

Return of Organization Exempt From Income Tax

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

2022

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2022 calendar year, or tax year beginning _____ **and ending** _____

B Check if applicable: Address change Name change Initial return Final return/terminated <input checked="" type="checkbox"/> Amended return Application pending	C Name of organization INDIAN LAND TENURE FOUNDATION		D Employer identification number 41-2014273
	Doing business as		E Telephone number 651-766-8999
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 18,215,816.
	151 EAST COUNTY ROAD B2		
City or town, state or province, country, and ZIP or foreign postal code LITTLE CANADA, MN 55117		H(a) Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
F Name and address of principal officer: LINNEA JACKSON SAME AS C ABOVE		H(b) Are all subordinates included? Yes No If "No," attach a list. See instructions	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		H(c) Group exemption number	
J Website: WWW.ILTF.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other		L Year of formation: 2001 M State of legal domicile: MN	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ENSURE THAT ALL LANDS WITHIN NATIVE AMERICAN RESERVATION BOUNDARIES IS UNDER NATIVE AMERICAN		
	2 Check this box _____ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	12
	6 Total number of volunteers (estimate if necessary)	6	11
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	21,000.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	8,491,289.	12,046,112.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,863,477.	2,474,363.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	479,174.	167,277.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	115,250.	1,633,897.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,949,190.	16,321,649.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	2,383,921.	2,463,256.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,291,197.	1,490,447.
	b Total fundraising expenses (Part IX, column (D), line 25) 212,236.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,589,992.	4,811,811.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,265,110.	8,765,514.
19 Revenue less expenses. Subtract line 18 from line 12	5,684,080.	7,556,135.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	51,797,177.	69,656,737.
	22 Net assets or fund balances. Subtract line 21 from line 20	18,809,103.	31,005,525.
Part II Signature Block		32,988,074.	38,651,212.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	LINNEA JACKSON, BOARD CHAIR Type or print name and title	<i>L Jackson</i> 05/30/2023			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	JOSH MULLINS	JOSH MULLINS	05/18/23	<input type="checkbox"/>	P01602326
Firm's name ARLEDGE & ASSOCIATES, P.C.			Firm's EIN 73-1185089		
Firm's address 309 N. BRYANT AVENUE EDMOND, OK 73034			Phone no. 405-348-0615		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF THE INDIAN LAND TENURE FOUNDATION (ILTF) IS TO SEE THOSE LANDS WITHIN THE ORIGINAL BOUNDARIES OF EVERY RESERVATION AND OTHER AREAS OF HIGH SIGNIFICANCE WHERE TRIBES RETAIN ABORIGINAL INTERS ARE IN INDIAN OWNERSHIP AND MANAGEMENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 6,399,929. including grants of \$ 1,463,256.) (Revenue \$ 2,605,289.)

GENERAL PROGRAM:

THE INDIAN LAND TENURE FOUNDATION (ILTF) CONTINUES TO REACH OUT TO NATIVE AMERICAN COMMUNITIES AND THE GENERAL PUBLIC TO BROADEN THEIR UNDERSTANDING OF THE COMPLEX ISSUES OF LAND OWNERSHIP IN INDIAN COUNTRY. AMONG THESE ACTIVITIES ARE GRANT-MAKING, PRESENTING AT CONFERENCES AND OTHER GATHERINGS, DISTRIBUTION OF OUR RELEVANT PUBLICATIONS, OUTREACH THROUGH SOCIAL MEDIA AND PROGRAM UPDATE REPORTS AS WELL AS THROUGH THE FOUNDATION'S WEBSITE. THE FOUNDATION TAKES AN ACTIVE ROLE WORKING WITH NATIVE NATIONS ADDRESSING ISSUES BY HOSTING REGIONAL MEETINGS, MEETING WITH FEDERAL OFFICIALS, AND OTHER OUTREACH TO TRIBAL LEADERS. THE 2021 ONLINE OUTREACH CONTINUED DURING 2022 THROUGH ONGOING WEBINARS AND POSTED CONTENT TO REACH TRIBAL COMMUNITY

4b (Code:) (Expenses \$ 243,656. including grants of \$) (Revenue \$ 1,152,036.)

NATIONAL INDIAN CARBON COALITION:

THE NATIONAL INDIAN CARBON COALITION (NICC) WORKS TO BUILD CAPACITY FOR INDIGENOUS-LED CARBON SEQUESTRATION PROJECTS THAT INCLUDE TRIBAL NATIONS, ALASKA NATIVE VILLAGES & CORPORATIONS, NATIVE HAWAIIAN ORGANIZATIONS, AND FIRST NATIONS IN CANADA. NICC HAS RECEIVED PHILANTHROPIC DOLLARS TO ESTABLISH THE REVOLVING PROJECT FUND, WHICH ADVANCES OUR EFFORTS SIGNIFICANTLY TOWARDS BUILDING NICC'S LONGER-TERM SUPPORT FOR INDIGENOUS PROJECTS. NICC CONDUCTS ALL OF THE SUPPORTING WORK ON INDIGENOUS LANDS AS THE PROJECT PROPONENT AND CONTINUES TO PARTNER WITH THE INDIGENOUS ORGANIZATION FOR A FORTY (40) YEAR DURATION. THIS REMOVES THE SIGNIFICANT BURDEN OF PROJECT MANAGEMENT FROM THE INDIGENOUS ORGANIZATION, THUS ASSURING LONG-TERM BENEFITS TO

4c (Code:) (Expenses \$ 359,412. including grants of \$) (Revenue \$ 271,427.)

NATIVE NATION REBUILDING:

ILTF ESTABLISHED A DESIGNATED FUND FOR THE NATIVE GOVERNANCE CENTER (NGC), A 501(C)(3), THAT FOCUSES ON TRAINING AND INFORMING TRIBAL GOVERNMENTS ON BUILDING THE FOUNDATION OF NATION BUILDING THROUGH POLICY AND GOVERNMENTAL FUNCTIONS. NATIVE NATION REBUILDING FUND MAKES DISTRIBUTIONS THAT SUPPORT NGC AND ITS WORK ON THE MANAGEMENT OF RESERVATION PLANNING AND LANDS. THE NGC AND ILTF ARE PLANNING SEVERAL JOINT EFFORTS TO EXPAND THE REACH OF BOTH ORGANIZATIONS IN 2023.

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,004,262. including grants of \$ 1,000,000.) (Revenue \$)

4e Total program service expenses 8,007,259.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 11; 1b Enter the number of voting members included... 11; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
CRIS STAINBROOK - 651-766-8999
151 E, COUNTY ROAD B2 E, LITTLE CANADA, MN 55117

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CRIS STAINBROOK PRESIDENT	40.00			X			139,024.	0.	55,220.	
(2) RJAY BRUNKOW CEO OF ILCC	40.00				X		122,904.	0.	38,681.	
(3) BRYAN VAN STIPPEN PROGRAM DIRECTOR	40.00				X		112,680.	0.	40,309.	
(4) DAVID GARELICK CORPORATE RELATIONS OFFICER	40.00			X			102,872.	0.	47,166.	
(5) D'ARCY BORDEAUX ACCOUNTANT/HR DIRECTOR	40.00			X			103,556.	0.	23,835.	
(6) HANS-DIETER KLOSE BOARD MEMBER	1.00	X					0.	0.	0.	
(7) LINNEA JACKSON BOARD CHAIR	1.00	X		X			0.	0.	0.	
(8) RUSSELL ZEPHIER VICE CHAIR	1.00	X		X			0.	0.	0.	
(9) LEA ZEISE SECRETARY/TREASURER	1.00	X		X			0.	0.	0.	
(10) RANDALL EMM BOARD MEMBER	1.00	X					0.	0.	0.	
(11) ELECTA HARE-REDCORN BOARD MEMBER	1.00	X					0.	0.	0.	
(12) PHILOMENA KEBEC BOARD MEMBER	1.00	X					0.	0.	0.	
(13) TOBI MARACLE BOARD MEMBER	1.00	X					0.	0.	0.	
(14) AMANDA MONTOYA BOARD MEMBER	1.00	X					0.	0.	0.	
(15) JOHN SIROIS BOARD MEMBER	1.00	X					0.	0.	0.	
(16) SAMANTHA SKENANDORE BOARD MEMBER	1.00	X					0.	0.	0.	
(17) GABE SNEEZY BOARD MEMBER	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							581,036.	0.	205,211.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							581,036.	0.	205,211.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SPATIAL INFORMATICS GROUP 2529 YOLANDA CT, PLEASANTON, CA 94566	CONSULTING	500,000.
VILLAGE EARTH P.O. BOX 797, FORT COLLINS, CO 80522	CONSULTING	161,967.
GREEN TIMBER CONSULTING FORESTERS INC 11511 US HIGHWAY 41, PELKIE, MI 49958	CONSULTING	110,770.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	377,511.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	11,668,601.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			12,046,112.			
Program Service Revenue	2 a LAND RECOVERY LOAN INTEREST	Business Code	523000	2,008,367.	2,008,367.		
	b ORIGINATION FEES		611430	183,437.	183,437.		
	c ANNUAL CONFERENCE		611430	155,350.	155,350.		
	d PROGRAM FEES		611430	109,950.	109,950.		
	e GARANTOR FEE		611430	17,259.	17,259.		
	f All other program service revenue						
	g Total. Add lines 2a-2f			2,474,363.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			229,974.		229,974.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	4,056.			
			(ii) Personal				
	b Less: rental expenses ...	6b		0.			
	c Rental income or (loss)	6c		4,056.			
	d Net rental income or (loss)			4,056.		4,056.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	1,817,486.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b		1,880,183.			
c Gain or (loss)	7c		-62,697.				
d Net gain or (loss)			-62,697.		-62,697.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		1,568,373.				
b Less: cost of goods sold	10b		13,984.				
c Net income or (loss) from sales of inventory			1,554,389.	1,554,389.			
Miscellaneous Revenue	11 a MISCELLANEOUS	Business Code	900099	75,452.		75,452.	
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d			75,452.			
12 Total revenue. See instructions			16,321,649.	4,028,752.	0.	246,785.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	2,463,256.	2,463,256.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	624,662.	462,484.	94,336.	67,842.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	402,431.	297,950.	60,775.	43,706.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	382,318.	278,480.	50,108.	53,730.
10 Payroll taxes	81,036.	60,394.	11,435.	9,207.
11 Fees for services (nonemployees):				
a Management				
b Legal	14,924.	14,924.		
c Accounting	6,000.		6,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	98,940.		98,940.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,325,855.	1,311,202.	11,649.	3,004.
12 Advertising and promotion	47,223.	45,008.	2,215.	
13 Office expenses	53,981.	41,248.	10,695.	2,038.
14 Information technology	35,166.	34,082.	851.	233.
15 Royalties	1,293,641.	1,293,641.		
16 Occupancy	19,611.	15,230.	2,823.	1,558.
17 Travel	167,760.	151,487.	13,628.	2,645.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	165,837.	153,257.	9,165.	3,415.
20 Interest	610,975.	600,974.	10,001.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	46,647.	25,730.	13,528.	7,389.
23 Insurance	21,085.	14,035.	4,532.	2,518.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PROVISION FOR LOAN LOSS	596,250.	577,865.	14,428.	3,957.
b SERVICE CHARGES AND FEE	122,412.	118,638.	2,962.	812.
c BOARD EXPENSES	118,567.		118,567.	
d DUES & SUBSCRIPTIONS	40,783.	25,958.	6,027.	8,798.
e All other expenses	26,154.	21,416.	3,354.	1,384.
25 Total functional expenses. Add lines 1 through 24e	8,765,514.	8,007,259.	546,019.	212,236.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	5,626,201.	1	9,830,430.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,111,209.	3	6,898,285.
	4 Accounts receivable, net	447,450.	4	923,911.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	21,101,248.	7	30,663,666.
	8 Inventories for sale or use		8	202,495.
	9 Prepaid expenses and deferred charges	36,722.	9	27,091.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,325,068.		
	b Less: accumulated depreciation	10b 960,216.	383,583.	10c 364,852.
	11 Investments - publicly traded securities	16,976,649.	11	17,352,155.
	12 Investments - other securities. See Part IV, line 11	5,114,115.	12	3,393,852.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	51,797,177.	16	69,656,737.	
Liabilities	17 Accounts payable and accrued expenses	96,901.	17	1,416,962.
	18 Grants payable	324,215.	18	226,188.
	19 Deferred revenue		19	180,438.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	6,171,741.	21	6,003,754.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	10,061,389.	23	6,832,283.
	24 Unsecured notes and loans payable to unrelated third parties	2,154,857.	24	16,345,900.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	18,809,103.	26	31,005,525.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	30,620,242.	27	28,973,097.
	28 Net assets with donor restrictions	2,367,832.	28	9,678,115.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	32,988,074.	32	38,651,212.
	33 Total liabilities and net assets/fund balances	51,797,177.	33	69,656,737.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,321,649.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,765,514.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,556,135.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	32,988,074.
5	Net unrealized gains (losses) on investments	5	-2,011,927.
6	Donated services and use of facilities	6	118,930.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	38,651,212.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization <p style="text-align:center">INDIAN LAND TENURE FOUNDATION</p>	Employer identification number <p style="text-align:center">41-2014273</p>
--	---

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1357463.	1025558.	4432998.	8491289.	12046112.	27353420.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1357463.	1025558.	4432998.	8491289.	12046112.	27353420.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						13251722.
6 Public support. Subtract line 5 from line 4.						14101698.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	1357463.	1025558.	4432998.	8491289.	12046112.	27353420.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	96,428.	176,594.	156,628.	303,211.	234,030.	966,891.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	107,345.	50,727.	34,647.			192,719.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				111,194.	75,452.	186,646.
11 Total support. Add lines 7 through 10						28699676.
12 Gross receipts from related activities, etc. (see instructions)					12	9,218,036.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	49.14 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	41.01 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Schedule A (Form 990) 2022

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

Schedule A

**Identification of Excess Contributions
Included on Part II, Line 5**

2022

**** Do Not File ****

***** Not Open to Public Inspection *****

Contributor's Name	Total Contributions	Excess Contributions
NOVO FOUNDATION	3,000,000.	2,426,006.
BUSH FOUNDATION	6,915,000.	6,341,006.
HRK FOUNDATION	1,711,458.	1,137,464.
COHEN MILSTEIN SELLERS & TOLL PLLC	2,193,971.	1,619,977.
ANDREW W MELLON FOUNDATION	1,250,000.	676,006.
DORIS DUKE CHARITABLE FOUNDATION	1,000,000.	426,006.
MARGARET A. CARGILL FOUNDATION	1,000,000.	426,006.
NATIVE AMERICAN AGRICULTURE FUND	773,245.	199,251.

Total Excess Contributions to Schedule A, Part II, Line 5 **13,251,722.**

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

INDIAN LAND TENURE FOUNDATION

Employer identification number

41-2014273

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>BUSH FOUNDATION</u> <u>101 E 5TH ST, STE 2400</u> <u>ST PAUL, MN 55101</u>	\$ <u>6,510,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>NOVO FOUNDATION</u> <u>401 STATE STREET</u> <u>BROOKLYN, NY 11217</u>	\$ <u>1,800,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>DORIS DUKE CHARITABLE FOUNDATION</u> <u>650 5TH AVE, 19TH FLOOR</u> <u>NEW YORK, NY 10019</u>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<u>MARGARET A. CARGILL FOUNDATION</u> <u>6889 ROWLAND RD</u> <u>EDEN PRAIRIE, MN 55344</u>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<u>HOLY TRINITY LUTHERAN CHURCH</u> <u>2730 EAST 31ST ST</u> <u>MINNEAPOLIS, MN 55406</u>	\$ <u>250,125.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
--	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: INDIAN LAND TENURE FOUNDATION; Employer identification number: 41-2014273

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values for contributions, grants, and end of year, and two yes/no questions regarding donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for public use, natural habitat, open space, historical area, historic structure); 2. Conservation contribution details (table with 2 columns: Description, Held at the End of the Tax Year); 3-9. Various questions about monitoring, expenses, and reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a, 1b, and 2. 1a: Reporting requirements for public exhibition. 1b: Reporting requirements for public service. 2: Reporting requirements for financial gain. Includes dollar amount fields for revenue and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		43,125.		43,125.
b Buildings		1,001,629.	960,216.	41,413.
c Leasehold improvements				
d Equipment		76,259.		76,259.
e Other		204,055.		204,055.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				364,852.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements		1	14,343,696.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-2,011,927.	
	b Donated services and use of facilities	2b	118,930.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	-1,892,997.	
3	Subtract line 2e from line 1		3	16,236,693.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	98,940.	
	b Other (Describe in Part XIII.)	4b	-13,984.	
	c Add lines 4a and 4b	4c	84,956.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	16,321,649.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements		1	8,680,558.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	13,984.	
	e Add lines 2a through 2d	2e	13,984.	
3	Subtract line 2e from line 1		3	8,666,574.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	98,940.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c	98,940.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	8,765,514.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART IV, LINE 2B:

THE ORGANIZATION IS IN CUSTODY OF FUNDS CONTRIBUTED BY THE PUBLIC TO THREE INDIAN TRIBES SPECIFICALLY FOR THE PURCHASE OF PE SLA, A SACRED NATIVE AMERICAN SITE. THE ORGANISATION ALSO HAD CUSTODIAL ARRANGEMENTS OF FUNDS FOR THE SPIRIT OF SOVERIGNTY FOUNDATION.

PART X, LINE 2:

THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IT IS ALSO EXEMPT FROM STATE INCOME TAX. HOWEVER, UNRELATED BUSINESS INCOME IN EXCESS OF RELATED EXPENSES RELATED TO INVESTMENTS IN CERTAIN PARTNERSHIPS MAY BE SUBJECT TO TAXATION.

Part XIII Supplemental Information (continued)

THE SUBSIDIARY WAS TREATED AS A PARTNERSHIP FOR FEDERAL AND STATE INCOME TAX PURPOSES UNTIL MAY 2020, WHEN ILTF PURCHASED THE NONCONTROLLING INTEREST FOR ILCC AND NOW OWNS 100% OF ILCC. AS SUCH, THE PARTNERSHIP'S INCOME, LOSSES, AND CREDITS WERE INCLUDED IN THE INCOME TAX RETURNS OF ITS PARTNERS UNTIL THAT TIME.

THE ORGANIZATION IS REQUIRED TO ASSESS WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION OF THE TECHNICAL MERITS OF THE POSITION, ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL INFORMATION. IF THE TAX POSITION DOES NOT MEET THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD, THE BENEFIT OF THAT POSITION IS NOT RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS. THE ORGANIZATION HAS DETERMINED THERE ARE NO AMOUNTS TO RECORD AS ASSETS OR LIABILITIES RELATED TO UNCERTAIN TAX POSITIONS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD INCLUDED ON STATEMENT OF REVENUE -13,984.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD INCLUDED ON STATEMENT OF REVENUE 13,984.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **INDIAN LAND TENURE FOUNDATION** Employer identification number **41-2014273**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALOHA KUAMO'O AINA PO BOX 329 KALIUA KONA, HI 96745	46-4864386	501 (C)(3)	30,000.	0.			CULTURE PROGRAM
CHILCHINBETO CHAPTER OF THE NAVAJO NATION - PO BOX 1681 - KAYENTA, AZ 86033	86-0718204	TRIBE	12,848.	0.			EDUCATION PROGRAM
FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA - 1720 BIG LAKE RD - CLOQUET, MN 55720	41-0965719	TRIBE	6,682.	0.			EDUCATION PROGRAM
OGLALA SIOUX TRIBE PO BOX 2070 PINE RIDGE, SD 57770	46-0451277	TRIBE	30,440.	0.			EDUCATION PROGRAM
PALA BAND OF MISSION INDIANS 35008 PALA TEMECULA RD PMB 50 PALA, CA 92059	95-2863815	TRIBE	11,223.	0.			EDUCATION PROGRAM
PIMA LEASING & FINANCING CORPORATION - 5350 N 48TH, SUITE 245 - CHANDLER, AZ 85226	30-0650519	TRIBE	5,924.	0.			EDUCATION PROGRAM

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **5.**
- 3** Enter total number of other organizations listed in the line 1 table **7.**

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REDBUD RESOURCE GROUP PO BOX 455 FULTON, CA 95439	85-1919822	501 (C)(3)	9,480.	0.			EDUCATION PROGRAM
SANTEE SIOUX TRIBE OF NEBRASKA LAND MGMT OFFICE, 52946, HWY 12 NIOBRARA, NE 68760	47-0533471	TRIBE	7,814.	0.			EDUCATION PROGRAM
SILVER BULLET PRODUCTIONS 38 CALLE VENTOSO WEST SANTA FE, NM 87506	30-0275618	501 (C)(3)	30,000.	0.			EDUCATION PROGRAM
TRAVERSE AREA HISTORICAL SOCIETY PO BOX 7051 TRAVERSE CITY, MI 49696	38-2547978	501 (C)(3)	25,000.	0.			CULTURE PROGRAM
TYONEK NATIVE CORPORATION 1689 C ST, STE 219 ANCHORAGE, AK 99501	92-0047626	TRIBE	13,200.	0.			EDUCATION PROGRAM
NATIVE GOVERNANCE CENTER 1730 NEW BRIGHTON BLVD, STE 104-236 MINNEAPOLIS, MN 55413	47-4901644	501 (C)(3)	1,000,000.	0.			CULTURE PROGRAM

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ILTF RELIES ON PERIODIC REPORTS FROM GRANTEEES AS REQUIRED IN EVERY GRANT

AGREEMENT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

INDIAN LAND TENURE FOUNDATION

Employer identification number

41-2014273

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CRIS STAINBROOK PRESIDENT	(i)	137,500.	0.	1,524.	16,500.	38,720.	194,244.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RJAY BRUNKOW CEO OF ILCC	(i)	122,904.	0.	0.	19,597.	19,084.	161,585.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) BRYAN VAN STIPPEN PROGRAM DIRECTOR	(i)	104,500.	8,000.	180.	13,180.	27,129.	152,989.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DAVID GARELICK CORPORATE RELATIONS OFFICER	(i)	92,400.	8,000.	2,472.	12,048.	35,118.	150,038.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

INDIAN LAND TENURE FOUNDATION

Employer identification number

41-2014273

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

OWNERSHIP AND CONTROL. OUR PRIMARY ACTIVITY IS GRANT-MAKING TO NATIVE
AMERICAN TRIBES AND OTHER ORGANIZATIONS THAT CAN ASSIST IN REASCHING
THAT GOAL.

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

MEMBERS FOR A CONSTITUENCY THAT APPRECIATES THE CONVENIENCE OF THIS
FORMAT.

SPECIFIC OUTREACH EFFORTS INCLUDE OFFERING CONTINUING LEGAL EDUCATION
(CLE) COURSES AND THE TRIBAL LAND PROFESSIONALS CERTIFICATION PROGRAM,
ESTATE PLANNING AND WILL WRITING, DIRECTLY ADDRESSING FRACTIONAL
OWNERSHIP ISSUES ON ALLOTTED LANDS, CARBON CREDIT MARKETS; AND
DEVELOPING AND PRESENTING LESSONS OF OUR LAND CURRICULUM INFORMATION TO
TEACHERS, SCHOOL ADMINISTRATORS, STUDENTS, AND TRIBAL ELDERS, LEADERS,
AND OTHER CITIZENS.

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

INDIGENOUS COMMUNITIES.

THERE IS SIGNIFICANT DEMAND FOR CARBON PROJECTS ON INDIGENOUS LANDS AND
THIS FUNDING WILL ALLOW NICC TO BUILD OUR INTERNAL CAPACITY TO RESPOND
IN THE MOST EFFECTIVE WAYS POSSIBLE. NICC IS A TRUSTED RESOURCE, AND A
CRITICAL BRIDGE THAT ENABLES THE DEVELOPMENT OF SUCCESSFUL PROJECTS ON
INDIGENOUS LANDS THAT MAY NOT OTHERWISE HAPPEN DUE TO THE SIGNIFICANT
CAPITAL, TIME AND CAPACITY INVESTMENT NEEDED TO SECURE AND DEVELOP

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
---	--

PROJECTS. THE ENVIRONMENTAL IMPACT OF THESE PROJECTS WILL BE TRACKED USING AN EFFICIENT, TRANSPARENT SYSTEM, ALONG WITH A ROBUST FOREST CERTIFICATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CONSERVATION INNOVATION:

NICC HAS BEEN AWARDED TWO (2) USDA-NRCS CONSERVATION INNOVATION GRANTS ONE EACH IN 2021 AND THE OTHER IN 2022.

UNDER THE 2021 FUNDING, NICC AND ITS PARTNERS, IS DEVELOPING A NEW APPROACH TO TRIBAL WORKING LANDS CONSERVATION. THE GOAL OF THIS PROJECT IS TO DEVELOP AND PILOT AN OPERATIONAL WEB-BASED TOOL TO ASSESS AND QUANTIFY THE CO-BENEFITS OF ENHANCED LAND-BASED CARBON SEQUESTRATION PRODUCED THROUGH ECOSYSTEM CONSERVATION AND RESTORATION ACTIVITIES ON TRIBAL LANDS. WE WILL PRODUCE OPEN SOURCE ONLINE-MAPPING TOOLS FOR USE BY PARTNER TRIBES TO ASSESS NATURAL RESOURCE ASSETS, INCLUDING CARBON, AND WILL INTRODUCE A NEW FRAMEWORK AND METRICS FOR QUANTIFICATION AND VALUATION OF THE CO-BENEFITS OF PROTECTING THESE ASSETS. WE WILL WORK WITH PARTNER NATIVE AMERICAN TRIBES TO DEVELOP LONG-TERM CONSERVATION, SUSTAINABILITY, AND CLIMATE RESILIENCE STRATEGIES THAT MEET THEIR UNIQUE ECOLOGICAL AND CULTURAL VALUES.

THE TOOL WILL ALLOW FOR THE QUANTIFICATION AND VALUATION OF THESE RESOURCES FOR THE CO-BENEFITS OF SUSTAINED AIR QUALITY, WATER QUALITY, WATER SUPPLY, WILDLIFE HABITAT, CULTURAL VALUES, AND MORE. THESE VALUES CAN THEN BE MORE EXPLICITLY RECOGNIZED TO INCREASE THE MONETARY VALUE OF CARBON OFFSETS IN THE VOLUNTARY MARKETPLACE DERIVED FROM GREENHOUSE GAS MITIGATION ACTIVITIES ON TRIBAL LANDS. CURRENT STANDARDS IN THE

Name of the organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
---	--

VOLUNTARY CARBON OFFSET MARKETPLACE RECOGNIZE THE IMPORTANCE OF CO-BENEFITS BUT HAVE YET TO FULLY AND FORMALLY INCORPORATE THESE VALUES INTO VERIFIED OFFSET PROJECTS. GREENHOUSE GAS MITIGATION THROUGH THE PROTECTION OF HEALTHY ECOSYSTEMS AND WORKING LANDS OFFERS MORE THAN THE MONETIZATION OF CARBON, AND WE WILL BE THE FIRST TO OFFER CO-BENEFITS VALUATION METRICS TO THE VOLUNTARY CARBON MARKETPLACE.

THE 2021 FUNDING, NICC AND ITS PARTNERS, HAVE SEEN A PROLIFERATION OF AGRICULTURAL CARBON MARKETS. IF SUCCESSFUL, THESE PROGRAMS HAVE THE POTENTIAL TO MAKE POSITIVE CLIMATE IMPACTS, IMPROVE OR RESTORE LOCAL ECOLOGICAL RESOURCES, AND INCREASE INCOMES THROUGH THE CREATION OF A NEW CARBON CROP. THIS PROJECT SEEKS TO ENSURE THAT NATIVE AMERICAN FARMERS AND RANCHERS HAVE ACCESS TO NRCS PROGRAMS AND SERVICES FOR CONSERVATION THAT CAN LEAD TO BENEFIT FROM THE HIGHEST-QUALITY CARBON CREDITS AND THAT AGRICULTURAL PRODUCTION SYSTEMS COMMON ON TRIBAL LANDS HAVE STRONG LOCAL DEMONSTRATIONS TO CATALYZE ADOPTION. AGRICULTURAL CARBON MARKETS HAVE THE POTENTIAL TO PROVIDE RURAL COMMUNITIES WITH BOTH ECOLOGICAL AND ECONOMIC BENEFITS. RECENT YEARS HAVE SEEN A PROLIFERATION OF PROGRAMS IN THIS SPACE. WITHOUT DIRECT INVOLVEMENT, HOWEVER, THERE IS RISK THAT NATIVE AMERICAN FARMERS AND RANCHERS MAY NOT BENEFIT FROM THESE PROGRAMS EITHER BECAUSE OF A LACK OF INFORMATION TAILORED TO THEM, OR BECAUSE PROGRAMS MAY NOT INCLUDE SOME OF THE PRACTICES OR REGIONS MOST COMMON THREE AMONG THEM. THIS FUNDING ENABLES NATIVE AMERICAN FARMERS AND RANCHERS' ACCESS TO HIGH-QUALITY, THIRD-PARTY VERIFIED CARBON CREDITS AND PROMOTE ECOLOGICALLY RESTORATIVE AGRICULTURAL PRACTICES.

THE RECENTLY APPROVED SOIL ENRICHMENT PROTOCOL (SEP) BY THE CLIMATE

Name of the organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
---	--

ACTION RESERVE PROVIDES A NEW STANDARD FOR AGRICULTURAL CARBON MARKETS THAT ENABLES SCALE AND RIGOR. DEMONSTRATION SITES SHOWING THE BENEFITS OF NRCS CONSERVATION PRACTICES AND SHOWING THE ECONOMIC BENEFIT OF PARTICIPATION IN AGRICULTURAL CARBON MARKETS CAN INCREASE AWARENESS OF CLIMATE SMART AGRICULTURE AND REDUCE BARRIERS TO PARTICIPATION OF NATIVE AMERICAN PRODUCERS AND GROWERS IN NRCS CONSERVATION PRACTICES. NICC HAS IDENTIFIED TRIBAL-OWNED OR INDIVIDUALLY OWNED FARMLAND FOR THESE DEMONSTRATIONS, ENSURING THE BENEFITS OF THIS AGREEMENT ENRICH TRIBAL PRODUCERS AND ENABLE ACCESS TO CARBON MARKETS BEYOND THE DIRECT RECIPIENTS OF THIS GRANT'S BENEFITS. ONE SET OF DEMONSTRATIONS SITES WILL HIGHLIGHT THE EFFECTS ON THE LAND DUE TO GRAZING PRACTICE CHANGES. THIS PROJECT WILL ALSO ESTABLISH CROPLAND DEMONSTRATION SITES WITH NATIVE AMERICAN FARMERS THAT SERVE AS DEMONSTRATIONS OF THE POTENTIAL FOR REGENERATIVE AGRICULTURAL PRACTICES, SUCH AS COVER CROPS AND NO-TILL, WHILE ALSO PROVIDING AN EDUCATIONAL RESOURCE FOR NATIVE AMERICAN GROWERS AND AGRONOMISTS TO INCREASE ACCESS TO AND BENEFIT FROM THE LARGEST, ESTABLISHED PROGRAM IMPLEMENTING THE SEP AT SCALE, CARBON BY INDIGO AS WELL AS INCREASE AWARENESS AND PARTICIPATION IN NRCS PROGRAMS SUCH AS EQIP. THE OUTCOME OF THIS GRANT HELPS INFORM THE EFFECTS OF REGENERATIVE FARMING PRACTICES TO LOCAL PRODUCERS AND FARMERS AS WELL AS AID IN LOWERING OR REMOVE BARRIERS TO ACCESS CARBON MARKETS FOR NATIVE AMERICAN FARMERS AND RANCHERS. BEYOND THE CARBON MARKET BENEFITS, FARMERS AND RANCHERS IMPLEMENTING THESE CONSERVATION GRAZING PRACTICES WOULD IMPROVE WILDLIFE HABITAT AND DECREASE EROSION AND OTHER ENVIRONMENTAL RISKS FROM CONVENTIONAL FARMING AND GRAZING PRACTICES.

EXPENSES \$ 1,004,262. INCLUDING GRANTS OF \$ 1,000,000. REVENUE \$ 0.

Name of the organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
---	--

FORM 990, PART VI, SECTION B, LINE 11B:

EACH BOARD MEMBER RECEIVES A COPY OF THE 990 BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE. AN OVERVIEW IS CONDUCTED BY THE PRESIDENT, WITH SPECIAL ATTENTION DRAWN TO NOTEWORTHY SECTIONS SUCH AS PUBLIC SUPPORT TESTING, PROGRAM EXPENSES, AND OTHER AREAS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION'S POLICY PROVIDES EXAMPLES OF RELATIONSHIPS THAT COULD CONSTITUTE A CONFLICT OF INTEREST. THE POLICY IS GIVEN TO BOARD MEMBERS AT THEIR ANNUAL MEETING, AT WHICH TIME THEY ARE ASKED TO DISCLOSE ANY INDIVIDUALS AND/OR ORGANIZATIONS WITH WHICH A CONFLICT OF INTEREST MIGHT EXIST. EACH MEMBER ACKNOWLEDGES RECEIPT OF AND UNDERSTANDING OF THE CONFLICT OF INTEREST POLICY VIA SIGNATURE ON AN ANNUAL BASIS. CONFLICTS ARE REPORTED TO THE BOARD CHAIR. ANY MEMBER HAVING A CONFLICT OF INTEREST CANNOT PARTICIPATE IN WITHER DELIBERATIONS OR DECISION ON THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD USES COMPENSATION SURVEYS CONDUCTED BY THE MINNESOTA COUNCIL OF FOUNDATIONS AND LIKE ORGANIZATIONS TO ASSIST IN DETERMINING THE COMPENSATION OF KEY EMPLOYEES. SUCH COMPARABILITY STUDIED WERE CONDUCTED IN PRIOR YEARS. THE ORGANIZATION'S BOARD MEMBERS RECEIVE NO COMPENSATION AND SERVE ON A VOLUNTEER BASIS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

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

FORM 990, PART VI, SECTION C, LINE 19:

Name of the organization INDIAN LAND TENURE FOUNDATION	Employer identification number 41-2014273
---	--

ANY REQUESTS FOR SUCH DOCUMENTS ARE MADE DIRECTLY TO THE ORGANIZATION,
 WHICH CAN FULFILL THE REQUESTS ELECTRONICALLY OR IN OTHER FORMATS AS
 NECESSARY. GENERALLY, FINANCIAL STATEMENTS ARE DISCLOSED AS PART OF THE
 ANNUAL REPORT WHICH IS DISTRIBUTED TO DONORS AND OTHERS.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OUTSIDE PROFESSIONAL SERVICES:

PROGRAM SERVICE EXPENSES	1,311,202.
MANAGEMENT AND GENERAL EXPENSES	11,649.
FUNDRAISING EXPENSES	3,004.
TOTAL EXPENSES	1,325,855.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,325,855.

AMENDMENT EXPLANATION

AMENDING PART VIII, LINE 1A TO ADD A HIGHEST COMPENSATED EMPLOYEE.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **INDIAN LAND TENURE FOUNDATION** Employer identification number **41-2014273**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
INDIAN LAND CAPITAL COMPANY, LLC - 20-2744778, 151 EAST COUNTY ROAD B2, LITTLE CANADA, MN 55117	FINANCIAL LENDING	MINNESOTA	1,509,025.	27,103,807.	INDIAN LAND TENURE FOUNDATION

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

Schedule R (Form 990) 2022

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	
p Reimbursement paid to related organization(s) for expenses	1p	
q Reimbursement paid by related organization(s) for expenses	1q	
r Other transfer of cash or property to related organization(s)	1r	
s Other transfer of cash or property from related organization(s)	1s	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Lined area for supplemental information.

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. INDIAN LAND TENURE FOUNDATION	Taxpayer identification number (TIN) 41-2014273
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 151 EAST COUNTY ROAD B2	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE CANADA, MN 55117	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

CRIS STAINBROOK

- The books are in the care of ▶ **151 E, COUNTY ROAD B2 E - LITTLE CANADA, MN 55117**

Telephone No. ▶ **651-766-8999** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2022** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.