Form <b>99</b>	U
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Department of the Treasury

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

OMB No. 1545-0047

2022

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		if applicable:	C		cui begi	iiiiig		, 20	LL, und chun	9	D Emplo	yer iden	tification number	
-		ddress change	BITTER	RU0'	τ τ.αΝΙ	O TRUST					31-	1595	5967	
		ame change	P.O. B			111001					E Teleph			
	In	itial return	HAMILT	'ON, I	MT 598	340					406	-375	5-0956	
	Fi	nal return/terminated												
	A	mended return									G Gross	receipts	\$ 1,743	,262.
	A	pplication pending	g <b>F</b> Name a	nd addres	s of princip	al officer: GAV	VIN RICE	KLEES		H(a)	s this a group retu	rn for su		X No
			SAME A	SCI	ABOVE	011				H(b) A	re all subordinates f "No," attach a lis	s includ	ed? Yes	No
I	Tax	-exempt status:	X 501(c)(3	3)	501(c) (	) (	insert no.)	4947(a)(1)	or 527					
J	We	bsite: W			DTLANE	DTRUST.OI	RG			H(c)	Group exemption n	umber		
κ		n of organization:	X Corpora	tion	Trust	Association	Other		L Year of format	ion: 1	1997 M	State of	legal domicile: MT	1
Pa	art I	Summa												
	1												WNERS AND	
8	COMMUNITY GROUPS TO CONSERVE THE WATER, WILDLIFE, AND WORKING FARMS AND MONTANA'S BITTERROOT VALLEY FOR ALL GENERATIONS, UTILIZING CONSERVATION FEE PURCHASES, AND PROACTIVE LAND STEWARDSHIP.         2       Check this box if the organization discontinued its operations or disposed of more than 25% of its net asso Number of voting members of the governing body (Part VI, line 1a).         3       Number of independent voting members of the governing body (Part VI, line 1a).         4       Number of independent voting members of the governing body (Part VI, line 1b).         5       Total number of individuals employed in calendar year 2022 (Part V, line 2a).         6       Total number of volunteers (estimate if necessary).         7a       Total unrelated business revenue from Part VIII, column (C), line 12													
nan												<u>ON EASEME</u> r	<u>15, _</u>	
veri	2	Check this b								ore th	an 25% of its	net a		
ဗီ	3	Number of v	voting mem	bers of	the gove	erning body (	(Part VI, lin	e 1a)				3		13
ంత ల	4			-		-			ine 1b)	~		4		13
itie	5								2a)			5		8
ctiv	6											6 7a		120
A												7a 7b		0.
		There and once the		taxabit			<u></u>	<u>i, iiio i i .</u>			Prior Year		Current Y	
-	8	Contribution	s and grant	ts (Part	VIII, line	e 1h)					1,305,4		1,341	
nue	9	Program service revenue (Part VIII, line 2g)												<u>,</u>
Revenue	10										14,8			,988.
œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)										574.		,840.
	12				-						1,321,9	915.	1,533	,262.
	13			•	-			-						
	14 15	•	Benefits paid to or for members (Part IX, column (A), line 4)       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)       548,769.									640	,623.	
es	15		•						-		540,	109.	649	,023.
Expenses	104		nal fundraising fees (Part IX, column (A), line 11e)											
Å	b						· · · · · · · · · · · · · · · · · · ·		107,095.					
_	17	•							· · · · · · · · · · · · · · · · · · ·		177,			<u>,494.</u>
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)									1,039			
- 0	19	Revenue les	s expenses	s. Subu	actime		12				595,4			<u>,145.</u>
Net Assets or Fund Balances	20	Total assets	(Part X, lir	ne 16)							ginning of Curren 2,204,3		3,058	
Asse Bal	21										15,3			<u>, 033.</u>
Net	22	Net assets o	or fund bala	inces. S	Subtract	line 21 from	line 20				2,189,0		2,567	
	art II		re Block				-				2/10//		27507	/22/.
					ined this re	turn, including ad	companying so	hedules and st	atements, and to	the bes	t of my knowledge	and be	lief, it is true, correct	t, and
com	plete. D	eclaration of prep	parer (other tha	n officer)	is based or	n all information	of which prepar	er has any kno	wledge.					
Sig	yn	Signature o									ate			
He	re	-	I RICKLE	-					E	EXEC	UTIVE DIE	۲.		
-			preparer's nan			Preparer's sig	nature		Date				PTIN	
						i ichaici 2 210	gi iatui <del>c</del>		Dale		Check	if		
Pa			WARD C				ם חק				self-employ	ea	P00441760	
Us	epar e Or					IY & MEYH					Firm's EIN	01	-0300400	
55		IIY Firm's add				<u>H EAST,</u> 59801	SUILE 2	200			Phone no.	(40	<u>-0390489</u> 6) 721-355	55
Mar	v the	IRS discuss t					ve? See ind	structions				(40	X Yes	No
_		r Paperwork									L 09/01/22		Form <b>99</b>	-
					,									- ()

Form 990 (202	2) BITTER ROOT LAND T	RUST	31-1595967	Page <b>2</b>							
Part III St	tatement of Program Servio	ce Accomplishments									
		ponse or note to any line in this Part III .		Х							
1 Briefly de	escribe the organization's mission	:									
<u>BRLT</u>	PARTNERS WITH LANDOWN	ERS AND COMMUNITY GROUPS	TO CONSERVE THE WATER, WILDI	<u>.IFE,</u>							
<u>AND</u> WO	<u> DRKING FARMS AND RANC</u>	HES_IN_MONTANA'S_BITTERROO	DT_VALLEY_FOR_ALL_GENERATION	<u>IS,</u>							
<u>UTILI</u>	ZING CONSERVATION EAS	EMENTS, FEE PURCHASES, ANI	D PROACTIVE LAND STEWARDSHIP	<u>,                                     </u>							
Did the er			ve wet listed on the writer								
		program services during the year which we	·								
	) or 990-EZ?		Yes	X No							
,	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?										
	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.										
	5		largest program convices, as measured by a	VDODGOG							
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 \$	796,565. including grants of \$	) (Revenue \$	)							
BITTE		· · · · · · · · · · · · · · · · · · ·	S AND THE COMMUNITY TO PRESE	RVE							
			SKALKAHO SOUTH OF HAMILTON I								
2022.			THAT PROTECTED A DIVERSE SU								
COMMUN		FITS. BITTER ROOT LAND TRU									
LANDOV	WNERS AND THE LOCAL CO	OMMUNITY TO COMPLETE THEIR	R LARGEST EASEMENT TO DATE A	T_OVER_							
1,260	ACRES.										
<u>SEE SC</u>	CHEDULE O FOR ADDITIO	NAL_DETAILS									
			<b>Y</b>								
Ab (Code)	) (Evenness ¢	including grants of C									
4b (Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)							
		<b>X</b>									
4c (Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)							
<b>re</b> (0000.				/							
	+										
<b>\</b>											
)											
4d Other pro	ogram services (Describe on Sche	dule O.)									
(Expense		icluding grants of \$	) (Revenue \$	)							
	gram service expenses	796,565.	/ /	<u>·</u>							
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				• /							

Form 990 (2022) BITTER ROOT LAND TRUST

Par	t IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes X	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	Х	
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>	3		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? If "Yes," complete Schedule C, Part II.	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		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>	6		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>	7	Х	
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>	8	Х	
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> .	9		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>	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		Х
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>	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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>	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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>	14b		Х
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> .	15		Х
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>	16		Х
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	17		Х
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>	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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>	21		Х

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Par	t 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 or column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	Part IX,	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's c and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete</i> <i>Schedule J</i> .		23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24 complete Schedule K. If "No," go to line 25a.	of d and	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	-	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defea any tax-exempt bonds?	ase	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	t	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	ete	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any cur former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlle or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	d entitv	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, k 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>	-	27		х
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):	√,			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // "Yes," complete Schedule L, Part IV		28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Ye complete Schedule L, Part IV.	≥s,"	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.		29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? <i>If "Yes," complete Schedule M.</i>	nservation	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N		31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	ns	33		х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, II and Part V, line 1	I. or IV.	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a con entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	trolled	35b		
	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable relation organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	ed	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and t treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	hat is	37		х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O		38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
_	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	· · · · · ·		·
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a	- [		Yes	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	/			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamir (gambling) winnings to prize winners?				
	(gambling) winnings to prize winners?		1c	Х	
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Form	990 (2022) BITTER ROOT LAND TRUST 31-15959	57	F	Page 5
Part				
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
L		8	Х	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Λ	X
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	$\mathbf{\langle}$	X
b	If "Yes," enter the name of the foreign country	-		
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	-	5c		<b>_</b>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Х	
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
•	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?			<u> </u>
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	_		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	_		
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	-		
	against amounts due or received from them.)	10		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?			Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would	17		
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
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	a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chai Schedule O. See instructions.	nges	on								
	Check if Schedule O contains a response or note to any line in this Part VI.			. X							
Sec	tion A. Governing Body and Management										
1a	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		Yes	No							
b	Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>										
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?										
3	B Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?										
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5		X							
6	Did the organization become aware during the year of a significant diversion of the organization second assess	6		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							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х							
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
	The governing body?	8a	Х								
	Each committee with authority to act on behalf of the governing body?	8b	Х	<b></b>							
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	ie Co	ode.)							
			Yes	No							
	Did the organization have local chapters, branches, or affiliates?	10a		Х							
b	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?	101									
11-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	Х	<u> </u>							
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O	Па	<u></u>								
	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Х								
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> SEE. SCHEDULE . Q	12c	Х								
	Did the organization have a written whistleblower policy?	13		X							
	Did the organization have a written document retention and destruction policy?	14	Х								
	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?	15	V								
	The organization's CEO, Executive Director, or top management official. SEE . SCHEDULE. O	15a 15b	X X	╞────							
U	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	150	Λ								
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?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the										
Sec	organization's exempt status with respect to such arrangements?	16b		<u>i                                    </u>							
	List the states with which a copy of this Form 990 is required to be filed NONE										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.	01(c)(3	)s on	ly)							
19	X       Own website       X       Upon request       Other (explain on Schedule O)         Describe on Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available during the two users       Other (explain on Schedule O)	ible to									
20	the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records.										
	GAVIN RICKLEFS 170 S. SECOND ST., STE B HAMILTON MT 59840 406-375-0095										

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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.	

Form 990 (2022) BITTER ROOT LAND TRUST		31-159596	67 Page <b>7</b>						
Part VII Compensation of Officers, Directors, Tru Independent Contractors	stees, Key Employe	es, Highest Compensated Em	ployees, and						
Check if Schedule O contains a response or note to	any line in this Part VII.								
Section A. Officers, Directors, Trustees, Key Emp	loyees, and Highest	Compensated Employees							
<b>1a</b> Complete this table for all persons required to be listed. Report c organization's tax year.	compensation for the calend	lar year ending with or within the							
<ul> <li>List all of the organization's current officers, directors, tru compensation. Enter -0- in columns (D), (E), and (F) if no compensation.</li> </ul>		s or organizations), regardless of am	ount of						
<ul> <li>List all of the organization's current key employees, if any</li> </ul>	y. See the instructions fo	r definition of "key employee."							
• List the organization's five <b>current</b> highest compensated e who received reportable compensation (box 5 of Form W-2, box 6 of from the organization and any related organizations.	employees (other than ar Form 1099-MISC, and/or b	officer, director, trustee, or key emp ox 1 of Form 1099-NEC) of more than \$	loyee) 100,000						
• List all of the organization's <b>former</b> officers, key employed of reportable compensation from the organization and any related or		ated employees who received more the	nan \$100,000						
• List all of the organization's <b>former directors or trustees</b> 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 at	oove.								
Check this box if neither the organization nor any related organiz	zation compensated any cu	rrent officer, director, or trustee.							
	(C)								

(A) Name and title	(B) Average hours per week (list any hours for related organiza- tions below dotted line)	thar is	n one s both dir	box, an o ector/	ot che unles	eck more ss person and a ee) Highest compensated	(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
<u>(1) GAVIN RICKLEFS</u> EXECUTIVE DIR.	$-\frac{40}{0}$			x			113,858.	0.	0
(2) JEAN STEELE	2			^					0.
DIRECTOR	0	Х					0.	0.	0.
_(3)_LYNN_THURBER DIRECTOR	<u>2</u> 0	x					0.	0.	0.
_(4) MICHAEL BRADT DIRECTOR	$\frac{2}{0}$	x					0.	0.	0.
(5) JOHN ORMISTON	2								
DIRECTOR	0	Х					0.	0.	0.
(6) TORI NOBLES	2								
DIRECTOR	0	Х					0.	0.	0.
(7) HEATHER MENNING	2								
DIRECTOR	0	Х					0.	0.	0.
(8) ROGER GANTZ	2								
DIRECTOR	0	Х					0.	0.	0.
(9) KATHIE MESSER	2								
DIRECTOR	0	Х					0.	0.	0.
(10) SARI_KERSLAKE	2								
DIRECTOR	0	Х					0.	0.	0.
(11) ANDREW MASSIE	2								
TREASURER	0			Х			0.	0.	0.
(12) TONIA BLOOM SECRETARY	20			х			0.	0.	0.
(13) MEGHAN HANSON	2				l				
VICE PRESIDENT	0	1		Х			0.	0.	0.
(14) BRET YOUNG	2								
PRESIDENT	0			Х			0.	0.	0.
BAA	TEEA0	107L	09/0	1/22					Form 990 (2022)

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Part VII Section A. Officers, Directors, Tru	ıstees, l	Key	Em	iplo	oye	es,	anc	d Highest Con	pensated Emp	loyees (continued)
	(B)			(C	;)					
(A) Name and title	Average hours per	box,	unle	heck ss pe	rson	e than is both pr/trus	h an	<b>(D)</b> Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount
	week (list any hours	or Inc	sul	ç	Ke	em Hig	Ч С	the organization (W-2/1099-	related organizations (W-2/1099-	of other compensation from the organization
	for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest co employee	Former	MISC/1099-NEC)	MISC/1099-NEC)	the organization and related organizations
	organiza - tions	al tru bor	nalt		ploye	e e				
	below dotted line)	istee	ruste		¢	ensa				
			¢D			fed				
(15)									C	
(16)										
(17)										
(18)										
(19)										
(20)								3		
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal								113,858.	0.	0.
c Total from continuation sheets to Part VII, Section	on A							0.	0.	0.
d Total (add lines 1b and 1c).								113,858.	0.	0.
2 Total number of individuals (including but not limited from the organization 1	to those I	isted	abov	ve) w	vho	recer	ved	more than \$100,00	JU of reportable com	pensation
from the organization 1										Yes No
3 Did the organization list any former officer, direct on line 1a? If "Yes, "complete Schedule J for such	tor, truste h <i>individu</i>	e, ke al	y er	nplo	oyee	e, or	high 	nest compensated	l employee	. <b>3</b> X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50,00	)0?	lf "Y	′es,	" cor	nple	ete Schedule J foi	r	. <b>4</b> X
<ul> <li>5 Did any person listed on line 1a receive or accrume for services rendered to the organization? If "Yes</li> </ul>	e compen	isatio	n fra	om a	anv	unre	late	d organization or	individual	
Section B. Independent Contractors										
<ol> <li>Complete this table for your five highest compensation from the organization. Report compen</li> </ol>	sated inde sation for	epeno the ca	dent alen	: con dar y	ntrao /ear	ctors endi	tha ng w	t received more t with or within the or	han \$100,000 of rganization's tax yea	r.
(A) Name and business add					·			<b>(B</b> ) Description	)	(C) Compensation
2 Total number of independent contractors (including b \$100.000 of compensation from the organization		ited to	o tho	se li	istec	l abo	ve) v	who received more	than	

# Form 990 (2022) BITTER ROOT LAND TRUST Part VIII Statement of Revenue

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	Check if Schedule O contains a response or note to any				
		<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
-	Federated campaigns 1a				
	Membership dues 1b				
	Fundraising events 1c				
1	Related organizations 1d				
	Government grants (contributions) 1e 213,214.				
Ť	All other contributions, gifts, grants, and similar amounts not included above <b>1f</b> 1,128,220.				
, c	Noncash contributions included in				
	lines 1a-1f				
r	Total. Add lines 1a-1fBusiness Code	1,341,434.			
2a					
-20 -	、				
c					· · · · · ·
e	,				
f	All other program service revenue				
ç	Total. Add lines 2a-2f				
3	Investment income (including dividends, interest, and				
	other similar amounts)	16,498.			16,498.
4	Income from investment of tax-exempt bond proceeds				
5	Royalties				
<b>C</b> -	(i) Real (ii) Personal				
	Gross rents				
	Less: rental expenses     6b       c     6c				
	Net rental income or (loss)				
	(i) Securities (ii) Other				
/a	sales of assets				
L	other than inventory     7a     381,490.       Less: cost or other basis				
	and sales expenses <b>7b</b> 210,000.				
c	: Gain or (loss) 7c 171,490.				
c	Net gain or (loss)	171,490.	171,490.		
8a	Gross income from fundraising events				
	(not including \$				
1	of contributions reported on line 1c).				
.	See Part IV, line 18         8a         3,840.				
	Less: direct expenses       8b         : Net income or (loss) from fundraising events	0.040			2.040
		3,840.			3,840.
9a	Gross income from gaming activities. See Part IV, line 19				
ŀ	b Less: direct expenses 9b				
	Net income or (loss) from gaming activities				
TUa	Gross sales of inventory, less returns and allowances				
L	Less: cost of goods sold				
	Net income or (loss) from sales of inventory				
L	Business Code				
11a	·				
11a b c	)				
c	;				
	All other revenue				
	• Total. Add lines 11a-11d				

	Check if Schedule O contains a				
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees Compensation not included above to	113,858.	78,858.	20,000.	15,000.
ю	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	448,816.	349,304.	65,698.	33,814.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,639.	12,511.	1,720.	1,408.
9	Other employee benefits	26,984.	21,587.	2,968.	2,429.
10	Payroll taxes	44,326.	35,461.	4,876.	3,989.
11	Fees for services (nonemployees):	· · ·			<u>.</u>
	Management				
	Legal				
	Accounting				
	Lobbying.				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)				
12	Advertising and promotion	6,764.			6,764.
13	Office expenses	18,449.	12,914.	3,690.	1,845.
14	Information technology				
15	Royalties				
16	Occupancy	18,221.	14,577.	1,949.	1,695.
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	•			
	Conferences, conventions, and meetings				
20	Interest	7,420.	7,420.		
21	3				
	Depreciation, depletion, and amortization	3,935.	0.001	3,935.	
	Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 24e.	6,058.	2,601.	3,457.	
	of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	PROJECT & STEWARDSHIP EXP	202,407.	202,407.		
	PROFESSIONAL FEES	40,085.	10,021.	18,439.	11,625.
	PRINTING & POSTAGE	21,284.	14,189.		7,095.
	FUNDRAISING & SPECIAL EVENTS	19,576.			19,576.
	All other expenses	45,295.	34,715.	8,725.	1,855.
25	Total functional expenses. Add lines 1 through 24e	1,039,117.	796,565.	135,457.	107,095.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
					Farma <b>000</b> (0000)

Statement of Functional Expenses Part IX

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.

# Form 990 (2022) BITTER ROOT LAND TRUST

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<u> </u>	TJJJJJ01	

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Part X Balance Sheet

			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing.	514,021.	1	461,667.
	2	Savings and temporary cash investments.	496,898.	2	489,975.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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		-	
	6	Loans and other receivables from other disqualified persons (as defined under		5	
	7	section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net		6	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	15,758.
	1 <b>0</b> a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation <b>10b</b> 52, 599.	223,048.	10c	627,556.
		Investments – publicly traded securities.	829,621.	11	1,370,504.
	12	Investments – other securities. See Part IV, line 11	ouspour.	12	1/0/0/0011
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11.	140,800.	15	92,800.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,204,388.	16	3,058,260.
		Accounts payable and accrued expenses	15,304.	17	7,743.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
	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		23	483,290.
	24	Unsecured notes and loans payable to unrelated third parties		24	
		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	15,304.	26	491,033.
		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
	27	Net assets without donor restrictions	1,900,687.	27	2,496,016.
	28	Net assets with donor restrictions.	288,397.	28	71,211.
		Organizations that do not follow FASB ASC 958, check here 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	2,189,084.	32	2,567,227.
r	33	Total liabilities and net assets/fund balances.	2,204,388.	33	3,058,260.
4		TEEA0111L 09/01/22			Form <b>990</b> (2022)

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Par	t 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	1,533,	26
2	Total expenses (must equal Part IX, column (A), line 25).	2	1,039,	
3	Revenue less expenses. Subtract line 2 from line 1		494,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		2,189,	
5	Net unrealized gains (losses) on investments.	5	-116,	
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		~
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,567,	22
Par	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
·			Yes	5 1
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain			
	on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a	
	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:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		<b>2b</b> X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited or	n a separate		
	basis, consolidated basis, or both:			
	X         Separate basis         Both consolidated and separate basis			_
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?		<b>2</b> c X	
	If the organization changed either its oversight process or selection process during the tax year, exp on Schedule O. SEE SCHEDILLE			
3a	on Schedule O. SEE SCHEDULE As a result of a federal award, was the organization required to undergo an audit or audits as set for Guidance, 2 C.F.R Part 200, Subpart F?	rth in the Uniform	3a	T
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	equired audit	3b	
BAA	TEEA0112L 09/01/22		Form <b>990</b>	) (20
BAA	TEEA0112L 09/01/22			. (20
5				

SCHEDULE A (Form 990)

# **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.

OMB No. 1545-0047 2022

Departi Interna	ment of the Treasury I Revenue Service	G	o to www.irs.gov/For	m990 for instructions a	nd the I	atest in	formation.	Inspection
Name	Name of the organization Employer identification number							tion number
-	TER ROOT LA						31-159596	
Par				rganizations must				tions.
	Ĕ-	•		For lines 1 through 12,		2	,	
1 2				nurches described in <b>sec</b> t		b)(1)(A)(	1).	
2				ach Schedule E (Form ization described in <b>sec</b>		0/6//1//	\/:::\	
3 4				unction with a hospital				nter the hospital's
-	name, city, a							nter the hospital s
5	An organizati	on operated for		ge or university owned				scribed in
6	A federal, sta	te, or local gov	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	(A)(v).	
7	X An organizatio	n that normally r 0(b)(1)(A)(vi).(	receives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general put	lic described
8	A community	trust described	in section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9				tion 170(b)(1)(A)(ix) oper (see instructions). Enter				
10	from activities investment in	s related to its e come and unre	exempt functions, sub	nan 33-1/3% of its supp ject to certain exceptio e income (less section Part III.)	ns: and	(2) no r	nore than 33-1/3% of it	s support from gross
11	An organizati	on organized a	nd operated exclusive	ly to test for public safe	ety. See	section	509(a)(4).	
12	or more publi	cly supported o	rganizations describe	ely for the benefit of, to d in <b>section 509(a)(1)</b> of upporting organization	or <b>sectio</b>	on 509(a)	(2). See section 509(a)	it the purposes of one (3). Check the box on
а	Type I. A supp	orting organizati	on operated, supervise gularly appoint or elect	d, or controlled by its sup a majority of the directo	ported o	Irganizati	on(s), typically by giving	the supported on. <b>You must</b>
b	management of	oporting organiz of the supporting <b>te Part IV, Sect</b>	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by l the supported organizati	naving control or on(s). <b>You</b>
с				ion operated in connectio olete Part IV, Sections	n with, ai <b>A, D, an</b>	nd functio <b>d E.</b>	onally integrated with, its	supported
d	functionally in	ntegrated. The c	organization generally	anization operated in cor must satisfy a distribu <b>s A and D, and Part V.</b>	tion rea	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see
e	integrated, or	Type III non-fu	inctionally integrated	en determination from t supporting organization	۱.			e III functionally
			n about the supported	d organization(s)				
	(i) Name of supported o		(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Amount of monetary	(vi) Amount of other
·	.,		(·) -···	(described on lines 1-10 above (see instructions))	organizat in your g	tion listed	support (see instructions)	support (see instructions)
					Yes	No		
(A)	0							
<u>(B)</u>								
<u>(C)</u>								
(D)								
<u>(E)</u>								
Total								

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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

000	tion A. I ublic Support						
begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	612,334.	853,897.	1,109,235.	1,305,488.	1,341,434.	5,222,388.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge					C	0.
4	Total. Add lines 1 through 3	612,334.	853,897.	1,109,235.	1,305,488.	1,341,434.	5,222,388.
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)				Ċ	, ·	324,166.
6	Public support. Subtract line 5 from line 4				5		4,898,222.
Sec	tion B. Total Support						1,000,000
Cale	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	(d) 2021	<b>(e)</b> 2022	<b>(f)</b> Total
7	Amounts from line 4	612,334.	853,897.	1,109,235.	1,305,488.	1,341,434.	5,222,388.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	13,361.	16,423.	15,316.	14,853.	16,498.	76,451.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10	$\sim$					5,298,839.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or f	ifth tax year as a	section 501(c)(3)	
	tion C. Computation of Pul					T	
14	Public support percentage for 20						92.44 %
15	Public support percentage from a					L	87.48 %
16a	<b>33-1/3% support test</b> — <b>2022.</b> If the and <b>stop here.</b> The organization						
b	<b>33-1/3% support test-2021.</b> If the and <b>stop here.</b> The organization	ne organization die qualifies as a pu	d not check a box blicly supported c	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	stest, check this	box and <b>stop here</b>	. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	s test, check this tion qualifies as a	box and <b>stop here</b> publicly supporte	Explain in Part dorganization.	VI how the
18	Private foundation. If the organiz	zation did not che	еск а box on line	13, 16a, 16b, 17a	, or 1/b, check th		
<b>B</b> VV						Sahadula	A (Earm 000) 2022

 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.)

Sec	tion A. Public Support						
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
2	any "unusùal grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						R
3	Gross receipts from activities that are not an unrelated trade or business under section 513.					C	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					0	
5	The value of services or facilities furnished by a governmental unit to the organization without charge				C		
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons				S		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support.(Subtract line7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	R	S*				
	acquired after June 30, 1975						
с 11	Add lines 10a and 10b 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.)						
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.).						
14	First 5 years. If the Form 990 is organization, check this box and						
Sec	tion C. Computation of Pu						
15	Public support percentage for 20		<b>y</b>	ne 13, column (f)	)		0,0
16	Public support percentage from	2021 Schedule A,	Part III, line 15.			16	0/0
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	9		•	
17	Investment income percentage f	or 2022 (line 10c,	column (f), divide	ed by line 13, col	umn (f))		0/0
18	Investment income percentage f						
19a	<b>33-1/3% support tests—2022.</b> If is not more than 33-1/3%, check	the organization d this box and <b>sto</b>	lid not check the l <b>p here.</b> The orgar	box on line 14, ar iization qualifies a	nd line 15 is more as a publicly supp	than 33-1/3%, a orted organization	and line 17
b	<b>33-1/3% support tests</b> — <b>2021.</b> If the line 18 is not more than 33-1/3%	the organization d	lid not check a bo	x on line 14 or lir	ne 19a, and line 1	6 is more than 3	3-1/3%, and
20	Private foundation. If the organi		•				
	and the organi						o A (Eorm 990) 2022

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 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? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1			
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		_	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b			
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> 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.	4c			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b			
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c			
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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 <b>Part VI</b>.</i>	6			
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> .	7			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8			
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))? If "Yes," provide detail in <b>Part VI</b> .	9a			
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? If "Yes," provide detail in <b>Part VI</b> .	9b			
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 <b>Part VI.</b></i>	9c			
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,"</i> answer line 10b below.	10a			
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b			

Schedule A (Form 990) 2022 BITTER ROOT LAND TRUST		31-1595967	F	Page 5	
Pa	t IV Supporting Organ	zations (continued)			
				Yes	No
11	Has the organization accepted	d a gift or contribution from any of the following persor	is?		
a	A person who directly or indirec	tly controls, either alone or together with persons described		-	
	the governing body of a supp	orted organization?	11a		
b	A family member of a person	described on line 11a above?	11b	1	
c	A 35% controlled entity of a person d	escribed on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, pro	ovide detail in <b>Part VI.</b> 11c		
Sec	tion B. Type I Supporting	g Organizations			
				Yes	No
1	or more supported organization officers, directors, or trustees organization(s) effectively ope	bers of the governing body, officers acting in their offic ons have the power to regularly appoint or elect at leas at all times during the tax year? <i>If "No," describe in P</i> , erated, supervised, or controlled the organization's acti ion, describe how the powers to appoint and/or remove	st a majority of the organization's <b>Part VI</b> how the supported ivities. If the organization had more	D	

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers

### Section C. Type II Supporting Organizations

during the tax year.

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)? If "No," describe in **Part VI** how control or management of the 1 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s).

### Section D. All Type III Supporting Organizations

			Yes	No
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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played			
	in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

#### 2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

1

2

Yes

Yes

No

No

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

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1       Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         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 (explain in detail in Part VI):       1d         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	(B) Current Year (optional)	(A) Prior Year	
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)       7         7       Other expenses (see instructions)       7         8       Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)       8         ection B - Minimum Asset Amount       (A) Prior Year       (B)         1       Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         a Average monthly value of securities       1a       1a         b Average monthly value of securities       1a       1b         c Fair market value of other non-exempt-use assets       1c       1d         e Discount claimed for blockage or other factors (explain in detail in Part V):       2       2         2       Acquisition indebtedness applicable to non-exempt-use assets       2       2         3       Uthal (heft line 2 from line 1d.       3       4         4       Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).       5       6			1
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)       7         7       2       4       4         7       3       Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)       8         ection B - Minimum Asset Amount       (A) Prior Year       (B)         1       Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         b Average monthly cash balances       1b       1c         c Fair market value of other non-exempt-use assets       1e       1d         e Discount claimed for blockage or other factors (explain in detail in Part W):       1d       2         2       Acquisition indebtedness applicable to non-exempt-use assets       2       2         3       Subtract line 2 from line 1d.       3       4         4       Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).       5         6       7       7       7         7       8       6       7         8       Net value of non-exempt-use			2
5       Depreciation and depletion       5         6       Portion of operating expenses paid or incurred for production or collection of gross income of for management, conservation, or maintenance of property held for production of income (see instructions)       7         7       Other expenses (see instructions)       7         8       Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)       8         ection B - Minimum Asset Amount       (A) Prior Year       (B)         1       Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         a Average monthly cash balances       1b       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 (explain in detail in Part VI):       2         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).       5         6       Multiply line 5 by 0.035.       6       7         7       8       8       1         6       Total (add line 7 to line 5)       6 <td< td=""><td></td><td></td><td>3</td></td<>			3
A perturbative topological 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)     7     Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)     8     Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)     8     Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)     8     Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):     A verage monthly value of securities     1     Aggregate fair market value of other non-exempt-use assets (see instructions for short tax year or assets held for part of year):     A verage monthly cash balances     1     Aggregate fair in detail in Part VI):     Acerage monthly cash balances     1     C acquisition indebtedness applicable to non-exempt-use assets     2     C Acquisition indebtedness applicable to non-exempt-use assets     2     C Cast deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).     4     S Net value of non-exempt-use assets (subtract line 4 from line 3)     5     Multiply line 5 by 0.035.     Recoveries of prior-year distributions     7     Adjusted net income for prior year (from Section A, line 8, column A)     1     Adjusted net income for prior year (from Section A, line 8, column A)     Enter greater of line 2 or line 3.			4
income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 3 Other expenses (see instructions) 7 3 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 ection B – Minimum Asset Amount (A) Prior Year (C) 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 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 1 Aggregate fair market value of other non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly cash balances 1 b Average monthly cash balances 1 b C Fair market value of other non-exempt-use assets 1 c d Total (add lines 1a, 1b, and 1c) 1 d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 c 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Amount claimed for blockage or to line 6) 8 Minimum Asset Amount (add line 7 to line 6) 8 Minimum Asset Amount (add line 7 to line 6) 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 Compared to the form of the factor section C – Distributable Amount 2 Enter 0.85 of line 1. 2 Alter of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3. 4 Enter greater of line 2			5
8       Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)       8         ection B - Minimum Asset Amount       (A) Prior Year       (B)         1       Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a       (A) Prior Year       (B)         a Average monthly value of securities       1a       (A)       (B)       (C)       (C)         b Average monthly cash balances       1b       (C)       (C	· ·		6
ection B – Minimum Asset Amount       (A) Prior Year         1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1a         a Average monthly value of securities       1a         b Average monthly value of securities       1a         c Fair market value of other non-exempt-use assets       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 (explain in detail in Part VI):       2         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         ection C – Distributable Amount       2         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			7
1       Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):       1         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 (explain in detail in Part VI):       2         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         ection C - Distributable Amount       2       1         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			8
tax year or assets held for part of year):         a Average monthly value of securities         b Average monthly cash balances         c Fair market value of other non-exempt-use assets         d Total (add lines 1a, 1b, and 1c)         e Discount claimed for blockage or other factors (explain in detail in Part V):         2 Acquisition indebtedness applicable to non-exempt-use assets         4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).         5 Net value of non-exempt-use assets (subtract line 4 from line 3)         6 Multiply line 5 by 0.035.         6 Multiply line 5 by 0.035.         7 Recoveries of prior-year distributions         7 Recoveries of prior-year distributions         7 Recoveries of prior year (from Section A, line 8, column A)         1 Adjusted net income for prior year (from Section A, line 8, column A)         2 Enter 0.85 of line 1.         2 Enter 0.85 of line 1.         3 Minimum asset amount for prior year (from Section B, line 8, column A)         4 Enter greater of	(B) Current Year (optional)	(A) Prior Year	
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 (explain in detail in Part VI):       1d         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         ection C - Distributable Amount       2         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			
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 (explain in detail in Part VI):       1d         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         ection C - Distributable Amount       C         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			1a
d Total (add lines 1a, 1b, and 1c)       1d         e Discount claimed for blockage or other factors (explain in detail in Part VI):       2         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         ection C - Distributable Amount       CC         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			1b
e Discount claimed for blockage or other factors (explain in detail in Part VI):       2         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         ection C - Distributable Amount       C         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			1c
(explain in detail in Part VI):22Acquisition indebtedness applicable to non-exempt-use assets23Subtract line 2 from line 1d.34Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8ection C - Distributable AmountC1Adjusted net income for prior year (from Section A, line 8, column A)12Enter 0.85 of line 1.23Minimum asset amount for prior year (from Section B, line 8, column A)34Enter greater of line 2 or line 3.4			1d
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         ection C - Distributable Amount       C         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			
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         ection C - Distributable Amount       C         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			2
see instructions).45Net value of non-exempt-use assets (subtract line 4 from line 3)56Multiply line 5 by 0.035.67Recoveries of prior-year distributions78Minimum Asset Amount (add line 7 to line 6)8ection C - Distributable Amount81Adjusted net income for prior year (from Section A, line 8, column A)12Enter 0.85 of line 1.23Minimum asset amount for prior year (from Section B, line 8, column A)34Enter greater of line 2 or line 3.4			3
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         ection C - Distributable Amount       8         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			4
7       Recoveries of prior-year distributions       7         8       Minimum Asset Amount (add line 7 to line 6)       8         ection C - Distributable Amount       8         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
8       Minimum Asset Amount (add line 7 to line 6)       8         ection C - Distributable Amount       C         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			6
ection C – Distributable Amount       C         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			7
1Adjusted net income for prior year (from Section A, line 8, column A)12Enter 0.85 of line 1.23Minimum asset amount for prior year (from Section B, line 8, column A)34Enter greater of line 2 or line 3.4			8
2Enter 0.85 of line 1.23Minimum asset amount for prior year (from Section B, line 8, column A)34Enter greater of line 2 or line 3.4	Current Year		
3 Minimum asset amount for prior year (from Section B, line 8, column A)34 Enter greater of line 2 or line 3.4			1
4 Enter greater of line 2 or line 3.   4			2
			3
5 Income tax imposed in prior year     5			4
			5
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).       6			6

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990) 2022

	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organizat	ions (continued)	
ec	tion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pur	rposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organizations,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in <b>Part VI</b> )	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
	Distributions to attentive supported organizations to which the organization in <b>Part VI</b> ). See instructions.	on is responsive (provide d	8	
	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Sect	tion 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 – <i>explain in <b>Part VI</b></i> ). See instructions.			
3	Excess distributions carryover, if any, to 2022			
	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	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: \$			
а	Applied to underdistributions of prior years			
	Applied to 2022 distributable amount			
С	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, <i>explain in <b>Part VI</b></i> . See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
	Excess from 2022			
BAA			Sched	ule A (Form 990) 2022

nedule A (Form		BITTER	ROOT LAND	TRUST		31-1595967	Page <b>8</b>
art VI	<b>Supplement</b> III, line 12; Part B, lines 1 and 2 3a, and 3b; Part lines 2, 5, and 6	al Information. IV, Section A, lines ; Part IV, Section C, V, line 1; Part V, Se Also complete this	Provide the exp 1, 2, 3b, 3c, 4b, line 1; Part IV, 5 ection B, line 1e; part for any ad	lanations required b 4c, 5a, 6, 9a, 9b, 9 Section D, lines 2 al Part V, Section D, ditional information	by Part II, line 10; Par c, 11a, 11b, and 11c; nd 3; Part IV, Section lines 5, 6, and 8; and (See instructions)	t II, line 17a or 17b; Part Part IV, Section E, lines 1c, 2a, 2b, Part V, Section E,	
	lines 2, 5, and 6	. Also complete this	part for any ad	ditional information	. (See instructions.)		
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# Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service	
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# PUBLIC DISCLOSURE COPY Schedule of Contributors

OMB No. 1545-0047

2022

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

Name of the organization		Employer identification number
BITTER ROOT LAND	TRUST	31-1595967
Organization type (check of	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	tion
	527 political organization	0
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

X 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).

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

Schedule B (Form 990) (2022)	1 7 Page <b>2</b>
Name of organization	Employer identification number
BITTER ROOT LAND TRUST	31-1595967
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.	

1	าร.)
2 $3$ $10,000$ $10,000$ (a)       Name, address, and ZIP + 4       Total contributions       Type of contributions $3$ $3$ $3$ $9,000$ $10,000$ No.       Name, address, and ZIP + 4       Total contributions       Type of contributions $10,000$ $10,000$ $10,000$ $10,000$ No.       Name, address, and ZIP + 4       Total contributions       Type of contributions $4$ $2$ $10,000$ $10,000$ $10,000$ No.       Name, address, and ZIP + 4       Total contributions       Type of contributions $4$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,000$ $10,0000$	tion
2	2
$3$ $3$ $9_{1}$ 000.       Person Payroll Noncash $\$$ $9_{1}$ 000. $9_{2}$ 000.       Nameash contributions $(a)$ Name, address, and ZIP + 4       Total contributions       Type of contributions $4$ $10_{1}$ 000.       Person X       Payroll $4$ $10_{1}$ 000.       Person X       Payroll $b$ $10_{1}$ 000.       Noncash       Complete Part II for noncash contributions $(a)$ Name, address, and ZIP + 4       Total contributions       Type of contributions $5$ $0_{1}$ 000.       Name, address, and ZIP + 4       Total contributions       Type of contributions $5$ $0_{1}$ 01. $0_{1}$ 01. $0_{1}$ 01. $0_{1}$ 01. $0_{1}$ 01. $5$ $0_{1}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $5$ $0_{1}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $5$ $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01. $0_{2}$ 01.	r ns.)
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	tion
$4$ $4$ $10,000$ $\boxed{Person \\ Payroll \\ Noncash \\ (Complete Part II for noncash contributions]}$ (a) No.       Name, address, and ZIP + 4       Total contributions       Type of contributions] $5$ $6,019$ $\boxed{Complete Part II for noncash contributions]}$ $5$ $6,019$ $\boxed{Complete Part II for noncash contributions]}$	 
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	tion
No.     Name, address, and ZIP + 4     Total contributions     Type of contributions       5	K
5       6,019.       Payroll         \$       6,019.       Noncash         (Complete Part II for noncash contributions)	 r ns.)
	าร.)
(a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contributions	tion
6       Person       X         9       5,000.       Payroll         Noncash       Complete Part II for noncash contributions         BAA       TEEA0702L 07/22/22       Schedule B (Form 990) (2)	rs.)

Schedule B (Form 990) (2022)	2	7 Pag	e <b>2</b>
Name of organization	Employer identification numb	er	
BITTER ROOT LAND TRUST	31-1595967		

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (b) Name, address, and ZIP + 4 (c) Total contributions (a) No. Person 7\_ Payroll 31,562. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (c) Total contributions (a) No. Person 8 Payroll 14,934 Noncash (Complete Part II for noncash contributions.) (a) No. (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution Person Х 9\_ Payroll 24,250. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (a) No. (c) Total contributions Person Х 10 Payroll 12,318. Noncash (Complete Part II for noncash contributions.) (c) Total contributions (d) Type of contribution (a) No. (b) Name, address, and ZIP + 4 Person Х 11 Payroll ¢ 10,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution (a) No. Person Х 12 Payroll 6,706. Noncash (Complete Part II for noncash contributions.) BAA Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)	3 7 Page 2	2
Name of organization	Employer identification number	
BITTER ROOT LAND TRUST	31-1595967	

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u> _		\$ <u>5,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>14</u> _		\$ <u>7,685</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>15</u> _		\$ <u>105,000.</u>	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>16</u> _		\$ <u>5,103.</u>	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>17</u> _		\$25,155.	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>18</u> _		\$7 <u>,504</u> .	Person
	TEE 07021 07/22/22		abadula D (Farma 000) (2022)

Schedule B (Form 990) (2022)	4	7 Page <b>2</b>
Name of organization	Employer identification numb	ber
BITTER ROOT LAND TRUST	31-1595967	

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>19</u> _		\$ <u>5,000</u> .	Person X Payroll V Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>20</u> _		\$ <u>6,500.</u>	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>21</u> _		\$10,500.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>22</u> _		\$20,103.	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>23</u> _		\$ <u>5,000</u> .	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>24</u> _		\$ <u>9,572.</u>	Person
BAA	TEEA0702L 07/22/22	 s	Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)	5	7 Page <b>2</b>
Name of organization	Employer identification numb	ber
BITTER ROOT LAND TRUST	31-1595967	

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>25</u> _		\$ <u>30,715.</u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>26</u> _		\$10,200.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27_		\$6,356.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>28</u> _		\$7,000.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>29</u> _		\$ <u>10,000</u> .	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>30</u>		- -	Person X Payroll
		\$10,000.	Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)	6	7 Page <b>2</b>
Name of organization	Employer identification numb	er
BITTER ROOT LAND TRUST	31-1595967	

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (b) Name, address, and ZIP + 4 (c) Total contributions (a) No. Person Х <u>31</u> Payroll 14,277. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (c) Total contributions (a) No. Person Х <u>32</u> Payroll 15,000. Noncash (Complete Part II for noncash contributions.) (a) No. (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution Person Х 33 Payroll 15,203. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (a) No. (c) Total contributions Person Х 34 Payroll 20,650. Noncash (Complete Part II for noncash contributions.) (c) Total contributions (d) Type of contribution (a) No. (b) Name, address, and ZIP + 4 Person Х 35 Payroll 25,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution (a) No. Person Х 36 Payroll 43,000. Noncash (Complete Part II for noncash contributions.) BAA Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)	7	7 Page <b>2</b>
Name of organization	Employer identification nu	umber
BITTER ROOT LAND TRUST	31-1595967	

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>37</u> _		\$ <u>100,000</u> .	Person X Payroll V Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person        Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _\$	Person        Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>)</u>		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
BAA	TEEA0702L 07/22/22	]s	ichedule B (Form 990) (2022)

Schedule B (Form 990) (2022)	1	1	Page <b>3</b>
Name of organization	Employer identi	fication nu	umber
BITTER ROOT LAND TRUST	31-15959	967	

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if add	itional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	72_SH_OF_DE		R
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	100 SH_OF_PG	 \$14,934.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>18</u>	67_SH_OF_DXCM	\$ <u>7,504</u> .	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>24</u>	74_SHARES_OF_AAPL	  \$9,572.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
25	121 SH OF GD	**************************************	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	TEEA0703L 07/22/22		

	(Form 990) (2022)		<u>1 1 Page <b>4</b></u>
ame of organ BITTER	ization ROOT LAND TRUST		Employer identification number 31-1595967
	Exclusively religious, charitable, et	for the year from any one co ompleting Part III, enter the total o (Enter this information once. See	<b>tations described in section 501(c)(7), (8),</b> <b>ontributor.</b> Complete columns (a) through (e) and of <i>exclusively</i> religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addres	(e) Transfer of gift ss, 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, addres		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, addres		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, addres	s, and ZIP + 4	Relationship of transferor to transferee
AA		TEEA0704L 07/22/22	Schedule B (Form 990) (2022)

SCH	<b>HEDULE C</b>	Political Campaign and	Lobbying Activ	vities	OMB No. 1545-0047
(For	m 99 <b>0)</b>	For Organizations Exempt From Income Ta	x Under section 501(c)	and section 527	2022
Depar Intern	tment of the Treasury al Revenue Service	Complete if the organization is described be Go to <i>www.irs.gov/Form</i> 990 for instru	low. Attach to Form 9 uctions and the latest in	90 or Form 990-EZ. nformation.	Open to Public Inspection
• 5	Section 501(c)(3) o Section 501(c) (oth	ered "Yes," on Form 990, Part IV, line 3, or Form 990-E rganizations: Complete Parts I-A and B. Do not col er than section 501(c)(3)) organizations: Complete zations: Complete Part I-A only.	nplete Part I-C.		
• 5	Section 501(c)(3) or	ered "Yes," on Form 990, Part IV, line 4, or Form 990-E ganizations that have filed Form 5768 (election under s	ection 501(h)): Complete	Part II-A. Do not complete	
F	Part II-A.	rganizations that have NOT filed Form 5768 (electi			
(Pro	xy Tax) (See sepai	wered "Yes," on Form 990, Part IV, line 5 (Proxy Ta rate instructions), then (5), or (6) organizations: Complete Part III.	ix) (See separate instru	ctions) or Form 990-E2,	, Part V, line 35c
	of organization			Employer identifica	ation number
	TER ROOT LA			31-159596	
		e if the organization is exempt under sec	• •		zation.
	See instructions i	tion of the organization's direct and indirect politication of the organization's direct and indirect political			
2 3	Political campaig Volunteer hours f	n activity expenditures. See instructions		\$	
Par	t I-B Complet	e if the organization is exempt under see	ction 501(c)(3).		
1		of any excise tax incurred by the organization und		•	
2	Enter the amount	t of any excise tax incurred by organization manage	ers under section 4955.	\$	0.
3	If the organization	n incurred a section 4955 tax, did it file Form 4720	for this year?		····· Yes No
	Was a correction If "Yes," describe	made?			Yes No
		e if the organization is exempt under see	tion 501(c), excep	ot section 501(c)(3).	
1		directly expended by the filing organization for sec			
2	Enter the amount 527 exempt funct	of the filing organization's funds contributed to oth	er organizations for se	ction \$	
3	Total exempt fund	ction expenditures. Add lines 1 and 2. Enter here a	nd on Form 1120-POL.		
А		anization file Form 1120-POL for this year?			
5	Enter the names, organization mad amount of political	addresses and employer identification number (El e payments. For each organization listed, enter the contributions received that were promptly and directly or a political action committee (PAC). If additional	N) of all section 527 po amount paid from the delivered to a separate p	litical organizations to w filing organization's func olitical organization, such	hich the filing ds. Also enter the as a separate
	<b>(a)</b> Name	(b) Address	<b>(c)</b> EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)		×			
(2)					
(3)	0				
(4)					
(5)					
(6)					

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

Schedule C (Form 990) 2022

		ngs to an affiliated group (and nd share of excess lobbying		ated group member's nam	ie,
		ked box A and "limited contro			
(The term "e	Limits on Lobb xpenditures" me	ying Expenditures eans amounts paid or incur	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditure	•				
<b>b</b> Total lobbying expenditure					
c Total lobbying expenditure					
d Other exempt purpose exp					
e Total exempt purpose exp	enditures (add I	ines Ic and Id)			
f Lobbying nontaxable amore columns.			<u></u>		
If the amount on line 1e, colum	n (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,000	·	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$1,5		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$17,	,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000	aunt (antar OF 0	\$1,000,000.			
<ul> <li>g Grassroots nontaxable am</li> <li>h Subtract line 1g from line</li> </ul>	•	,			
		s, enter -0		-	
					Yes No
(Some o	organizations th	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst	Under Section 501(h) lection do not have to	complete all of the five	
(Some o	organizations th columns b	4-Year Averaging Period I at made a section 501(h) e	Under Section 501(h) lection do not have to tructions for lines 2a th	complete all of the five rough 2f.)	
(Some of Calendar year (or fiscal year beginning in)	organizations th columns b	4-Year Averaging Period l at made a section 501(h) e elow. See the separate inst	Under Section 501(h) lection do not have to tructions for lines 2a th	complete all of the five rough 2f.)	<b>Tes No</b>
Calendar year (or fiscal year	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) <b>2a</b> Lobbying nontaxable	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	complete all of the five rough 2f.)	
<ul> <li>Calendar year (or fiscal year beginning in)</li> <li>2a Lobbying nontaxable amount</li> <li>b Lobbying ceiling amount (150% of line 2a, column (e))</li> <li>c Total lobbying</li> </ul>	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	complete all of the five rough 2f.)	
<ul> <li>Calendar year (or fiscal year beginning in)</li> <li>2a Lobbying nontaxable amount</li> <li>b Lobbying ceiling amount (150% of line 2a, column (e))</li> <li>c Total lobbying expenditures</li> <li>d Grassroots nontaxable</li> </ul>	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying	organizations th columns b Lob	4-Year Averaging Period I at made a section 501(h) e elow. See the separate inst bying Expenditures During	Under Section 501(h) lection do not have to tructions for lines 2a th 4-Year Averaging Peri	(d) 2022	

	(a	)	(	b)
or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed lescription of the lobbying activity.	Yes	No	Am	ount
<ol> <li>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or refere through the use of:</li> <li>a Volunteers?</li> </ol>		v		0
<ul><li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1</li></ul>		X X		
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?				32,289
g Direct contact with legislators, their staffs, government officials, or a legislative body?		x		52,209
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?.		X		
j Other activities?				366
j Total. Add lines 1c through 1i.				32,655
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		52,055
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912.		Λ		
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912.		-		
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec		, or		
		, or		Yes No
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)(5)		1	Yes No
Part III-A Complete if the organization is exempt under section 501(c)(4), sec section 501(c)(6).	tion 501(c)(5)			Yes No
Part III-A       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).         1       Were substantially all (90% or more) dues received nondeductible by members?	tion 501(c)(5)		2	Yes No
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	s from the prior ye tion 501(c)(5), " OR (b) Part	ear?	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	s from the prior ye tion 501(c)(5), " OR (b) Part	ear?	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5) s from the prior ye tion 501(c)(5) " OR (b) Part f political	ear? or so III-A,	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5) s from the prior ye tion 501(c)(5) ," OR (b) Part f political	ear? or so III-A,	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>1 Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5) s from the prior ye tion 501(c)(5), " OR (b) Part i f political	ear? or so III-A, 1	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>1 Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5) s from the prior ye tion 501(c)(5), " OR (b) Part i f political	ear? or so III-A, 1 2a	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>1 Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5) s from the prior ye tion 501(c)(5) ," OR (b) Part f political dues	or so or so ill-A, 1 2a 2b	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>1 Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5)	ear? or se III-A, 1 2a 2b 2c	2 3	
<ul> <li>Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).</li> <li>1 Were substantially all (90% or more) dues received nondeductible by members?</li></ul>	tion 501(c)(5)	ear? or so III-A, 1 2a 2b 2c 3	2 3	

31-1595967

Page 3

Schedule C (Form 990) 2022

BITTER ROOT LAND TRUST

SC	SCHEDULE D Supplemental Financial Statements			OMB No. 1545-0047	
	rm 990)	Complete	e if the organization answered "Yes" on Form 9 5, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, o	90,	2022
Depa Interr	rtment of the Treasury al Revenue Service		Attach to Form 990. gov/Form990 for instructions and the latest info		Open to Public Inspection
Name	of the organization			Employe	er identification number
BT	TTER ROOT LA	ND TRUST		31-1	595967
Pa			nor Advised Funds or Other Similar F		
			"Yes" on Form 990, Part IV, line 6.		
			(a) Donor advised funds	<b>(b)</b> Funds ar	nd other accounts
1		end of year			
2		tributions to (during year).			
3 4		nts from (during year)			
4 5	Did the organizati	on inform all donors and dor	nor advisors in writing that the assets held in do	onor advised funds	
	are the organizati	on's property, subject to the	organization's exclusive legal control?		Yes No
6	for charitable pur impermissible pri	on inform all grantees, dono poses and not for the benefit vate benefit?	rs, and donor advisors in writing that grant fund of the donor or donor advisor, or for any other	by can be used only purpose conferring	Yes No
Pa		vation Easements.	"Yes" on Form 990, Part IV, line 7.		
1			the organization (check all that apply).	1	
		f land for public use (for examp		on of a historically in	mportant land area
	X Protection of	natural habitat	Preservati	on of a certified hist	oric structure
		of open space			
2	Complete lines 2a last day of the tax		neld a qualified conservation contribution in the form	m of a conservation ea	asement on the
				Held at t	he End of the Tax Year
i	a Total number of c	conservation easements			
	0	tricted by conservation ease		==/ = =	
			fied historic structure included in (a)		
	d Number of consei historic structure	vation easements included i listed in the National Register	n (c) acquired after July 25, 2006 and not on a	2 d	
3	Number of conserv		isferred, released, extinguished, or terminated by the		; the
А	tax year	where property subject to co	onservation easement is located	1	
5			garding the periodic monitoring, inspection, har	<u>ndling of violations</u>	
5	and enforcement	of the conservation easement	nts it holds?	· · · · · · · · · · · · · · · · · · ·	X Yes No
6	Staff and volunteer		inspecting, handling of violations, and enforcing co		during the year
7		es incurred in monitoring, inspe	ecting, handling of violations, and enforcing conserv	vation easements duri	ng the year
8	Does each conse	rvation easement reported or	n line 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i)	☐Yes ☐No
9	In Part XIII, descr	ribe how the organization rec	ports conservation easements in its revenue and to the organization's financial statements that d	d expense statement	L and balance sheet, and
Pa	rt III Organiz	ations Maintaining Co	Ilections of Art, Historical Treasures, "Yes" on Form 990, Part IV, line 8.		
1	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its revenue st ld for public exhibition, education, or research i I statements that describes these items.	atement and balance in furtherance of pub	e sheet works of art, lic service, provide in
	b If the organization historical treasures following amounts	n elected, as permitted under , or other similar assets held fo s relating to these items:	r FASB ASC 958, to report in its revenue stater or public exhibition, education, or research in furthe	ment and balance sh erance of public servic	eet works of art, e, provide the
	(i) Revenue inclu	uded on Form 990, Part VIII,	line 1		
	• •				
2			nistorical treasures, or other similar assets for finan ASC 958 relating to these items:		
	a Revenue included	l on Form 990, Part VIII, line	1		\$
	b Assets included in	n Form 990, Part X			\$ 92,800.

BAA	For Paperwork	Reduction	Act Notice,	see the	Instructions	for Form	99 <b>0</b> .

TEEA3301L 07/06/22 Sche

Schedule D (Form 990) 2022

chedule D (Form 990) 2022       BITTER ROOT LAND TRUST       31-1595967       Page 2         Part III       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)					<u> </u>	
<ul> <li>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):</li> </ul>						
<b>a</b> Public exhibition $\mathbf{d}$ Loan or exchange program						
b Scholarly research e Other						
c Preservation for future gener	ations					
<ul> <li>Provide a description of the organiz Part XIII.</li> </ul>			-			$^{\sim}$
5 During the year, did the organiza	tion solicit or receive	donations of art, his	storical treasures, or	other similar assets	XYes	No
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodian or oth	er intermediary for o	contributions or othe	r assets not included	Yes	No
<b>b</b> If "Yes," explain the arrangement in						
		Ū.		l l l l l l l l l l l l l l l l l l l	Amount	
<b>c</b> Beginning balance				1c		
<b>d</b> Additions during the year				1d		
e Distributions during the year				. 1e		
f Ending balance						
2 a Did the organization include an a					Yes	No
<b>b</b> If "Yes," explain the arrangemen	t in Part XIII. Check h	ere if the explanation	on has been provide	d on Part XIII	· · · · · · · · · · · L	
	0 11 (11			L IV 1: 10		
Part V Endowment Funds.	· · · · · ·				() =	
<b>1 a</b> Beginning of year balance	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	
<b>b</b> Contributions	80,195.	35,970			<u>11</u> ,	906.
	2,571.	42,279	. 23,058	•		
c Net investment earnings, gains, and losses	65,580.	1,946	. 451	. 1,475.	-	-870.
<b>d</b> Grants or scholarships	03,300.	1,540		1,475.		070.
• Other expenditures for facilities						
and programs				0.		
<b>f</b> Administrative expenses	291.			50.		
<b>g</b> End of year balance	148,055.	80,195			11,	.036.
2 Provide the estimated percentage			g, column (a)) held a	IS:		
a Board designated or quasi-endov		.00 <sup>8</sup>				
<b>b</b> Permanent endowment	00					
c Term endowment		2				
The percentages on lines 2a, 2b, ar						
<b>3a</b> Are there endowment funds not in t organization by:	he possession of the or	ganization that are h	eld and administered	for the	Yes	No
					3a(i)	X
(i) Unrelated organizations3a(i)X(ii) Related organizations3a(ii)X						
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?						
4 Describe in Part XIII the intended	d uses of the organiza	tion's endowment f	unds. SEE PARI	' XIII	I I	L
Part VI Land, Buildings, and						
Complete if the organizati	on answered "Yes" on	Form 990, Part IV, I	ine 11a. See Form 99	0, Part X, line 10.		
Description of property						
	1a Land         615,000.         615,000.					,000.
<b>b</b> Buildings						
c Leasehold improvements						
<b>d</b> Equipment						
<b>e</b> Other			65,155.	52,599.		,556.
Total. Add lines 1a through 1e. (Colum	n (d) must equal Fori	m 990, Part X, colui	mn (B), line 10c.)			<u>,556.</u>
BAA				Schedu	le D (Form 990	J) 2022

Part VII	Investments – Other Securities.	Form 000 Port IV line	N/A 11h See Form 000 Port V line 12	
(a) Descri	Complete if the organization answered "Yes" on ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	f-vear market value
	al derivatives			
	held equity interests.			
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
( )				-
	n (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments – Program Related. Complete if the organization answered "Yes" on	Form 990, Part IV, line	N/A 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)				
(10)				
<u>, ,</u>	n (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.	N/A		
	Complete if the organization answered "Yes" on	Form 990, Part IV, line scription	11d. See Form 990, Part X, line 15.	(b) Book value
(1)	(a) DC	scription		
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
Total. (Colu	umn (b) must equal Form 990, Part X, column (l	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 2	5
1.		iption of liability		(b) Book value
	al income taxes	•		
(2)				
(3)				
(4)				
(5)				
(7)				
(8)				
(9)				
(10)				
(11)				
	n (b) must equal Form 990, Part X, column (B) line 25.)			
2 Linhility for	uncertain tay positions. In Dart VIII, provide the tayt of the fe	othete to the organization is fi	noncial statements that reports the organization	lighility for uncortain

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.

Schedule D (Form 990) 2022 BITTER ROOT LAND TRUST		31-159596	57 Page <b>4</b>
Part XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue pe	r 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	1,412,773.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	<b>2a</b> -116,00	02.	
<b>b</b> Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2e	-116,002.
3 Subtract line 2e from line 1		3	1,528,775.
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	<b>4</b> a 4,48	37.	
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b	••••••	4c	4,487.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).			1,533,262.
Part XII Reconciliation of Expenses per Audited Financial Stateme	nts 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	1,034,630.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments	2 b		
c Other losses.	2c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d.		2e	
3 Subtract line 2e from line 1		3	1,034,630.
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.	<b>4</b> a 4,48	37.	
<b>b</b> Other (Describe in Part XIII.)		_	
c Add lines 4a and 4b.			4,487.
5 Total expenses. Add lines 3 and 4c. ( <i>This must equal Form 990, Part ), line 18.</i> ).		5	1,039,117.
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 II, LINE 9 - ORGANIZATION REPORTING OF CONSERVATION EASEMENTS

THE BITTER ROOT LAND TRUST EXPENSES IN THE CURRENT FISCAL YEAR ANY COSTS OF ACQUISTION OF CONSERVATION EASEMENTS. CONSERVATION EASEMENTS REPRESENT RIGHTS TO RESTRICT THE USE OF CERTAIN PROPERTIES. BY ACCEPTING AN EASEMENT CONTRIBUTION, THE BITTER ROOT LAND TRUST COMMITS TO PROTECTING THE EASEMENT RESTRICTIONS IN PERPETUITY. THE EASEMENTS HAVE NO MARKET VALUE AS THEY TECHNICALLY CANNOT BE SOLD BUT REMAIN ATTACHED AS A DEEDED RESTRICTION TO THE PROPERTY AND ACCORDINGLY ARE NOT INCLUDED AS ASSETS OF THE ORGANIZATION SINCE THE UNDRELYING PROPERTY TO WHICH THE EASEMENT IS BAA

# PART II, LINE 9 - ORGANIZATION REPORTING OF CONSERVATION EASEMENTS (CONTINUED)

ATTACHED IS NOT OWNED BY THE ORGANIZATION.

# PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

THE PURPOSE OF THE ENDOWMENT FUND IS TO SUSTAIN THE ORGANIZATION'S WORK INTO THE FUTURE ONCE THE FUND IS CAPITALIZED.

### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047 2022

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

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

Open to Public Inspection

Employer identification number

31-1595967

Department of the Treasury Internal Revenue Service Name of the organization

# BITTER ROOT LAND TRUST

Part	I	Types of Property						
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Meth noncash	(d) od of determ contribution	nining amounts
1 A	Art -	- Works of art						
<b>2</b> A	rt -	- Historical treasures						
<b>3</b> A	Art -	- Fractional interests						
<b>4</b> B	Booł	ks and publications						
		ning and household goods					1	
		and other vehicles						
<b>7</b> B	Boat	s and planes						
		lectual property				r		
		urities – Publicly traded	Х	5	94,287.			
		urities – Closely held stock		5	547207.			
		urities – Partnership, LLC, or trust interests .						
		urities – Miscellaneous.						
3 C	Qual	lified conservation contribution – pric structures			)			
		lified conservation contribution – Other						
		estate – Residential						
-		estate – Commercial						
-		estate – Other.						
-		ectibles.						
-		l inventory.						
		-						
		is and medical supplies						
		prical artifacts						
		ntific specimens						
		eological artifacts						
	Othe							
	Othe							
	Othe							
<b>8</b> C	Othe	er ()						
		ber of Forms 8283 received by the organization d nization completed Form 8283, Part V, Donee				29		
							Yes	No
		ng the year, did the organization receive by contri ust hold for at least 3 years from the date of t						
		exempt purposes for the entire holding period?					30 a	Х
<b>b</b> If	f "Ye	es," describe the arrangement in Part II.						
1 D	oes	s the organization have a gift acceptance polic	cy that requ	ires the review of any r	nonstandard contributio	ns?	31	Х
<b>2a</b> D	oes	s the organization hire or use third parties or r	related orga	nizations to solicit, prod	cess, or sell noncash			
С	ont	ributions? es," describe in Part II.	5	/ 1	,		32 a	X
<b>33</b> If	f the	e organization didn't report an amount in colu ribe in Part II.	mn (c) for a	type of property for wh	nich column (a) is chec	ked,		
4A F	or	Paperwork Reduction Act Notice, see the Ins	tructions fo	or Form 990.		Schedu	le M (Form	990) 2022

31-1595967 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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

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Open to Public Inspection

BITTER ROOT LAND TRUST

Employer identification number 31-1595967

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

ALL MEMBERS OF THE BOARD OF DIRECTORS ARE PROVIDED A COPY OF THE 990 PRIOR TO

SUBMISSION

# FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY. THE PROCEDURE FOR ADDRESSING CONFLICTS OF INTEREST IS PROVIDED IN THE POLICY AND ADHERED TO BY THE BOARD. INSIDERS SIGN THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT EXECUTIVE DIRECTOR'S SALARY IS DETERMINED ANNUALLY BY THE FULL BOARD USING STATE AND REGIONAL COMPARISON DATA AND RECOMMENDATIONS PROVIDED BY THE PERSONNEL COMMITTEE.

# FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION MAKES ITS 990, 1023, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

# FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELECTION PROCESS

THE FINANCE COMMITTEE OF THE BOARD HAS BEEN DESIGNATED BY THE BOARD TO PERFORM THE OVERSIGHT FUNCTION FOR THE SELECTION AND THE WORK PERFORMED BY THE INDEPENDENT ACCOUNTANTS.

# PART X, LINE 10(A)

OF THE \$680,155 TOTAL IN FIXED ASSETS, \$615,000 CONSISTS OF 160 ACRES OF LAND IN TEN PARCELS PURCHASED BY BRLT IN 2022 FOR THE EASTSIDE PROJECT. THIS LAND, WHICH HOSTS A WIDE VARIETY OF WILDLIFE AND IS PROMINENTLY VISIBLE FROM THE MID-VALLEY, WAS LIKELY TO BE CONVERTED TO OTHER USES PRIOR TO BRLT'S ACQUISITION. THIS ASSET IS HELD DIRECTLY FOR BRLT'S PROGRAMMATIC CONSERVATION PURPOSES.

## PART III, LINE 4A

CONSERVATION EASEMENT MONITORING, STEWARDSHIP, AND LAND MANAGEMENT/ENHANCEMENT:

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BITTER ROOT LAND TRUST	31-1595967

THE STEWARDSHIP PROGRAM MONITORED ALL 53 OF OUR CONSERVATION EASEMENTS AND FEE LAND HOLDINGS IN 2022. ADDITIONALLY, STEWARDSHIP STAFF WORKED WITH A LOCAL LANDOWNER TO RESTORE MONTANE GRASSLAND HABITATS ON THEIR CONSERVATION EASEMENT FOR IMPROVED WILDLIFE HABITAT.

#### CONSERVATION EDUCATION:

IN 2022, BITTER ROOT LAND TRUST CONTINUED BUILDING A LASTING CONSERVATION LEGACY IN THE BITTERROOT VALLEY BY PARTNERING WITH LOCAL FAMILIES AND OUR COMMUNITY TO CONSERVE IMPORTANT FARM AND RANCHLAND, WILDLIFE AND FISHERIES HABITAT, SCENIC OPEN SPACE, AND PUBLIC RECREATIONAL OPPORTUNITIES. THESE CONSERVATION VICTORIES PROTECTED OVER 2,028 ACRES FROM ILLINOIS BENCH TO CONNER AND PRESERVED A DIVERSE SUITE OF COMMUNITY AND NATURAL BENEFITS, INCLUDING PRIME AGRICULTURAL SOILS, SPAWNING GROUNDS FOR NATIVE TROUT, WINTER HABITAT FOR ELK AND MULE DEER, AND PUBLIC ACCESS TO THE BITTERROOT RIVER. BITTER ROOT LAND TRUST STAFF SECURED AND SPENT \$2,683,750 FROM PUBLIC AND PRIVATE SOURCES TO PURCHASE CONSERVATION EASEMENTS ON THREE OF THESE IMPORTANT PROPERTIES, WHICH PAYMENTS WERE MADE DIRECTLY TO THE LANDOWNERS DURING CLOSING AND DO NOT APPEAR AS REVENUE OR EXPENSES OF BRLT ON THIS 990. FURTHER, BRLT CONTINUED TO WORK CLOSELY WITH THE NATURAL RESOURCES CONSERVATION SERVICE'S REGIONAL CONSERVATION PARTNERSHIP PROGRAM (RCPP) TO IMPLEMENT A \$4.9 MILLION GRANT DESIGNED TO DIVERSIFY AGRICULTURAL CONSERVATION, SUPPORT BEGINNING FARMERS AND RANCHERS, AND INCREASE THE PACE OF FARM AND RANCH CONSERVATION EFFORTS IN THE BITTERROOT. THESE RCPP FUNDS WILL BE USED TO PURCHASE CONSERVATION EASEMENTS FROM WILLING LANDOWNERS THROUGH 2025, WITH THE FIRST PROJECTS SET TO CLOSE IN 2023. AS WE DO EVERY YEAR, STAFF MONITORED ALL 53 OF OUR CONSERVATION EASEMENTS IN 2023. BITTER ROOT LAND TRUST AGAIN INVESTED IN CONSERVATION EDUCATION PROGRAMS TO RAISE COMMUNITY AWARENESS - AMONG ADULTS AND STUDENTS - OF THE IMPORTANCE OF THE

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BITTERROOT VALLEY'S WATER, WILDLIFE, AND WORKING AGRICULTURAL LANDS. 2022 WAS THE FIRST YEAR AFTER THE COVID-19 PANDEMIC THAT THE BITTER ROOT LAND TRUST WAS ABLE TO RESUME ITS TRADITIONAL CONSERVATION EDUCATION ACTIVITIES. THE ANNUAL BARN DANCE WHICH CONNECTS COMMUNITY MEMBERS TO CONSERVED SPACES WAS HELD AT THE CONSERVED SUTHERLIN FARMS. THE BRLT STAFF PARTICIPATED IN FARMER'S MARKETS, A YOUTH EXPO, AND VARIOUS OTHER COMMUNITY EVENTS TO FURTHER CONSERVATION EDUCATIONAL OPPORTUNITIES FOR ALL AGES.

CONSERVATION PROJECT WORK:

FISHING AND RECREATIONAL ACCESS PROJECTS:

I. IN 2022, BITTER ROOT LAND TRUST CONTINUED THEIR PARTNERSHIP WITH MONTANA FISH, WILDLIFE AND PARKS, AND THE BITTERROOT NATIONAL FOREST TO COMPLETE RECREATION INFRASTRUCTURE PROJECTS AT C. BEN WHITE MEMORIAL FISHING ACCESS SITE AND TRAILHEAD LOCATED NEAR CONNER, MT. THROUGH THIS PARTNERSHIP, A ONE-MILE TRAIL THROUGH STATE-HELD LAND TO ACCESS THE BITTERROOT NATIONAL FOREST WAS COMPLETED.

II. BITTER ROOT LAND TRUST CONTINUED TO COORDINATE VOLUNTEER DAYS WITH OTHER NONPROFITS AND THE HAMILTON HIGH SCHOOL AT SKALKAHO BEND PARK TO PULL WEEDS AT THE PARK, IMPROVE SIGNAGE FOR NATIVE PLANTINGS, AND WATER THE NATIVE PLANTINGS THAT HAD TAKEN PLACE THE YEAR BEFORE.

COMPLETED CONSERVATION PROJECTS:

I. IN JUNE 2022, BITTER ROOT LAND TRUST COMPLETED THE HAYWIRE FLATS CONSERVATION EASEMENT, A 258-ACRE WORKING LANDS PROJECT LOCATED IN THE BURNT FORK. THE HAYWIRE

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FLATS PROPERTY WAS THE LAST PIECE OF THE PUZZLE THAT CREATED A 7,150-ACRE CONTIGUOUS LINK OF OPEN LAND PRESERVED BY NUMEROUS LANDOWNERS IN THE BURNT FORK NEIGHBORHOOD FOR WILDLIFE, AGRICULTURE, AND FUTURE GENERATIONS THAT BEGINS ON THE FOOTHILLS OF THE SAPPHIRE MOUNTAINS AND RUNS TO LOGAN LANE ON THE OUTSKIRTS OF STEVENSVILLE. FUNDING FOR THE HAYWIRE FLATS CONSERVATION EASEMENT WAS PROVIDED BY THE RAVALLI COUNTY OPEN LANDS BOND PROGRAM AND THE HEART OF THE ROCKIES KEEP IT CONNECTED PROGRAM.

II. IN JULY 2022, BITTER ROOT LAND TRUST COMPLETED THE 420-ACRE TRIPLE D RANCH CONSERVATION EASEMENT IN STEVENSVILLE, MT. THIS LAND CONSISTS MOSTLY OF HAY AND PASTURE GROUND THAT SUPPORTS THE FAMILY'S CATTLE OPERATION, SKYLINE ANGUS. THE RANCH ALSO SERVES AS A WILDLIFE CORRIDOR FOR A VARIETY OF DIFFERENT NATIVE SPECIES INCLUDING ELK AND DEER, ADDING TO MORE THAN 7,000 PROTECTED ACRES OF FAMILY FARMS, RANCHES, AND WILDLIFE HABITAT IN THE BURNT FORK NEIGHBORHOOD ALONE. FUNDING FOR TRIPLE D RANCH EASEMENT CAME FROM THE RAVALLI COUNTY OPEN LANDS BOND PROGRAM AND THE AGRICULTURAL LAND EASEMENT PROGRAM OF THE FARM BILL.

III. ALSO IN JULY OF 2022, BITTER ROOT LAND TRUST WORKED WITH LANDOWNERS TO CONSERVE TRIPLE D II; THE 1,260-ACRE RANCH COMPRISED OF OPEN-SPACE RANGELAND THAT INCLUDES SAGEBRUSH SHRUBLANDS AND MONTANE GRASSLANDS, ALONG WITH MILES OF EPHEMERAL CREEKS AND RIPARIAN HABITAT, ALL OF WHICH COLLECTIVELY SUPPORT LOCALLY IMPORTANT SPECIES SUCH AS ELK, MULE DEER, WHITE-TAILED DEER, AND FOX, AND "SPECIES OF CONCERN" SUCH AS BREWER'S SPARROW, EVENING GROSBEAK AND SAGE THRASHER. FUNDING FOR THIS PROJECT CAME FROM THE RAVALLI COUNTY OPEN LANDS BOND PROGRAM AND THE AGRICULTURAL LAND EASEMENT PROGRAM OF THE FARM BILL.

IV. AT THE END OF 2022, BITTER ROOT LAND TRUST WORKED WITH THE LANDOWNER TO COMPLETE

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THE DONATED SOUGH CONSERVATION EASEMENT. THE 75-ACRE PROPERTY, CONSERVED IN DECEMBER, CONSISTS OF MOSTLY DRY LAND. ITS RIPARIAN AREA AND ITS ASPEN, COTTONWOOD, AND BIRCH TREES SUPPORT VARIOUS ANIMAL VISITORS YEAR-ROUND, INCLUDING A WIDE VARIETY OF BIRD SPECIES, BOBCATS, MOUNTAIN LIONS, AND MULE DEER, AND OCCASIONAL VISITS FROM THE SKALKAHO HERD OF ROCKY MOUNTAIN BIGHORN SHEEP. THE LANDOWNER DONATED THE EASEMENT AND THERE WAS NO FUNDING FOR THE PROJECT.

IN ADDITION TO COMPLETING THESE CRITICAL CONSERVATION PROJECTS, BITTER ROOT LAND TRUST STAFF CONTINUED TO WORK WITH LOCAL AND FEDERAL PARTNERS TO FURTHER AGRICULTURAL CONSERVATION PROGRAMS IN THE BITTERROOT VALLEY THAT ENCOURAGE HIGH-VALUE FARMLAND CONSERVATION, AGRICULTURAL DIVERSIFICATION, AND GENERATIONAL SUCCESSION. WORKING WITH THE NATURAL RESOURCES CONSERVATION SERVICE, BITTER ROOT LAND TRUST APPLIED FOR FARM BILL FUNDING TO PURCHASE NEW CONSERVATION EASEMENTS IN 2023/2024. STAFF SAW AN INCREASED INTEREST FROM LANDOWNERS LOOKING TO PURSUE CONSERVATION OPTIONS AND MET WITH DOZENS OF INTERESTED LANDOWNERS. THOSE MEETINGS YIELDED ADDITIONAL CONSERVATION PROJECTS THAT WILL PROCEED IN 2023 AND BEYOND. AS A RESULT OF THIS PARTNERSHIP BETWEEN BITTER ROOT LAND TRUST, LOCAL LANDOWNERS, THE NRCS, AND THE RAVALLI COUNTY OPEN LANDS BOND PROGRAM MANY OF THESE LANDOWNERS WILL CHOOSE TO CONSERVE THEIR FAMILY LANDS.

CONSERVATION EASEMENT MONITORING AND ENFORCEMENT:

I. BITTER ROOT LAND TRUST REMAINED COMMITTED TO UPHOLDING LAND TRUST COMMISSION ACCREDITATION STANDARDS IN 2022. BITTER ROOT LAND TRUST STAFF MONITORED ALL 53 OF OUR EXISTING CONSERVATION EASEMENTS AND OUR FEE LAND HOLDINGS IN 2022, ENSURING THAT TERMS HAVE NOT BEEN VIOLATED AND THAT CONSERVATION OBJECTIVES REMAIN INTACT. WE FURTHER INVESTED TIME IN DEVELOPING AND MAINTAINING RELATIONSHIPS WITH EXISTING EASEMENT HOLDERS TO ENSURE THAT THE CONSERVATION OBJECTIVES AGREED TO BY LANDOWNERS AND THE LAND TRUST ARE BEING UPHELD.

II.LAND MANAGEMENT/ENHANCEMENT: BITTERROOT LAND TRUST AND MPG RANCH PARTNERED WITH A MULTIGENERATIONAL RANCHING FAMILY TO RESTORE MONTANE GRASSLAND HABITATS ON THE 467-ACRE WEBER RANCH CONSERVATION EASEMENT. 70 ACRES OF RETIRED CROP FIELDS WERE PLANTED WITH A DIVERSE COMMUNITY OF DRYLAND GRASSES AND WILDFLOWERS, EXTENDING A LOCAL MOSAIC OF ECOLOGICALLY IMPORTANT SAGEBRUSH AND GRASSLAND HABITATS. BIRDS, INSECTS, AND VEGETATION WILL ALL BE MONITORED IN THE RESTORATION AREA PRIOR TO AND AFTER THE PROJECT, IN COLLABORATION WITH LOCAL PARTNERS INCLUDING BITTERROOT AUDUBON SOCIETY, PROJECT NIGHT FLIGHT, NORTHERN ROCKIES RESEARCH AND EDUCATIONAL SERVICES, AND MONTANA STATE UNIVERSITY EXTENSION. BITTER ROOT LAND TRUST STAFF HAS CONTINUED TO LOOK FOR OTHER OPPORTUNITIES FOR VALUE-ADDED LAND MANAGEMENT GRANTS TO CONTINUE PROVIDING ONGOING SUPPORT TO BITTER ROOT LAND TRUST'S CONSERVATION EASEMENT DONORS AND THEIR NEIGHBORS.

## CONSERVATION EDUCATION

IN 2022, BITTER ROOT LAND TRUST WAS ABLE TO RETURN TO OUR TRADITIONAL CHANNELS AND MEANT TO CREATE MEANINGFUL, ON-THE-GROUND CONSERVATION EDUCATION. THE ANNUAL BARN DANCE RETURNED FOR THE FIRST TIME SINCE THE COVID-19 PANDEMIC. OVER 300 COMMUNITY MEMBERS GATHERED AT THE CONSERVED SUTHERLIN FARMS TO CELEBRATE CONSERVATION. THE STAFF ALSO PARTICIPATED IN THE LOCAL HAMILTON FARMERS MARKET AND PROVIDED CONSERVATION EDUCATION AT COMMUNITY EVENTS ACROSS THE BITTERROOT VALLEY, INCLUDING HAMILTON DOWNTOWN ASSOCIATION'S DALY DAYS, STEVENSVILLE'S CREAMERY PICNIC, DARBY'S LAST FRIDAY, AND PINT NIGHTS. AS AN ADDED EDUCATIONAL OPPORTUNITY, THE LAND TRUST

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PARTNERED WITH THE HAMILTON DOWNTOWN ASSOCIATION TO HANG BANNERS THROUGHOUT DOWNTOWN TO HELP GAIN AWARENESS FOR THE WORK OF THE LAND TRUST TO PRESERVE THE WATER, WILDLIFE, AND WORKING LANDS OF THE BITTERROOT VALLEY.

IN 2022, LAND TRUST STAFF FOCUSED ON PRINT AND ELECTRONIC MEDIA AS A MEANS OF EDUCATING AND CONNECTING THE COMMUNITY TO CONSERVATION THROUGHOUT 2022. NEWSLETTERS, POST-CARDS, AND EARNED MEDIA PROVIDED OPPORTUNITIES TO EDUCATE THE COMMUNITY ABOUT THE IMPORTANCE OF WATER, WILDLIFE, WORKING LANDS, AND COMMUNITY RECREATION. SIMILARLY, STAFF INCREASED THE FREQUENCY OF ELECTRONIC COMMUNICATIONS, INCLUDING SOCIAL MEDIA AND REGULAR INFORMATIONAL ELECTRONIC NEWS POSTS.

#### PART VII 7A-7D

IN 2022, BRLT DISPOSED OF A RIVERFRONT PARCEL OF LAND FOR PUBLIC RECREATIONAL ACCESS AND FISHERIES/HABITAT CONSERVATION ON THE EAST FORK OF THE BITTERROOT RIVER. THE 12-ACRE EAST FORK SULA FISHING ACCESS SITE WAS SOLD TO THE BITTERROOT NATIONAL FOREST AND IT WILL BE DEVELOPED IN FUTURE YEARS FOR PUBLIC FISHING, WALKING, AND WILDLIFE VIEWING. THIS ASSET WAS HELD DIRECTLY FOR OUR PROGRAMMATIC CONSERVATION AND RECREATIONAL PURPOSES. THE COST BASIS OF THIS LAND WAS \$210,000 AND THE SALE RESULTED IN \$158,650 OF GAIN TO BRLT. THE REMAINING \$12,840 CONSIST OF REALIZED GAINS FROM SECURITIES SOLD WITHIN BRLT'S INVESTMENT ACCOUNTS.

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