** PUBLIC DISCLOSURE COPY **

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

benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A f	or the	2011 calendar year, or tax year beginning $$ JUL 1 , 2011 $$ and ending	g JUN 30, 2012					
B	Check if pplicable	C Name of organization	D Employer identifi	cation number				
	Addres	RURAL DEVELOPMENT INSTITUTE						
	Name _change	Doing Business As LANDESA		158970				
	ireturn	Number and street (or P.O. box if mail is not delivered to street address) Room/s						
<u></u>	Termin ated Ameno	1424 FORTH AVE, DIE 300		528-5880 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
<u></u>	Ireturn	City or town, state or country, and ZIP + 4	G Gross receipts \$	8,971,579.				
L	tion pendin	BEATILE, WA JOIOI	H(a) Is this a group re					
	p	F Name and address of principal officer: TIM DANSTAD	for affiliates?	Yes X No				
		SAME AS C ABOVE	H(b) Are all affiliates inc	· ·				
		mpt status: X 501(c)(3) 501(c)()		list. (see instructions)				
		e: ► WWW.LANDESA.ORG	H(c) Group exemption					
			Year of formation: 1981	M State of legal domicile: WA				
He	art I	Summary	שאסטעפ שא פשפוו	σε τλητ				
9	1 1	Briefly describe the organization's mission or most significant activities: LANDESA RIGHTS FOR THE WORLD'S POOREST PEOPLE-THOSE	2 47 DILLION	CUTEFIV				
าลา				· · · · · · · · · · · · · · · · · · ·				
Activities & Governance	i .	Check this box if the organization discontinued its operations or disposed of	1	14				
Ő				13				
٥ŏ	1	Number of independent voting members of the governing body (Part VI, line 1b)		71				
ţ	1	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		31				
ξį	1	Total number of volunteers (estimate if necessary)		0.				
Ą	1	Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34		0.				
	D I	ver unrelated business taxable income from Form 930-1, line 34	Prior Year	Current Year				
	8 (Contributions and grants (Part VIII, line 1h)	6,874,785.	7,939,360.				
Revenue	1		1,201,932.	982,352.				
Š	I	Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	56,454.	23,967.				
ä		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-70,225.	-40,690.				
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,062,946.	8,904,989.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	143,944.	16,005.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.				
Ø	. جدا	Details of the commentation and the control of the	5,682,639.	7,185,093.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Fotal fundraising expenses (Part IX, column (D), line 25)	0.	0.				
e d	ь	Total fundraising expenses (Part IX, column (D), line 25) > 957, 505.						
ũ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,744,682.	3,889,876.				
	1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,571,265.	11,090,974.				
	i	Revenue less expenses. Subtract line 18 from line 12	-1,508,319.	-2,185,985.				
28			Beginning of Current Year	End of Year				
Net Assets or Fund Balances	20	Fotal assets (Part X, line 16)	9,099,407.	7,148,084.				
Sep.	21	Fotal liabilities (Part X, line 26)	672,564.	907,226.				
캺	22	Net assets or fund balances. Subtract line 21 from line 20	8,426,843.	6,240,858.				
		Signature Block						
		ties of perjury, I declare that I have examined this return, including accompanying schedules and st		y knowledge and belief, it is				
true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.	<i></i>				
		Jan Jan	100	(m) (0/3				
Sig	n	Signature of officer	Dafe 7					
Her	Here LINCOLN MILLER, TREASURER Type or print name and title							
		7	Date Check	II PTIN				
	.	Print/Type preparer's name Preparer's signature	1 01100h tu					
Paid		RAYMON G. HOLMDAHL	04/09/13 if self-employ	P00120599 91-0605875				
-	parer	Firm's name PETERSON SULLIVAN LLP, CPA'S	Firm's EIN	71-0003013				
use	Only	Firm's address 601 UNION ST, STE 2300 SEATTLE, WA 98101-2345	Phone no. 2	063827777				
		SEATINE, WA JOINT-2040	frioleilo. Z	X Van No				

	930 (2011) ROKAL DIVIDOLIMINI INDITIOLI
Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: LANDESA WORKS TO SECURE LAND RIGHTS FOR THE WORLD'S POOREST
	PEOPLE-THOSE 2.47 BILLION CHIEFLY RURAL PEOPLE WHO LIVE ON LESS THAN
	TWO DOLLARS A DAY. LANDESA PARTNERS WITH DEVELOPING COUNTRY
	GOVERNMENTS TO DESIGN AND IMPLEMENT LAWS, POLICIES, AND PROGRAMS
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 2,803,773. including grants of \$) (Revenue \$)
	LANDESA PARTNERS WITH THE NATIONAL AND STATE GOVERNMENTS IN INDIA TO
	DESIGN AND IMPLEMENT LAWS AND PROGRAMS TO HELP INDIA'S 15 MILLION POOR,
	RURAL, LANDLESS FAMILIES OBTAIN OWNERSHIP OF A SMALL PLOT OF LAND AND
	THE OPPORTUNITY TO BUILD A BETTER FUTURE. LANDESA ALSO WORKS TO HELP
	THE TENS OF MILLIONS OF INDIANS, SUCH AS MANY OF INDIA'S TRIBAL
	COMMUNITIES, WHO DO NOT HAVE SECURE RIGHTS TO THE LAND THEY CURRENTLY
	FARM.
4b	(Code:) (Expenses \$ 1,271,289 • including grants of \$) (Revenue \$ 29,478 •)
	LANDESA WORKS TO ENSURE THAT WOMEN GAIN EQUAL ACCESS TO ONE OF THE MOST
	IMPORTANT ASSETS TO AGRICULTURAL HOUSEHOLDS: LAND. BECAUSE SECURE
	RIGHTS TO LAND FOR WOMEN CAN INCREASE AGRICULTURAL PRODUCTIVITY AND
	CONFER OTHER HOUSEHOLD BENEFITS, LANDESA WORKS TO ENSURE THAT WOMEN
	GAIN INCREASED CONTROL OVER THE LAND THEY TILL. WE DO THIS THROUGH
	INTENSIVE PARTNERSHIPS WITH GOVERNMENTS, GRASSROOTS WORK IN THE
	COMMUNITY, AND PARTNERSHIP WITH OTHER ORGANIZATIONS WORKING ON
	DEVELOPMENT ISSUES.
	1 220 000
4c	(Code:) (Expenses \$ 1,239,909. including grants of \$) (Revenue \$ 75,712.) LANDESA'S RECOMMENDATIONS HAVE BEEN INCORPORATED INTO A SERIES OF
	HISTORIC POLICY AND LEGISLATIVE CHANGES OVER THE LAST TWO DECADES THAT
	HAVE PROVIDED CHINA'S 200 MILLION FARMING FAMILIES GREATER CONFIDENCE
	IN THEIR SECURITY. LANDESA CONTINUES TO WORK IN THE INTERESTS OF THE
	RURAL POOR AND SERVES AS A VALUED ADVISOR TO KEY GOVERNMENT AGENCIES TO
	STRENGTHEN FARMERS' LAND RIGHTS THROUGH DOCUMENTATION AND REGISTRATION,
	IMPROVE FARMER'S COMPENSATION AND DUE PROCESS RIGHTS IN TAKINGS, AND
	INCREASE FARMERS' AWARENESS OF THEIR LAND RIGHTS TO MAKE THEIR 30-YEAR
	TENURE AGREEMENTS MORE MEANINGFUL.
	THISTO HOLDHINITO HOLD HIMMING ON .
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 3,387,453 • including grants of \$) (Revenue \$ 877,162 •)
	Total program service expenses ► 8 , 702 , 424 .

132002 02-09-12

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			37
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			Х
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	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, XII, and XIII is optional	12b		<u> X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	77	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	441	х	
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	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? If "Yes," complete Schedule G, Part I	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? If "Yes," complete Schedule G, Part II	18	X	
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
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		_	$\alpha \alpha $	

Form **990** (2011)

Form 990 (2011) RURAL DEVELOPMENT Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		v	
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		Х
h	Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	^	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
24	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
52	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2011)

Form 990 (2011) RURAL DEVELOPMENT INSTITUTE Part V Statements Regarding Other IRS Filings and Tax Compliance

a Initiation fees and capital contributions included on Part VIII, line 12		Check if Schedule O contains a response to any question in this Part V					
b Enter the number of Forms W.2G included in line 1s. Enter of it not applicable 10 10 10 10 10 10 10 1						Yes	No
be first the number of Forms W26 included in line 1a. Enter o-Ir not applicable 10 0 0 0 0 0 0 0 0	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	20			
c Dit the organization comply with backup withholding rules for reportable gamming (gambling) winnings to pizze whenes? 2a Etter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X X b If "Yes," has it filed a Form 990 T for the year? If "No," provide an explanation in Schedule O 3b If Yes, and during the calendar year, did the organization have an interest n, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sentiness of the properties of the provide an explanation in Schedule O 5b If "Yes," an interest the name of the foreign country," by INDIA 5c In Yes, 1 the file of the origin properties of Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. 5c If Yes, 1 to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes, 1 to line 5a or 5b, did the organization file Form 88861? 5c If Yes, 1 to line 5a or 5b, did the organization file Form 88861? 5c If Yes, 1 to line 5a or 5b, did the organization file Form 88861? 5c If Yes, 1 to line 6a or 5b, did the organization file Form 88861? 5c If Yes, 1 to line 6a or 5b, did the organization file Form 88861? 5c If Yes, 1 to line 6a or 5b, did the organization file Form 88861? 5c If Yes, 1 to line organization have a manual gross receives that are normally greater than \$100,000, and did the organization solicit any contributions under section 170(c). 5d If Yes, 1 to line organization receive a formal gross receives that are normally greater than \$100,000, and did the organization solicit any organization f	b		1b	0			
22 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this required rederal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-fee (see instructions) 30 bit the organization have unreated business gross income of \$1,000 or more during the year? 31 bit 1 feets and curing the calendar year, did the organization have an interest in, or a singular to orbit authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? 32 bit 1 feets, and a foreign country (such as a bank account, securities account, or other financial accounts? 33 bit 1 feets, and a foreign country (such as a bank account, securities account, or other financial accounts? 34 bit 1 feets, and a foreign country (such as a bank account, securities account, or other financial accounts? 35 bit 1 feets, and a foreign country (such as a bank account, securities account, or other financial accounts? 36 bit 1 feets, and a feet financial accounts? 37 bit 1 feets, and a feet financial accounts? 38 bit 1 feets, and a feet financial accounts? 39 bit 1 feets, and a feet financial accounts? 30 bit any taxable party nority the organization that it was or is a party to a prohibited tax shelter transaction? 39 bit 1 feets, and a feet financial accounts? 30 bit any contributions that were not tax deductible? 30 bit financial accounts were not tax deductible? 31 bit 1 feets, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 30 bit financial accounts were not tax deductible? 31 bit 1 feets, did the organization in ceeve a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 31 bit 1 feets, did the organization received a payment in excess of \$75 made party as a contribution or party fr	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			
2a Enter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements. Bed for the calendar year ending with or within the year covered by this return Note. If the sum of lines 1a and 2 a is greater than 250, you may be required to e-file (see instructions) 3a		(gambling) winnings to prize winners?			1c	Х	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3	2a						
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a IV the organization have unrelated business gross none of \$1,000 or more during the year? 3b If "Yes," has if filed a Form 990-17 or this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; or the financial account in a foreign country. ▶ INDIA 5b If "Yes," enter the name of the foreign country. ▶ INDIA 5se instructions for filing requirements for Form TD F 90.21, Report of Foreign Bank and Financial accounts. 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction? 5b IV any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," did 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? 5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," did the organization only the donor of the value of the goods or services provided? 6d If "Yes," did the organization notify the donor of the value of the goods or services provided? 6d If "Yes," did the organization only the donor of the value of the goods or services provided? 7d If "Yes," did the organization only the donor of the value of the goods or services provided? 7d If bid the organization received any funds, directly or indirectly, no paymentimes on		filed for the calendar year ending with or within the year covered by this return	2a	71			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the celendar 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)? 5b if Yes, 'res in the filed a Form 990 for for this year? If 'No.' "provide an explanation in Schedule O 5b if Yes, 'res there the name of the foreign country." INDITA 5c enstructions for filing requirements for Form TD F 90.221, Report of Foreign Bank and Financial accounts. 5c Was the organization approach to a prohibited tax shelter transaction? 5c If 'Yes,' to line 5a or 5b, did the organization that if was or is a party to a prohibited tax shelter transaction? 5c If 'Yes,' to line 5a or 5b, did the organization file Form 8886 fr? 6c Obes 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? 6c Obes the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Oblide the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 6c Oblide organization state were not tax deductible? 6d If 'Yes,' ridid the organization include with every solicitation and party for goods and services provided to the payor? 6d If 'Yes,' ridid the organization notify the donor of the value of the goods or services provided? 6d If 'Yes,' ridid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282? ified during the year 6d If 'Yes,' ridid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7d If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7d If t	b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ทร?		2b	Х	
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g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11c 12c Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13a 14a 15b 15c 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 in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves on hand 13c 14a Did the org	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	t?	7e		
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Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Tross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Ith Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Is the organization licensed to issue qualified health plans in more than one state? Note. 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 c Enter the amount of reserves on hand Itab Did the organization receive any payments for indoor tanning services during the tax year? Itab If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	g	If the organization received a contribution of qualified intellectual property, did the organization file Formation (in the organization of the organization) and the organization of the	orm 88	99 as required?	7g		
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					11-		¥
							- 22
	U	ii res, rias it lileu a Form rzo to report triese payments? ii rvo, provide an explanation in Schedult	· · · · · · · · · · · · · · · · · · ·			990 (2011)

X

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

Check if Schedule O contains a response to any question in this Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	4		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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?	7a		Х
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b		12b	X	
С			l	
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Х	77
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	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 organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed WA		.1-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only	availab	не	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request			
40	· · ·	nd 4: :	no!=!	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, a	na tinar	icial	
20	statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation: •		
20	STEVE VITALICH - 206-528-5880	่ ฉเเ∪(). ▶	_	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	Ĭ		((C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	not ch , unles cer an	Posi neck ss pei	ition more rson i	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ROY PROSTERMAN										
FOUNDER & CHAIRMAN	16.00	Х		X				5,150.	0.	0.
(2) JAMES PIGOTT DIRECTOR	2.00	x						0.	0.	0.
(3) MATT BANNICK		┢▔	Н							
DIRECTOR	2.00	x						0.	0.	0.
(4) DAVID BARCLAY										
DIRECTOR	2.00	X						0.	0.	0.
(5) DOUGLAS BEIGHLE										
DIRECTOR	2.00	Х						0.	0.	0.
(6) CHRISTINE GRUMM										
DIRECTOR	2.00	Х						0.	0.	0.
(7) VIKESH MAHENDROO								_	_	_
DIRECTOR	2.00	Х						0.	0.	0.
(8) HENG-PIN KIANG										
DIRECTOR	2.00	Х						0.	0.	0.
(9) GEORGE MARTIN, JR		l								
DIRECTOR	2.00	Х						0.	0.	0.
(10) MIKE MCGAVICK	F 00	,,		37						
BOARD CHAIR	5.00	Х		Х				0.	0.	0.
(11) SANDRA E. TAYLOR	2 00	x						0.	0.	0.
DIRECTOR (12) DOUGLAS OGDEN	2.00	^	Н					0.	0.	0.
DIRECTOR	2.00	X						0.	0.	0.
(13) JILL RUCKELSHAUS	2.00	122							0.	0.
DIRECTOR	2.00	x						0.	0.	0.
(14) LAWRENCE WILKINSON										
DIRECTOR	2.00	X						0.	0.	0.
(15) TIM HANSTAD										
CEO & PRESIDENT	53.00			Х				197,873.	0.	26,261.
(16) LINCOLN MILLER			П							
TREASURER	30.00	L		X			L	133,899.	0.	23,441.
(17) SUSAN SCHLATTER										
SECRETARY	46.00			Х				67,688.	0.	9,031.
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Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)			
(A) (B) (C) (D) (E)											(F)	
Name and title	Average	(do	Position (do not check more than one			than	one	Reportable	Reportable	Est	timate	d
	hours per	box	box, unless person is both officer and a director/trust		h an	compensation	compensation	am	ount o	of		
	week	\vdash	cer ar	na a a	irecto	or/trus	itee)	from	from related	(other	
	(describe	ector						the	organizations		pensat	
	hours for related	or director	e e			ated		organization	(W-2/1099-MISC)		om the	
	organizations	重	truste		ao	bens		(W-2/1099-MISC)			anizati	
	in Schedule	ual tri	ional		ploye	t com					d relate Inizatio	
	O)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	orme			Uiga	IIIZatic	лю
(18) RICHARD WARDELL		_	_									
CHIEF OPERATING OFFICER	40.00			Х				0.	0.			0.
(19) STEVE VITALICH												
CONTROLLER	40.00			X				27,092.	0.	2	2,92	29.
(20) ROBERT MITCHELL												
SENIOR DIRECTOR OF PROGRAM QUALITY A	40.00					Х		131,382.	0.	24	4,1	15.
(21) DAVID BLEDSOE	40.00					l		100 550		١.,	1 0	4 -
SENIOR DIRECTOR PROGRAM PARTNERSHIPS	40.00					Х		128,752.	0.	1.	1,04	15.
(22) AMY LOW	45.00					х		120 240	0.	ر ا	1 1·	1 /
CHIEF ADVOCACY AND ENGAGEMENT OFFICE (23) RENEE GIOVARELLI	45.00					^		128,248.	0.	24	4,13	L 4 •
EXECUTIVE DIRECTOR, LANDESA CENTER F	44.00					Х		133,144.	0.	1 1 6	6,53	36
(24) R. SCOTT LEWIS	11.00							133,144.	•	`	<i>5</i> , 5 .	.
CHIEF DEVELOPMENT OFFICER	47.00					х		134,108.	0.	24	4,24	45.
								,			<u> </u>	
						<u> </u>		1 007 226		1.0		1 17
1b Sub-total								1,087,336.	0.	16.	1,71	
c Total from continuation sheets to Part V								1,087,336.	0.	10	1,71	0.
d Total (add lines 1b and 1c)									<u> </u>	10-	L , / .	<u> </u>
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed al	oove	e) wh	no re	eceived more than \$100	0,000 of reportable			15
compensation from the organization											Yes	No
3 Did the organization list any former officer.	director or tri	ısta	s ke	av er	nnlo	.VAA	or l	highest compensated e	mnlovee on			-110
 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 								3		Х		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization												
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual							4	х				
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services												
rendered to the organization? If "Yes," com	•				-			_		5		Х
0 " 0 1 1 1 10 1 1												

Section B. Independent Contractors

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

the organization. Report compensation for the edichad year charing with or with	in the organization of tax year.	
(A) Name and business address	(B) Description of services	(C) Compensation
PUSH DESIGN 506 2ND AVE. SUITE 600, SEATTLE, WA 98104	WEB DESIGN	113,050.
APCO WORLDWIDE INC., 700 12TH ST. N.W.	WED DESIGN	113,030.
SUITE 800, WASHINGTON, DC 20005 ISOUTSOURCE, 19119 NORTH CREEK PKWY. SUITE	PR CONSULTING	110,289.
200, BOTHELL, WA 98011	IT CONSULTING	104,762.

Total number of independent contractors (including but not limited to those listed above) who received more than

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\$100,000 of compensation from the organization

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines Total. Add lines 1a-1f	1c 1d 1d 1e 1s, and ve 1f 7 ,					
Program Service Revenue	b c d e	CONTRACT REVENU		Business Code 900099	982,352.	982,352.		
		All other program service reverse Total. Add lines 2a-2f	982,352.					
Other Revenue	3	Investment income (including other similar amounts) Income from investment of tax	dividends, inter	est, and	23,967.			23,967.
	b c	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
	d 8 a	Sain or (loss) Net gain or (loss) Gross income from fundraisin including \$ 235,2 contributions reported on line Part IV, line 18	g events (not 260 • of 1c). See	25,900.				
	с 9 а	Less: direct expenses Net income or (loss) from func Gross income from gaming ac Part IV, line 19 Less: direct expenses	draising events ctivities. See a	>	-40,690.			-40,690.
	c 10 a b	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	ning activities returns a	>				
Į	С	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
		All other revenue		>	8,904,989.	982,352.	0.	-16,723.
132009 01-23-		211			, , , , , , , ,	,		Form 990 (2011)

Part IX | Statement of Functional Expenses

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

complete columns (B), (C), and (D).										
	Check if Schedule O contains a respor	nse to any question in th								
	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. (A) Total expenses Program service expenses (B) Program service expenses Management and general expenses expenses expenses									
1	Grants and other assistance to governments and		·		·					
	organizations in the United States. See Part IV, line 21									
2	Grants and other assistance to individuals in									
	the United States. See Part IV, line 22									
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16	16,005.	16,005.							
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	564,233.	403,024.	138,669.	22,540.					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	5,295,759.	3,808,131.	899,489.	588,139.					
8	Pension plan accruals and contributions (include		_							
	section 401(k) and section 403(b) employer contributions)	120,102.	78,073. 590,238.	25,316.	16,713. 86,713.					
9	Other employee benefits	814,854.	590,238.	137,903.	86,713.					
10	Payroll taxes	390,145.	255,973.	84,056.	50,116.					
11	Fees for services (non-employees):									
а	Management									
b	Legal	1,405.	1,405. 37,513.							
С	Accounting	44,950.	37,513.	4,655.	2,782.					
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other	1,276,519.	1,235,009.	7,719.	33,791.					
12	Advertising and promotion	34,156.	30,912.		3,244.					
13	Office expenses	234,940.	201,240.	12,575.	21,125.					
14	Information technology	209,020.	167,648.	21,634.	19,738.					
15	Royalties									
16	Occupancy	657,787.	557,241.	62,934.	37,612.					
17	Travel	974,105.	932,788.	8,637.	32,680.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	179,578.	170,001.	1,436.	8,141.					
20	Interest	1,594.	1,593.	1.						
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	64,630.	39,960.	9,955.	14,715.					
23	Insurance	6,952.	5,612.	839.	501.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	RECRUITMENT	66,899.	52,619.	8,938.	5,342.					
b	MISC.	54,079.	37,494.	4,239.	12,346.					
С	TAXES	53,337.	50,102.	2,025.	1,210.					
d	FOREIGN EXCHANGE	29,925.	29,843.	25.	57.					
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	11,090,974.	8,702,424.	1,431,045.	957,505.					
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)									
13201	0 01-23-12				Form 990 (2011)					

10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a J 346, 868. b Less: accumulated depreciation 10b J 71, 813. 191, 983. 10c J 75, 055. 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 9,099,407. 16 7,148,084.	Pa	rt X	Balance Sheet					
2 Savings and temporary cash investments						Beginning of year		End of year
2 Savings and temporary cash investments		1	Cash - non-interest-bearing				1	3,135,839.
A Accounts receivable, net Seceivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L S S Schedule L S S Schedule L S S S S S S S S S		2					2	1,512,682.
A Accounts receivable, net 668 , 193		3	Pledges and grants receivable, net			2,326,106.	3	1,745,172.
S Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L S Receivables from other disqualified persons (as defined under section 4958(r)(1)), persons described in section 4958(r)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employers and sponsoring organizations of section 501(c)(9) voluntary employers and sponsoring organizations (see instructions) 6 T Notes and loans receivable, net T T T T T T T T T		4			668,193.	4	309,485.	
of Schedule L Receivables from other disqualified persons (as defined under section 4959()(1), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employers beneficiary organizations (see instructions) 7 Notes and leans receivable, net Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis: Complete Part VI of Schedule D basis: Complete Part VI of Schedule D It investments - publicly traded securities 11 Investments - publicly traded securities 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Total assets. Add alines 1 through 15 (must equal line 34) 19 Deferred revenue 10 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrov or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Escrov or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Escrov or custodial cancount liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 25 Companizations that follow SFAS 117, check here ► XI and complete lines 27 through 29, and lines 3		5						
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11 Investments - publicly traded securities 11 12 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 16 16 17 16 17 16 17 16 17 18 17 18 18 18 19 19 19 19 19		b			171,813.	191,983.	10c	175,055.
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Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here And complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 8,426,843.33 6,240,858.	abi							
23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Corganizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Unreliabilities (including federal income tax, payables to related third parties 25 Depart X of Schedule D 26 Total liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Depart X of Schedule D 27 Depart X of Schedule D 28 Depart X of Schedule D 29 Depart X of Schedule D 20 Depart X of Schedule D 20 Depart X of Schedule D 21 Depart X of Schedule D 22 Depart X of Schedule D 23 Depart X of Schedule D 24 Depart X of Schedule D 25 Depart X of Schedule D 25 Depart X of Schedule D 26 Depart X of Schedule D 27 Depart X of Schedule D 28 Depart X of Schedule D 29 Depart X of Schedule D 20 Depart X of Schedule D 20 Depart X of Schedule D 20 Depart X of Schedule D 21 Depart X of Schedule D 22 Depart X of Schedule D 24 Depart X of Schedule D 25 Depart X of Schedule D 26 Depart X of Schedule D 27 Depart X of Schedule D 28 Depart X of Schedule D 29 Depart X of Schedule D 20 Depart X of Schedule D 20 Depart X of Schedule D 20 Depart X of Schedule D 21 Depart X of Schedule D 22 Depart X of Schedule D 23 Depart	Ξ		- f O - l l l l				22	
24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 2 , 396,609 • 27 1,849,982 • 6,030,234 • 28 4,390,876 • 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 8 , 426, 843 • 33 6, 240, 858 •		23					23	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 2		24					24	
Schedule D 25 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here		25						
Schedule D 25 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here			parties, and other liabilities not included on lines	17-24).	. Complete Part X of			
Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets			Schedule D				25	
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations		26				672,564.	26	907,226.
Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Organizations that do not follow SFAS 117, check here Orga			Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
133 Total net assets or fund palances	es		lines 27 through 29, and lines 33 and 34.					
133 Total net assets or fund palances	S E	27	Unrestricted net assets			2,396,609.	27	1,849,982.
133 Total net assets or fund palances	3ali	28	Temporarily restricted net assets			6,030,234.	28	4,390,876.
133 Total net assets or fund palances	Þ	29					29	
133 Total net assets or fund palances	Ē		Organizations that do not follow SFAS 117, c	heck he	ere 🕨 📖 and			
133 Total net assets or fund palances	ō		complete lines 30 through 34.					
133 Total net assets or fund palances	ets	30	Capital stock or trust principal, or current funds				30	
133 Total net assets or fund palances	Ass	31	Paid-in or capital surplus, or land, building, or ed	quipmen	it fund		31	
133 Total net assets or fund palances	et	32	Retained earnings, endowment, accumulated in	come, c	or other funds		32	
34 Total liabilities and net assets/fund balances 9,099,407. 34 7,148,084.	Z	33	Total net assets or fund balances			8,426,843.		
		34				9,099,407.	34	7,148,084.

Form **990** (2011)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		04,9	
2	2 Total expenses (must equal Part IX, column (A), line 25)				
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,1		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,4	26,8	43.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	6,2	40,8	58.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				LX
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?					X
b	b Were the organization's financial statements audited by an independent accountant?				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		20	; X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3	1	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		31		
			For	ո 990	(2011)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

RURAL DEVELOPMENT INSTITUTE

Employer identification number 91-1158970

Pai	t I	Reason 1	for Public Char	ity Status (All organiz	ations mu	st complet	te this parl	:.) See inst	tructions.				
The c	organi	ization is not a	a private foundation	because it is: (For lines 1	I through	11, check	only one b	ox.)					
1		A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3				tal service organization of		in section	170(b)(1)	A)(iii).					
4		•	•	operated in conjunction					(b)(1)(A)(ii	i). Enter t	he hospita	's nam	ne.
		city, and state				•				•			,
5		-		benefit of a college or ur	niversity ov	wned or or	perated by	a governr	mental uni	t describ	ed in		
		-	(b)(1)(A)(iv). (Comple	-			, ,	a govern					
6				ent or governmental unit	t doscribo	d in coctio	n 170/h)/1	VAVA					
	X			eives a substantial part					r from the	gonoral	nublic dosc	ribodi	in
′		-	b)(1)(A)(vi). (Comple	•	oi its supp	ort nom a	governine	iliai uliit o	n nom me	general	public desc	inbeu	
8				ection 170(b)(1)(A)(vi). ((Complete	Dort II \							
9				eives: (1) more than 33 1			rom contri	hutione m	namharehi	n foos ar	nd aross ro	cainte	from
9				nctions - subject to certa									
				axable income (less sect									
			509(a)(2). (Complete		.ioii o i i ta	x) iroiri bu	311103303 6	loquilou b	y tric orga	inzation	arter durie (JO, 131	0.
10				perated exclusively to te	st for nubl	ic safety S	See sectio	n 509(a)(4	1)				
11		-	-	•	=	-			-	v out the	nurnoses (of one	or
		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that											
	describes the type of supporting organization and complete lines 11e through 11h.												
	a Type I b Type II c Type III - Other												
е		• •		at the organization is not	• •		-	-	r more disc	gualified	, .		ın
				han one or more publicly									
f				ten determination from t						, (-)(-)		· (=)(=):	
			rganization, check th										
g				organization accepted ar					owina pers	sons?			•
3				irectly controls, either al								Yes	No
				upported organization?									
				n described in (i) above?									
				person described in (i) of									
h				about the supported org									
			3	,		()							
/i)	Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) ls	the	(vii) Ar	nount o	of
(')		inization	(11) = 111	organization (described on lines 1-9	in col. (i) lis	sted in your	organizat	on in col.	organizátio (i) organiz	on in col. ed in the	` '	port	'
	Ū			above or IRC section	governing	document?	(i) of your	support?	Ü.S.	.?		•	
				(see instructions))	Yes	No	Yes	No	Yes	No			
Γotal	l												

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-1

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2747300.	2288859.	8849911.	6874785.	7939360.	28700215.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2747300.	2288859.	8849911.	6874785.	7939360.	28700215.
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)						6432083.
6	Public support. Subtract line 5 from line 4.						22268132.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	2747300.	2288859.	8849911.	6874785.	7939360.	28700215.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	29,322.	143,024.	110,565.	56,454.	23,967.	363,332.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	-1,451.					-1,451.
11	Total support. Add lines 7 through 10						29062096.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	126,632.
	First five years. If the Form 990 is for	•	,	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (l	line 6, column (f) di	vided by line 11, o	olumn (f))		14	76.62 %
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	68 . 99 %
16a	33 1/3% support test - 2011. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2010. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check tl	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						. \square
b	10% -facts-and-circumstances tes	-	=		•		
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization						
						dule A (Form 990	

132022 01-24-12

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	now, piedee com	oloto i art II.j				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and		. ,	, ,	` '	, ,	
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
· · · ·						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support		#10000	() 0000	(0 0040	() 00//	(0
Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	zation,
check this box and stop here						<u></u> ▶□
Section C. Computation of Publi						
15 Public support percentage for 2011 (lin					15	%
16 Public support percentage from 2010					16	%
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20					17	%
18 Investment income percentage from 2	010 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2011. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line	I7 is not
more than 33 1/3%, check this box an	id stop here. The	e organization qual	ifies as a publicly	supported organiz	ation	▶□
b 33 1/3% support tests - 2010. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	ck this box and s	top here. The orga	anization qualifies	as a publicly supp	orted organization	▶∐
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	>

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization **Employer identification number** RURAL DEVELOPMENT INSTITUTE 91-1158970 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

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

527 political organization

501(c)(3) exempt private foundation

501(c)(3) taxable private foundation

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.

4947(a)(1) nonexempt charitable trust treated as a private foundation

General Rule

Form 990-PF

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

Sp

ecial	Rules
X	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

RURAL DEVELOPMENT INSTITUTE

91-1158970

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional contributors.	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,136,114.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$3,500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$300,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization **Employer identification number**

RURAL DEVELOPMENT INSTITUTE

91-1158970

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	urt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Page 4 Name of organization Employer identification number RURAL DEVELOPMENT INSTITUTE 91-1158970 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

RURAL DEVELOPMENT INSTITUTE

 $\begin{array}{c} \textbf{Employer identification number} \\ 91-1158970 \end{array}$

organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate grants from (during year) 3 Aggregate value at end of year 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Protection or advisor Preservation of a certified historic structure Preservation of permission of pages 2 Complete lines 2 all though 2 if the organization held a qualified conservation exements in the fund in conservation exements in a certified historic structure included in (a) 2e 2	Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
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violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part X 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 5 If the organization received or held works of art, historical treasures, or other similar assets	4	Number of states where property subject to conservation eas	sement is located >	
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part X ▶ \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 ▶ \$	5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part X		violations, and enforcement of the conservation easements it	t holds?	Yes L No
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part X	6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year 🕨
and section 170(h)(4)(B)(ii)?	7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ▶ \$
In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 S	8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	0(h)(4)(B)(i)
include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 P \$		and section 170(h)(4)(B)(ii)?		Yes
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1	9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	se statement, and balance sheet, and
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Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 **Section** **S	_			
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treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1				
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(ii) Revenues included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1		treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of p	ublic service, provide the following amounts
 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 		-		
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the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 \$ \bigs \text{\$} = \limins 1				
a Revenues included in Form 990, Part VIII, line 1	2	-		al gain, provide
b Assets included in Form 990, Part X	а			
	b	Assets included in Form 990, Part X		> \$

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Schedule D (Form 990) 2011

	adio 2 (1 01111 000) 2011	EVELOPMENT							.15897		
Par											
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following that	at are a s	ignific	ant use of i	ts collectio	n item	IS
	(check all that apply):										
а	a Public exhibition d Loan or exchange programs										
b	b Scholarly research e Other										
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	n how th	ney further t	he organizati	ion's exe	mpt p	urpose in F	Part XIV.		
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	er similaı	r asse	ts			
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nization's co	ollection?			[Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" to	Form	990, Part I	V, line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	ssets not	includ	ded		_	_
	on Form 990, Part X?							[Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table:							
									Amoun	t	
С	Beginning balance						1	С			
	Additions during the year							d			
е	Distributions during the year							е			
f	Ending balance							lf			
2a	Did the organization include an amount on F								Yes		No
	b If "Yes," explain the arrangement in Part XIV.										
Par	t V Endowment Funds. Complete	if the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 1	0.				
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Th	ree years ba	ck (e) Foui	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
С	Temporarily restricted endowment ▶	<u>~~</u>									
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.									
За	Are there endowment funds not in the posse		ation tha	at are held a	ınd administe	ered for t	he org	anization			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Sched	dule R?					3b		
4	Describe in Part XIV the intended uses of the										
Par	t VI Land, Buildings, and Equipn	nent. See Form 990	0, Part X	, line 10.							
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) A	ccumi	ılated	(d) Boo	k valu	<u>——</u>
	<u> </u>	basis (investi	ment)	basis	(other)	der	orecia	tion			
1a	Land										
	Buildings										
	Leasehold improvements	l l									
	Equipment			34	6,868.		171	,813.	17	5,0	55.
	Other										

Schedule D (Form 990) 2011

175,055.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Fait vii lilvestillelits - Other Securities. S	ee Form 990, Part X, II	ile iz.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua ost or end-of-year man	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
	0 F 000 P+ V	Page 40		
Part VIII Investments - Program Related.	See Form 990, Part X,	line 13.	(a) Made and afternion	Alam.
(a) Description of investment type	(b) Book value	Co	(c) Method of valua ost or end-of-year man	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, lin	ne 15			
	a) Description			(b) Book value
(1)	'			· · ·
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin			>	
Part X Other Liabilities. See Form 990, Part X	K, line 25.			
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)			_	
(5)				
(6)			_	
			-	
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 25.)			
Total. (Column (b) must equal Form 990, Part X, col (B) line Fin 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote. Fin 48 (ASC 740).	to the organization's financial	statements that reports the orga	nization's liability for uncerta	in tax positions under

132053

Schedule D (Form 990) 2011

	t XI Reconciliation of Change in Net Assets from Form 990		Financi	al Stat		te
					emen	8,904,989.
1	Total evenue (Form 990, Part VIII, column (A), line 12)		····	2		11,090,974.
2	Total expenses (Form 990, Part IX, column (A), line 25)			3		-2,185,985.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			4		2,103,303
4	Net unrealized gains (losses) on investments			5		
5	Donated services and use of facilities			6		
6	Investment expenses			7		
7	Prior period adjustments Other (Describe in Part VIV)		I .	8		
8	Other (Describe in Part XIV.) Total adjustments (net). Add lines 4 through 8			9		
9	Excess or (deficit) for the year per audited financial statements. Combine lines 3			10		-2,185,985.
10 Pai	t XII Reconciliation of Revenue per Audited Financial Staten				Returi	
1					1	9,060,917.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				•	3,000,31,0
a	Net unrealized gains on investments	2a				
b	Donated services and use of facilities		155	,928		
C	Recoveries of prior year grants			,,,,,,	4	
d	Other (Describe in Part XIV.)				1	
e					2e	155,928.
3					3	8,904,989.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				3	0,301,3031
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)					
0					4c	0.
5					5	8,904,989.
	rt XIII Reconciliation of Expenses per Audited Financial State	ments Wit	h Expen	ses pe		
1	Total expenses and losses per audited financial statements				1	11,246,902.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
– a	Donated services and use of facilities	2a	155	,928		
b	Prior year adjustments			,		
c	Other losses	···				
d	Other (Describe in Part XIV.)					
e	Add lines 2a through 2d				2e	155,928.
3	Subtract line 2e from line 1				3	11,090,974.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part VIV)	4b				
	Add lines 4a and 4b				4c	0.
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)				5	11,090,974.
Pa	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also co					

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Inspection

Name of the organization **Employer identification number** RURAL DEVELOPMENT INSTITUTE 91-1158970 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (f) Total émployees. expenditures offices (by type) (e.g., fundraising, program is a program service, agents, and for and in the region services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in region in region in region EAST ASIA AND THE PRO POOR LAND RIGHTS PROGRAM PACIFIC 6 PROGRAM SERVICES 1,239,909. RUSSIA AND THE NEWLY PRO POOR LAND RIGHTS INDEPENDENT STATES 0 PROGRAM SERVICES PROGRAM 115,402. PRO POOR LAND RIGHTS PROGRAM SERVICES SOUTH ASIA 57 PROGRAM 2,803,773. PRO POOR LAND RIGHTS SUB-SAHARAN AFRICA PROGRAM SERVICES PROGRAM 1,066,406.

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63

Schedule F (Form 990) 2011

5,225,490.

5,225,490.

0.

3 a Sub-total

and 3b)

b Total from continuation

sheets to Part I
c Totals (add lines 3a

			Outside the United States. C					► ▽
	plicated if additional		o one recipient received more	tnan \$5,000				P A
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Pagion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PRO LAND RIGHTS LEGAL AID AND EDUCATION	16,005.	WIRE TRANSFER	0.		CASH
			I recognized as charities by the n 501(c)(3) equivalency letter					<u> </u>
								1
Enter total number of other organizations or entities Schedule F (Form 990) 2011								

RURAL DEVELOPMENT INSTITUTE

Schedule F (Form 990) 2011	ORAL DEVELOI	MENI IND	111011		1130370		Page 3
Part III Grants and Other Assistance	e to Individuals Outsid	e the United Sta	ates. Complete i	f the organization answered "Yes"	to Form 990, Part	IV, line 16.	
Part III can be duplicated if a	dditional space is neede	d.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV | Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2011

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open To Public Inspection

Name of the organization RITRAL DI	EVELOPMENT INSTITU	ITE				Employer ide 91-1158	ntification number 970
	Complete if the organization answ		es" to	o Form 990, Part IV,	line 1		
 1 Indicate whether the organization raise a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or key employees listed in Form 990, Pab If "Yes," list the ten highest paid individed compensated at least \$5,000 by the 	e Solicita f Solicita g Special r oral agreement with any individua art VII) or entity in connection with prividuals or entities (fundraisers) pure	ation of ation of I fundra al (includ profess	non-g gover lising ding o	overnment grants nment grants events fficers, directors, true fundraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	e and address of individual		Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (d	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
			>				
3 List all states in which the organization or licensing.	n is registered or licensed to solicit	contrib	ution	s or has been notified	d it is	exempt from re	egistration
LHA Paperwork Reduction Act Notice, s	see the Instructions for Form 990	or 990)-EZ.			Schedule G (Forr	m 990 or 990-EZ) 2011

91-1158970 Page 2 Schedule G (Form 990 or 990-EZ) 2011 RURAL DEVELOPMENT INSTITUTE Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through IWD LUNCH col. (c)) (total number) (event type) (event type) Revenue 261,160. 261,160. 1 Gross receipts 235,260 235,260. 2 Less: Charitable contributions 25,900. 25,900. **3** Gross income (line 1 minus line 2) Cash prizes 5 Noncash prizes **Direct Expenses** Rent/facility costs 53,156. 53,156. Food and beverages 300. 300. 8 Entertainment 13,134. 13,134. Other direct expenses 66,590, 10 Direct expense summary. Add lines 4 through 9 in column (d) -40,690. 11 Net income summary. Combine line 3, column (d), and line 10. Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct | Rent/facility costs 5 Other direct expenses Yes Yes No 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 **9** Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2011

Sch	edule G (Form 990 or 990-EZ) 2011 RURAL DEVELOPMENT INSTITUTE 91-	TT28	9/0	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in:	`		
	The organization's facility	13a		%
	An outside facility			
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	. [.02]		
••	Enter the marie and address of the person who propares the organization's garning openial events books and records.			
	Name			
	Name			
	Address >			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v) and	Part III
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional informati	, ,		
	inico o, ob, rob, rob, rob, ro, and rrb, ac applicable. Also complete the part to provide any additional information	311 (300 11	notrao	tionoj.
_				

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

RURAL DEVELOPMENT INSTITUTE

Employer identification number 91-1158970

Pa	art I Questions Regarding Compensation								
			Yes	No					
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,								
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.								
	First-class or charter travel Housing allowance or residence for personal use								
	Travel for companions Payments for business use of personal residence								
	Tax indemnification and gross-up payments Health or social club dues or initiation fees								
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)								
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or								
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X						
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,		х						
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?								
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's								
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to								
	establish compensation of the CEO/Executive Director. Explain in Part III.								
	Compensation committee								
	Independent compensation consultant Compensation survey or study								
	Form 990 of other organizations Approval by the board or compensation committee								
_									
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing								
_	organization or a related organization:	4-		Х					
a	Receive a severance payment or change-of-control payment?	4a		X					
D	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b 4c		X					
C	Participate in, or receive payment from, an equity-based compensation arrangement?	40							
	if the to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.								
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.								
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation								
	contingent on the revenues of:								
а	The organization?	5a		X					
	Any related organization?	5b		Х					
	If "Yes" to line 5a or 5b, describe in Part III.								
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation								
	contingent on the net earnings of:								
а	The organization?	6a		X					
	Any related organization?	6b		Х					
	If "Yes" to line 6a or 6b, describe in Part III.								
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			l _					
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X					
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the								
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X					
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in								
	Regulations section 53.4958-6(c)?	9	l	1					

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

Schedule J (Form 990) 2011

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
-	(i)	197,873.	0.	0.	6,116.	20,145.	224,134.	0.
1 TIM HANSTAD	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	133,899.	0.	0.	4,210.	19,231.	157,340.	0.
2 LINCOLN MILLER	(ii)	0.	0.	0.	0.	0.	0.	0.
DODDDE MIRGUELL	(i)	131,382.	0.	0.	4,042.	20,073.	155,497.	0.
3 ROBERT MITCHELL	(ii)	0. 128,248.	0.	0.	0. 3,864.	0. 20,250.	0.	0.
4 AMY LOW	(i)	0.	0.	0.	3,004.	20,250.	152,362. 0.	0.
4 API LOW	(ii) (i)	134,108.	0.	0.	4,141.	20,104.	158,353.	0.
5 R. SCOTT LEWIS	(ii)	0.	0.	0.	0.	0.	0.	0.
<u> </u>	(i)	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •				•	
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
_	(i)							
9	(ii)							
10	(i) (ii)							
10	(i)							
11	(ii)							
•••	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
_14	(ii)							
	(i)							
15	(ii)							
40	(i)							
16	(ii)							

Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A: LANDESA PROVIDED ECONOMY CLASS TRANSPORTATION AND DE
MINIMIS OTHER TRAVEL EXPENSES FOR THE SPOUSE OF THE CEO ON ONE OCCASION. IN
THIS INSTANCE THE BOARD CHAIR APPROVED SUCH EXPENSES AS VALID
ORGANIZATIONAL COSTS THAT ADVANCED LANDESA'S MISSION.

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

RURAL DEVELOPMENT INSTITUTE

Employer identification number 91-1158970

Pa	rt I Types of Property										
		(a)	(b)	(c)	(d)						
		Check if	Number of	Noncash contributio			-				
		applicable		amounts reported o Form 990, Part VIII, line		ution a	mount	S			
1	Art - Works of art		TECHIO CONTINUATECA	T OTTT GGG, T GIT VIII, III G	5 Tg						
2	Art - Historical treasures										
3	Art - Fractional interests										
4	Books and publications										
5	Clothing and household goods										
6											
	Cars and other vehicles										
7	Boats and planes										
8	Intellectual property	Х	4	32 776	FMV AT DATE	ים כי	CET	777			
9	Securities - Publicly traded	- 1		32,110	O. PHV AI DAIL	1 1/13	CHI	<u> </u>			
10	Securities - Closely held stock										
11	Securities - Partnership, LLC, or										
	trust interests										
12	Securities - Miscellaneous										
13	Qualified conservation contribution -										
	Historic structures										
14	Qualified conservation contribution - Other										
15	Real estate - Residential										
16	Real estate - Commercial										
17	Real estate - Other										
18	Collectibles										
19	Food inventory										
20	Drugs and medical supplies										
21	Taxidermy										
22	Historical artifacts										
23	Scientific specimens										
24	Archeological artifacts										
25	Other ()										
26	Other • ()										
27	Other ()										
28	Other ()										
29	Number of Forms 8283 received by the organiz	zation durin	g the tax year for o	contributions							
	for which the organization completed Form 828										
					•		Yes	No			
30a	During the year, did the organization receive by	y contributio	on any property re	ported in Part I, lines 1-2	28 that it must hold for						
	at least three years from the date of the initial of										
	the entire holding period?		•	•		30a		Х			
h	If "Yes," describe the arrangement in Part II.										
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any non-standard co	ntributions?	31	Х				
	Does the organization hire or use third parties				***************************************	<u> </u>	<u> </u>				
oza				· · ·		32a		Х			
h	If "Yes," describe in Part II.					SZA					
	If the organization did not report an amount in	ooluma (a) f	ior a tupo of pro	rty for which column (-)	in abankad						
33		COMMITT (C) T	or a type or prope	rty for writeri column (a)	is differed,						
LLIA		the Instance	tions for Form 00	10	Cahadula M	/Ecuro	000)	2011			
LHA	describe in Part II. A For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990).										

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011
Open to Public Inspection

Name of the organization

RURAL DEVELOPMENT INSTITUTE

Employer identification number 91-1158970

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

RURAL PEOPLE WHO LIVE ON LESS THAN TWO DOLLARS A DAY. LANDESA PARTNERS

WITH DEVELOPING COUNTRY GOVERNMENTS TO DESIGN AND IMPLEMENT LAWS,

POLICIES, AND PROGRAMS CONCERNING LAND THAT PROVIDE OPPORTUNITY,

FURTHER ECONOMIC GROWTH, AND PROMOTE SOCIAL JUSTICE.

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

CONCERNING LAND THAT PROVIDE OPPORTUNITY, FURTHER ECONOMIC GROWTH, AND

PROMOTE SOCIAL JUSTICE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: LANDESA PARTNERS WITH GOVERNMENTS AND OTHER ACTORS IN THE GLOBAL DEVELOPMENT SECTOR FROM OTHER SELECTED CORE GEOGRAPHIES, INCLUDING AFRICA AND CENTRAL/WESTERN ASIA, TO DESIGN AND IMPLEMENT LAND-RELATED LAWS, POLICIES, AND PROGRAMS THAT PROVIDE OPPORTUNITY, FURTHER ECONOMIC GROWTH, AND PROMOTE SOCIAL JUSTICE. WHEN FAMILIES HAVE SECURE RIGHTS TO THEY CAN INVEST IN THEIR LAND TO SUSTAINABLY INCREASE THEIR HARVESTS AND REAP THE BENEFITS-IMPROVED NUTRITION, HEALTH, AND EDUCATION-FOR GENERATIONS. LANDESA ALSO WORKS TO ELEVATE THE ISSUE OF LAND RIGHTS AND HELPS OTHER NONPROFITS AND ACTORS IN THE DEVELOPMENT COMMUNITY RECOGNIZE THE FUNDAMENTAL IMPORTANCE OF LAND RIGHTS TO THEIR OWN MISSION. OUR STRATEGIC USE OF COMMUNICATIONS HELPS ENSURE GREATER AWARENESS OF THE ISSUE, GREATER ATTENTION AND RESOURCES, AND AN INCREASE IN PARTNERSHIPS WITHIN THE DEVELOPMENT COMMUNITY TO ADDRESS THE ISSUE.

EXPENSES \$ 3,387,453. INCLUDING GRANTS OF \$ 0. REVENUE \$ 877,162.

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

Schedule O (Form 990 or 990-EZ) (2011)

SCHEDULE R (Form 990)

Part I

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions.

OMB No. 1545-0047

2011
Open to Public Inspection

Name of the organization

RURAL DEVELOPMENT INSTITUTE

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Employer identification number 91-1158970

(a)	(b)	(c)	(d)	(d)			(f)			
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state o foreign country)	r Total inco	me	End-of-year	assets		ontrolling ntity	9	
RDI INDIA TRUST										
18, RAMNATH HOUSE (1ST FLOOR), YUSUF SARAI,							LANDESA (RUI	RAL		
BANGALORE, KARNATAKA, INDIA	LAND RIGHTS LAW	INDIA	1,944	,484.	188	8,273.	DEVELOPMENT	INSTIT	UTE)	
LANDESA CONSULTING LLC - 27-5292266										
1424 4TH AVE SUITE 300							LANDESA (RUI	RAL		
SEATTLE, WA 98101	LAND RIGHTS LAW	IGHTS LAW WASHINGTON		0.	790,323.		DEVELOPMENT INSTITU			
	-									
	_									
Part II Identification of Related Tax-Exempt Organia organizations during the tax year.)	zations (Complete if the organization	n answered "Yes" to Form 990	, Part IV, line 34 b	ecause	e it had one o	or more	related tax-exer	mpt		
(a)	(b)	(c)	(d)		(e)		(f)	Section ((g) Section 512(b)(13	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	statu	tus (if section		ct controlling entity	controlled entity?		
				5	501(c)(3))			Yes N		
	-									
				-				1	_	
For Denovuoric Reduction Act Notice, see the Instruction							Sahadula B /		<u> </u>	

Schedule R (Form 990) 2011

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Primary activity Legal domicile (state or foreign		(related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disproporti ate allocatio		amount in box	partn	l or Percenta ing ownersh
		country)		sections 512-514)		455515	Yes	No	K-1 (Form 1065)	Yes	lo l
	_										
	_										
							<u> </u>			\sqcup	
	_										
	_										
	_										
							<u> </u>			\sqcup	
	4										
	4										
	4										

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
	100						

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note	. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.						Yes	No	
1	During the tax year, did the organization engage in any of the following transactions	s with one or more r	elated organizations listed	in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					1a		Х	
b	Gift, grant, or capital contribution to related organization(s)					1b	Х		
	Gift, grant, or capital contribution from related organization(s)					1c		X	
	Loans or loan guarantees to or for related organization(s)					1d		Х	
	Loans or loan guarantees by related organization(s)					1e		Х	
f	Sale of assets to related organization(s)					1f		X	
g	Purchase of assets from related organization(s)					1g		X	
h Exchange of assets with related organization(s)									
i Lease of facilities, equipment, or other assets to related organization(s)									
j	Lease of facilities, equipment, or other assets from related organization(s)					1j		X	
k Performance of services or membership or fundraising solicitations for related organization(s)									
Performance of services or membership or fundraising solicitations by related organization(s)									
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
n Sharing of paid employees with related organization(s)									
Reimbursement paid to related organization(s) for expenses									
p Reimbursement paid by related organization(s) for expenses								X	
-	•								
q	Other transfer of cash or property to related organization(s)					1q		X	
	Other transfer of cash or property from related organization(s)					1r		X	
	If the answer to any of the above is "Yes," see the instructions for information on w					•	•		
	(a)	(b)	(c)		(d)				
	Name of other organization	Transaction	Amount involved		Method of determining				
		type (a-r)			amount involved				
(1) R	DI INDIA TRUST	В	1,926,505.	CASH					
(2) R	DI INDIA TRUST	N	327,351.	CASH					
(3) L	ANDESA CONSULTING LLC	В	140,323.	CASH					
(4)									
(5)									
(6)									

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

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

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(I	า)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under section 512-514)	Are all partners se	Share of	Share of	Dispr	opor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	excluded from tax	501(c)(3 orgs.?) total	end-of-year	alloca	iate tions?	amount in box 20 Lof Schedule K-1	partner	ownership
		country)	under section 512-514)	Yes N	income	assets	Yes	No	(Form 1065)	Yes N	0
	1										
	1										
							+			\vdash	
	-										
	-										
	-										
							-			\vdash	
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Form

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

Information furnished for the foreign disregarded entity's annual accounting period (see instructions)

OMB No. 1545-1910

Attachment

Department of the Treas Internal Revenue Service

.20 11 and ending JUN 30 20 12 beginning JUL 1 Sequence No. 140 Name of person filing this return Filer's identifying number RURAL DEVELOPMENT INSTITUTE 91-1158970 Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address) 1424 FOURTH AVE, STE 300 City or town, state, and ZIP code 98101 SEATTLE, WA JUL 1 20 11 , and ending JUN Filer's tax year beginning Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated. 1a Name and address of foreign disregarded entity b(1) U.S. identifying number, if any RDI INDIA TRUST 1820, 6TH CROSS, JUDICIAL LAYOUT b(2) Reference ID number (see instructions) 560065 YELAHANKA, BANGALORE INDIA LANDESA123 c Country(ies) under whose laws organized and entity type under local tax law d Date(s) of organization e Effective date as foreign disregarded entity INDIA TRUST 05/13/08 05/13/08 If benefits under a U.S. tax treaty were claimed with respect to income Country in which principal h Principal business Functional currency of the foreign disregarded entity, enter the treaty and article number business activity is conducted activity LAND RIGHTS INDIA INDIA, RUPEE Provide the following information for the foreign disregarded entity's accounting period stated above. Name, address, and identifying number of branch office or agent (if any) in the Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books **United States** and records, if different RURAL DEVELOPMENT INSTITUTE RAHUL PANDEY 1424 FOURTH AVE, STE 300 18 RAMNATH HOUSE, 1ST FLOOR WA 98101 49 SEATTLE, YUSUF SARAI, NEW DELHI, 91-1158970 INDIA

For the tax owner of the foreign disregarded entity (if different from the filer) provide the following: a Name and address Annual accounting period covered by c U.S. identifying number, if any the return (see instructions) d Country under whose laws organized e Functional currency For the **direct owner** of the foreign disregarded entity (if different from the tax owner) provide the following: Name and address b Country under whose laws organized c U.S. identifying number, if any d Functional currency

Schedule C | Income Statement (see instructions)

Important; Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM. X If you are using the average exchange rate (determined under section 989(b)), check the following box

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	101,204,607.	2,052,757.
	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	101,204,607.	2,052,757.
4	Other income	4	3,155.	64.
5	Total income (add lines 3 and 4)	5	101,207,762.	2,052,821.
6	Total deductions	6	115,039,786.	2,333,379.
7	Other adjustments	7		
8	Net income (loss) per books	8	-13,832,023.	-280,558.

Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity in which the foreign disregarded entity has a 10% or more direct or

Form 8858 (Rev. 12-2011)

Schedule C-1 | Section 987 Gain or Loss Information

			(a) Amount stated in functional currency of	f	(b) Amount stated in functional currency			
		foreign disregarded e			of recipient			
1	Remittances from the foreign disregarded entity	1						
	Section 987 gain (loss) of recipient	2						
					Yes	No		
3	Were all remittances from the foreign disregarded entity treated as made to the direct owner?			[
4	Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances		• •	- 1				
	entity during the tax year?							
	chedule F Balance Sheet							
	portant; Report all amounts in U.S. dollars computed in functional currency and translated into U. e instructions for an exception for foreign disregarded entities that use DASTM.	.S. a		with				
	Assets (a) Beginning of annua accounting period				(b) End of annual accounting period			
1	Cash and other current assets	1	226,428.		204,547.			
2	Other assets	2	82,690.		60,916.			
3	Total assets	3	309,118.	<u>. </u>	26	5,463.		
	Liabilities and Owner's Equity							
4	Liabilities	4	10,371.			8,051.		
5	Owner's equity	5	298,747.			7,412.		
6	Total liabilities and owner's equity	6	309,118.	.	26	5,463.		
S	chedule G Other Information			_				
				ŀ	Yes	No No		
1	During the tax year, did the foreign disregarded entity own an interest in any trust?					X 		
2	During the tax year, did the foreign disregarded entity own at least a 10% interest, directly or indirectly, in a	-		}				
3 Answer the following question only if the foreign disregarded entity made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the foreign disregarded entity as a								
	regult of the election?							
4	Answer the following question only if the foreign disregarded entity is owned directly or indirec							
	corporation and the foreign disregarded entity incurred a net operating loss for the tax year: Is							
	entity a separate unit as defined in Regulations section 1.1503(d)-1(b)(4)? (If "Yes," see the instructions)			N	/A			
5	Answer the following question only if the tax owner of the foreign disregarded entity is a control					·		
(CFC): Were there any intracompany transactions between the foreign disregarded entity and the CFC or any other branch of the CFC								
	during the tax year, in which the foreign disregarded entity acted as a manufacturing, selling, or purchasing	g bra	nch?					
S	chedule H Current Earnings and Profits or Taxable Income (see instru	ctic	ns)					
lmp	portant; Enter the amounts on lines 1 through 6 in functional currency.							
1	Current year net income or (loss) per foreign books of account			$\overline{}$	-13 , 83	2,023.		
2	Total net additions			2				
3 Total net subtractions					12 02	2 022		
4 Current earnings and profits (or taxable income see instructions) (line 1 plus line 2 minus line 3)						2,023.		
5 DASTM gain or loss (if applicable)						2,023.		
6 Combine lines 4 and 5 7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under						4,043.		
7 Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))					-28	0,558.		
Enter exchange rate used for line 7 > 49.301800					20	.,		
	Enter exertaings rate about for filler (Fn	orm 8858 (R	ev. 12-2011)		
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