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Y attach a detailed statement explaining the transactions.)	v cuch		
a Sale, exchange, or leasing of property? b Lending of money or other extension of credit? c Furnishing of goods, services, or facilities? d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FC	2a 2b 2c	Х	X X
e Transfer of any part of its income or assets? 3 a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) SEE STATEM	2e MENT 13 3a	X	X
 b Dd the organization have a section 403(b) annuity plan for its employees? c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? 	Зс		X X X
 4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g b Did the organization make any taxable distributions under section 4966? c Did the organization make a distribution to a donor, donor advisor, or related person? 	4b	X	X
d Enter the total number of donor advised funds owned at the end of the tax year e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	>	6,1	1

line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts

g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

66,182.

f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on

Schedule A (Form 990 or 990-EZ) 2006

art IV	Reason for Non-Private Foundation S						
tify that t	he organization is not a private foundation because it is: (Please check only ONE	applicable box.)				
	A church, convention of churches, or association of ch	urches. Section 170(b)	(1)(A)(i).				
	A school. Section 170(b)(1)(A)(ii). (Also complete Part	t V.)					
	A hospital or a cooperative hospital service organization	n. Section 170(b)(1)(A)	(iii).				
	A federal, state, or local government or governmental of		, , ,				
	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city,						
	and state 🕨						
	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv).						
	(Also complete the Support Schedule in Part IV-A.)						
X	An organization that normally receives a substantial pa			the general	public.		
	Section 170(b)(1)(A)(vi). (Also complete the Support	•					
\vdash	A community trust. Section 170(b)(1)(A)(vi). (Also cor						
	An organization that normally receives: (1) more than a receipts from activities related to its charitable, etc., fur						
	its support from gross investment income and unrelate						
	by the organization after June 30, 1975. See section 5						
	An organization that is not controlled by any disqualifie	d naroone (other than f	nundation managers) and	othorwice m	ate the requirer	nante of castion	
	509(a)(3). Check the box that describes the type of sup		oundation managers) and	OTHER MISE LIK	sers me redunei	HEHRS OF SECTION	
	Type I Type II		unctionally Integrated		Type !II-0	ther	
	турот		briodonally irrogration			4101	
	Provide the following information at	out the augmented area	niveliana (Con noon 7 of	the instruction	ne)		
	1 toring me tollowing information at	iont me anbhotten ordi	silizations. (See page 7 of	tile manacid	JII3.)		
	(a)	(b)	(c)	(d)		(e)	
		(b) Employer	(c) Type of organization	(d) Is the su	pported	Amount of	
	(a)	(b)	(c)	(d) Is the su	pported on listed in		
	(a)	(b) Employer identification	(c) Type of organization (described in lines	ls the su organization the sup organiz	apported on listed in porting ration's	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz	pported on listed in porting	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz	apported on listed in porting ration's	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification	(c) Type of organization (described in lines 5 through 12 above	ls the su organization the sup organiz governing	apported on listed in porting cation's documents?	Amount of	
	(a)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the su organizati the sup organis governing Yes	apported on listed in porting cation's documents?	Amount of	

12

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar year (or fiscal year (a) 2005 (b) 2004 (d) 2002 (c) 2003 beginning in) (e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 219.702. 396,916. 270,848, 172,480 1,059,946. Membership fees received 16 Gross receipts from admissions. merchandise sold or services performed, or furnishing of facilities in any activity that is -related to the organization's charitable, etc., purpose 16.742. 13,343. 3.892 33.977. Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 383,656. 308,177. 284,317. 243,729. 1,219,879. Net income from unrelated business activities not included in line 18 Tax revenues levied for the 20 organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 23 Total of lines 15 through 22 620,100. 718,436. 559,057. 416,209. 2,313,802. Line 23 minus line 17 24 603,358. 705,093. 555,165. 416,209. 2,279,825. 25 Enter 1% of line 23 5.591. 6,201. 7,184. 4.162 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 45.597. 26a Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. 536,511. Do not file this list with your return. Enter the total of all these excess amounts 26b 279,825. Total support for section 509(a)(1) test: Enter line 24, column (e) 26c Add: Amounts from column (e) for lines: 18 1,219,879. 19 26b _____ 536,511. 756,390. 26d 523,435. e Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 22.9594% 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disgualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of (2005) (2004) (2003) (2002) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2005) (2004) (2003) (2002) Add: Amounts from column (e) for lines: 15 _____ 16 ____ 27c N/A d Add; Line 27a total and line 27b total 27d Public support (line 27c total minus line 27d total) N/A 27e g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) N/A 27g N/A h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

²⁸ Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Schedule A (Form 990 or 990-EZ) 2006 INDIAN LAND TENURE FOUNDATION

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,	(7, 75)	14 Mg	7
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		1200		
32	Does the organization maintain the following:	12.1		Y.J.
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	_ 33		- SV
33	Does the organization discriminate by race in any way with respect to:	- Bar	18.2	-1
а	Students' rights or privileges?	33a		
b	Admissions policies?			
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
6	Educational policies?			
f	Use of facilities?			
g	Athletic programs?			
h	Other extracurricular activities?			
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	_ 34a		
b	Has the organization's right to such aid ever been revoked or suspended?			
35	If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			1
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2006

Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) Check b if you checked "a" and "limited control" provisions apply. if the organization belongs to an affiliated group. Check > a (b) (a) **Limits on Lobbying Expenditures** Affiliated group To be completed for all totals electing organizations (The term "expenditures" means amounts paid or incurred.) N/A 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 36 Total lobbying expenditures to influence a legislative body (direct lobbying) 37 Total lobbying expenditures (add lines 36 and 37) 38 Other exempt purpose expenditures 39 Total exempt purpose expenditures (add lines 38 and 39) 40 Lobbying nontaxable amount. Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is -Not over \$500,000 20% of the amount on line 40 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 41 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 42 Grassroots nontaxable amount (enter 25% of line 41) 42 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 43 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720. 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 45 through 50 on page 13 of the instructions.) **Lobbying Expenditures During 4-Year Averaging Period** N/A Calendar year (or (e) (a) (b) (c) (d) 2006 2005 2004 2003 Total fiscal year beginning in) 45 Lobbying nontaxable amount 46 Lobbying ceiling amount (150% of line 45(e)). 47 Total lobbying expenditures 0. 48 Grassroots nontaxable amount _____ Grassroots ceiling amount (150% of line 48(e)) 0. 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.) During the year, did the organization attempt to influence national, state or local legislation, including any attempt to Yes No Amount influence public opinion on a legislative matter or referendum, through the use of: X b Paid staff or management (Include compensation in expenses reported on lines c through h.) X c Media advertisements X X Mailings to members, legislators, or the public e Publications, or published or broadcast statements X f Grants to other organizations for lobbying purposes X Direct contact with legislators, their staffs, government officials, or a legislative body X h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means X Total lobbying expenditures (Add lines **c** through **h**.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

	Exempt Organi	zations (See page 13 of the instr	ructions.)				
51		directly or indirectly engage in any of		r organization described in section			
	501(c) of the Code (other than:	section 501(c)(3) organizations) or i	n section 527, relating to po	olitical organizations?			
a	Transfers from the reporting or	ganization to a noncharitable exempt	t organization of:			Yes	No
							X
					a(ii)		X
b	Other transactions:				L/O		77
							X
	(ii) Purchases of assets from a	and an other posets	***************************************		b(iii)	100 100	X
	(III) Remai or lacillies, equipme	ant, or other assets			b(iv)		X
							X
			lions				X
G		, mailing lists, other assets, or paid e			_		X
d				always show the fair market value of the			
		s given by the reporting organization.					
	transaction or sharing arrangen	nent, show iп column (d) the value o	f the goods, other assets, o	r services received:		N/A	at .
(a	(b)	(c)		(d)			
Line	no. Amount involved	Name of noncharitable ex	empt organization	Description of transfers, transactions, and	sharing ar	rangen	nents
_							
-							
-							
52 a				anizations described in section 501(c) of the	٦	-	٦
	If "Yes," complete the following:)(3)) or in section 527?			Yes	LA	No
D_			(6)	(0)			
	(a) Name of org) ganization	(b) Type of organization	(c) Description of relationsl	qir		
					-		
-							
-							-
							-
623152 01-18-0	77			Schedule A (Forn	n 990 or 9	90-EZ)	2006

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

2006

Name of organization

Employer identification number

	INDIAN LAND TENURE FOUNDATION	41-2014273					
Organization type (che	ck one):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not 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	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation						
for both the General Rul	on is covered by the General Rul e or a Special Rule. (Note: Only a section 501(c)(7), (8), on the and a Special Rule-see instructions.)	r (10) organization can check boxes					
General Rule-							
	ns filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mol omplete Parts I and II.)	ney or property) from any one					
Special Rules-							
sections 509(a)	01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of (1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution on line 1 of these forms. (Complete Parts I and II.)	•					
aggregate cont	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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.)						
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate 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: Organizations	that are not covered by the General Rule and/or the Special Rules do not file Schedule B (F	orm 990, 990-EZ, or 990-PF), but					

they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing

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

requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2006)

Employer identification number

INDIAN LAND TENURE FOUNDATION

41-2014273

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$345,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) No.		(c) Aggregate contributions	(d) Type of contribution
2		\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.		(c) Aggregate contributions	(d) Type of contribution
3		\$150,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.		(c) Aggregate contributions	(d) Type of contribution
4		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.		(c) Aggregate contributions	(d) Type of contribution
5		\$50,000.	Person X Payroll
(a) No.		(c) Aggregate contributions	(d) Type of contribution
6		\$ <u>15,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
623452 01-18	3-07	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2006)

FORM 990 PAGE 2

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
В	AND BUILDINGS AND MPROVEMENTS		L SL	.000	16	43,125. 373,822.			43,125. 373,822.	66,978.		0 15,356
S 18	URNITURE AND FIXTURES		SL SL		16 16	22,648. 149,983.			22,648. 149,983.	13,659. 113,036.		2,882
*	OTOR VEHICLES TOTAL 990 PAGE 2 DEPR		SL	.000	16	34,715. 624,293.	r Mar Line of Mary	0.	34,715. 624,293.	1,157. 194,830.	0.	1,157 42,256
					(r.)		by .	j.				
					-3: uR?		# . x					
					£.,							
W.				7. Ja								

628102 07-28-06

⁽D) - Asset disposed

^{*} ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FOOTNOTES	STATEMENT 1
PART IV LINE 64A:	
NOTES PAYABLE AT DECEMBER 31, 2006:	500,000.
TOTAL NOTES PAYABLE	500,000.

FORM 990	SPECIAL EVE	NTS AND ACT	IVITIES	STA	TEMENT 2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
GOLF TOURNAMENT	17,372.	9,550.	7,822.	10,883.	-3,061.
TO FM 990, PART I, LINE 9	17,372.	9,550.	7,822.	10,883.	-3,061.

FORI	м 990	INCOME A INCLUDE	ND COST D ON PA				STATEMENT	3
INC	OME							
2.	GROSS RECEIPTS RETURNS AND ALL LINE 1 LESS LIN	OWANCES		• • •• • •• • •	•	26,942	26,9	942
5.	COST OF GOODS SOLD						26,9	942
7. 8. 9. 10.	INVENTORY AT BEOMERCHANDISE PURCOST OF LABOR MATERIALS AND STOTHER COSTS . ADD LINES 6 THROUGH AT ENTRY AT ENTR	CHASED			0 0 0			
	COST OF GOODS SO		ESS LIN	E 12).	•			

FORM 990 OTHER O	CHANGES IN NET	ASSETS OR FUNI	BALANCES	STATEMENT 4
DESCRIPTION				AMOUNT
UNREALIZED GAIN ON INVI				2,254,281. -14,267.
TOTAL TO FORM 990, PART	TI, LINE 20		·-	2,240,014.
FORM 990	OTHE.	R EXPENSES		STATEMENT 5
	(7)	4-1	(a)	(=)
	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
DESCRIPTION	TOTAL	SERVICES	AND GENERAL	FUNDRAISING
ADVERTISING AND				
PROMOTION	43,958.	29,452.	6,594.	7,912.
INSURANCE	11,992.	8,034.	1,799.	2,159.
DUES AND				4 760
SUBSCRIPTIONS	9,776.	6,550.	1,466.	1,760.
OFFICE EXPENSES	6,300. 14,786.	4,221. 6,315.	945. 3,851.	
PROFESSIONAL FEES CONTRACTED SERVICES	563,565.	481,041.	54,974.	
RENTAL	5,337.	3,576.	800.	961.
UTILITIES	5,303.	3,553.	796.	954.
BOARD DEVELOPMENT	34,889.	0,0001	34,889.	2021
OTHER EXPENSES	821.	551.	122.	148.
INDIAN LAND CAPITAL				
COMPANY	117,855.	117,855.		
MINORITY INTEREST LOSS	43,806.		43,806.	
TOTAL TO FM 990, LN 43	858,388.	661,148.	150,042.	47,198.

FORM 990 OFFIC	CER COMPENSATIO			STATEMENT 6
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
CRIS STAINBROOK	125,000.	24,560.	tex	149,560.
A. PROGRAM SERVICES	53,750.	10,561.		64,311.
B. MANAGEMENT AND GENERAL	57,500.	11,298.		68,798.
C. FUNDRAISING	13,750.	2,701.		16,451.
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
HOWARD VALANDRA	92,000.	19,181.		111,181.
A. PROGRAM SERVICES	92,000.	19,181.		111,181.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JO-ANNE STATELY	94,000.	13,340.		107,340.
A. PROGRAM SERVICES				
3. MANAGEMENT AND GENERAL	10,340.	1,467.		11,807.
C. FUNDRAISING	83,660.	11,873.		95,533.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
TERRY JANIS	70,000.	15,553.		85,553.
A. PROGRAM SERVICES	70,000.	15,553.		85,553.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DOUGLAS NASH	145,600.	19,002.		164,602.
A. PROGRAM SERVICES	145,600.	19,002.		164,602.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
CECELIA BURKE	70,000.	10,581.		80,581.
A. PROGRAM SERVICES	70,000.	10,581.		80,581.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				
TOTAL PROGRAM SERVICES				506,228.
TOTAL MANAGEMENT AND GENERA	AL			80,605.
TOTAL FUNDRAISING				111,984.

FORM 990 CA	ASH GRANTS AND ALLOCATIONS TO OTHERS	STATEMENT 7
CLASS OF ACTIVITY/DONEE'S	NAME AND ADDRESS	AMOUNT
UNIVERSITY OF NEW MEXICO 2414 CENTRAL AVE SE ALBUQUERQUE, NM 87106		5,000.
BLACKFEET TRIBE PO BOX 2809		66,893.
SOKAOGON CHIPPEWA 3051 SAND LAKE ROAD		27,972.
CRANDON, WI 54520 CHIPPEWA CREE INDIANS		45,401.
RR 1, BOX 800 BOX ELDER, MT 59521 COLUMBIA RIVER		30,277.
529 NE OREGON, 2ND FLOOR PORTLAND, OR 97232		194,309.
INDIAN LAW RESOURCE CENTER 602 NORTH EWING STREET HELENA, MT 59601		
UNIVERSITY OF WISCONSIN-MA 975 BASCOM MALL MADISON, WI 53706-1491	ADISON	57,700.
GRANT PORTAGE PO BOX 428		31,243.
PALOMAR		3,000.
1140 WEST MISSION ROAD SAN MARCOS, CA 92069		

INDIAN LAND TENURE FOUNDATION	41-2014273
POKAGON BAND OF POTAWATOMI INDIANS PO BOX 180 DOWAGIAC, MI 49047	9,300.
GRAND TRAVERSE BAND OF OTTAWA 2605 NW BAYSHORE DRIVE SUTTONS BAY, MI 49682	13,000
NATIVE WOMEN IN AGRICULTURE 100 NORTH 27TH STREET, SUITE 500 BILLINGS, MT 59101	15,000
WAMPANOAG TRIBE 20 BLACK BROOK ROAD AQUINNAH, MA 02535	9,469.
SNOQUALMIE INDIAN TRIBE PO BOX 280 CARNATION, WA 98014	20,000.
WHITE EARTH COMMUNITY COLLEGE PO BOX 478 MAHNOMEN, MN 56557	17,360
HERITAGE UNIVERSITY 3240 FORT ROAD TOPPENISH, WA 98948	4,730.
HANNAHVILLE N14911 HANNAHVILLE B1 ROAD WILSON, MI 49896	15,655.
FOND DU LAC TRIBAL & COMMUNITY COLLEGE 1113 EAST FRANKLIN AVE, SUITE 108 MINNEAPOLIS, MN 55404	36,718.
MINNEAPOLIS COMMUNITY & TECHNICAL COLLEGE 1501 HENNEPIN AVE MINNEAPOLIS, MN 55403	3,750.

753.

AUGSBURG COLLEGE 2211 RIVERSIDE AVE MINNEAPOLIS, MN 55454

TOTAL INCLUDED ON FORM 990, PART II, LINE 22B

607,530.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 8
PART III

EXPLANATION

FORK OOO

INDIAN LAND TENURE FOUNDATION IS A FOUNDATION ORGANIZED TO EDUCATE EVERY INDIAN LANDOWNER ABOUT INDIAN LAND TENURE ISSUES SO THAT KNOWLEDGE BECOMES POWER WHEN DECISIONS TO CREATE POSITIVE FUTURES ARE MADE. THE ORGANIZATION HAS BEEN ORGANIZED ADDITIONALLY TO INCREASE ECONOMIC ASSETS OF INDIAN LANDOWNERS BY GAINING CONTOL OF INDIAN LANDS AND BY CREATING FINANCIAL MODELS THAT CONVERT LAND INTO LEVERAGE.

OUTTED TAXTEGUATESTOC

FORM 990 OTI	HER INVESTMENTS	S 	STATEMENT
DESCRIPTION		VALUATION METHOD	AMOUNT
US TREASURY DEBT SECURITIES CORPORATE DEBT SECURITIES EQUITY SECURITIES MUTUAL FUNDS INDIAN LAND CAPITAL COMPANY LLC LIMITED PARTNERSHIPS	2,213,311. 1,710,118. 10,257,563. 4,283,794. 0. 2,144,493.		
TOTAL TO FORM 990, PART IV, LINE	56, COLUMN B		20,609,279.
FORM 990 DEPRECIATION OF ASS	SETS NOT HELD H	FOR INVESTMENT	STATEMENT 10
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND BUILDINGS AND IMPROVEMENTS FURNITURE AND FIXTURES EQUIPMENT MOTOR VEHICLES	43,125 373,822 22,648 149,983 34,715	82,334. 3. 16,541. 3. 135,897.	43,125. 291,488. 6,107. 14,086. 32,401.
TOTAL TO FORM 990, PART IV, LN 57	624,293	237,086.	387,207.

FORM 990 PART V-A - LIST TRUST	OF CURRENT OFFICERS, EES AND KEY EMPLOYEE		STATI	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CRIS STAINBROOK 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	PRESIDENT 40.00	125,000.	24,560.	0.
HOWARD VALANDRA 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	VP OF GRANTS & 40.00	PROGRAMS 92,000.	19,181.	0.
JO-ANNE STATELY 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	VP OF DEVELOPM 40.00		13,340.	0.
TERRY JANIS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	PROGRAM OFFICE		15,553.	0.
DOUGLAS NASH 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	EXECUTIVE DIRE		19,002.	0.
CECELIA BURKE 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	DEPUTY DIRECTO 40.00		10,581.	0.
BEN BLACK BEAR, JR. 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	CHAIRMAN 40.00	0.	0.	0.
THERESA CARMODY 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	VICE-CHAIRPERS 40.00	O.	0.	0.
ERIC J GILES 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
BRIAN COLLINS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
VIRGIL DUPUIS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.

INDIAN LAND TENURE FOU	NDATION		41	-2014273
ARVEL HALE 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
MARGIE HUTCHINSON 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
ROSS RACINE 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
DAVID TOVEY 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	SECRETARY/TREAS	SURER 0.	0.	0.
JOHN SIROIS 151 E COUNTY RD B2 LITTLE CANADA, MN 55117	MEMBER 40.00	0.	0.	0.
TOTALS INCLUDED ON FORM	990, PART V-A =	596,600.	102,217.	0.
	- RELATIONSHIP OF ACTIVE MPLISHMENT OF EXEMPT PURPO		STATE	MENT 12
LINE EXPLANATION OF RE	LATIONSHIP OF ACTIVITIES			
PROGRAM OF THE IN PEOPLE IN MAKING 1. ESTABLISHING L COST ESTATE PLANN 2. PROVIDING TRAI THE LEGAL COMMUNI 3. SERVING AS A C	E INSTITUTE FOR INDIAN EST DIAN LAND TENURE FOUNDATION INFORMED DECISIONS ABOUT TO EGAL SERVICE PROJECTS THAT ING SERVICES TO INDIVIDUAL NING TO TRIBAL MEMBERS, GO TY. LEARINGHOUSE FOR THE LATES ROBATE REFORM ACT.	ON IS TO ASSTHEIR PROPER F PROVIDE FROM TRIBAL MENTAL	SIST INDIAN RTY BY: REE AND REN MBERS. OFFICIALS	DUCED
SCHEDULE A EXPLANATIO	N OF QUALIFICATIONS TO REC	CEIVE PAYMEI	NTS STATEM	ENT 13

INDIAN LAND TENURE FOUNDATION (ILTF) DISBURSES GRANTS AND CONTRACTS TO MEET ITS MISSION AND STRATEGIES. THE MAJORITY OF GRANT AWARDS ARE ACCORDING TO STIPULATIONS CONTAINED IN REQUEST FOR PROPOSAL (RFP), WHICH ARE SUBMITTED AT THE QUARTERLY MEETINGS. THE STIPULATIONS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECOTRS. THE RFP'S ARE ADVERTISED ON THE ILTF WEB SITE AND THROUGH DIRECT MAILING TO TRIBES AND ORGANIZATIONS IN ILTF'S DATABASE. ALL PROPOSALS FROM RFP'S ARE PRESENTED TO THE BOARD FOR CONSIDERATION AND FINAL DETERMINATION TO FUND OR NOT FUND.

UNSOLICITED REQUEST FOR FUNDS WHEN RECEIVED ARE REVIEWED FOR APPLICABILITY TO MISSION AND STRATEGIES AND HAVE NOT BEEN COVERED UNDER A RFP. THE

CONCEPT IN THE FUND REQUEST IS SUMMARIZED AND PRESENTED TO THE BOARD FOR DETERMINATION TO GO FORWARD OR STOP. IF DECISION BY THE BOARD IS TO GO FORWARD A GRANT APPLICATION IS PROVIDED TO THE PETITIONER FOR PROPOSAL DEVELOPMENT AND COMPLETION. THE PROPOSAL IS SUBMITTED TO THE BOARD FOR CONSIDERATION AND FINAL DETERMINATION TO FUND OR NOT FUND.