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# Return of Organization Exempt From Income Tax

OMB No 1545 0047

**2002**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2002 calendar year, or tax year beginning **2002**, and ending **20**

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return
  - Amended return
  - Application pending

Please use IRS label or print or type See Specific Instructions	<b>C</b> Name of organization <b>Yellowstone to Yukon Conservation Initiative</b>		<b>D</b> Employer identification number <b>81 : 0535303</b>	
	Number and street (or P O box if mail is not delivered to street address) Room/suite <b>126 E Broadway Suite 7</b>		<b>E</b> Telephone number <b>( 403 ) 609-2666 ext 3</b>	
	City or town state or country and ZIP + 4 <b>Missoula, Montana 59802</b>		<b>F</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶	

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

- H** and **I** are not applicable to section 527 organizations
- H(a)** Is this a group return for affiliates?  Yes  No
- H(b)** If "Yes" enter number of affiliates ▶
- H(c)** Are all affiliates included?  Yes  No (If "No" attach a list. See instructions.)
- H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No
- I** Enter 4 digit GEN ▶

**G** Web site ▶ **www.y2y.net**

**J** Organization type (check only one) ▶  501(c) ( 3 ) ◀ (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 17 of the instructions)

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received			
		<b>a</b> Direct public support	<b>1a</b>		669,200
		<b>b</b> Indirect public support	<b>1b</b>		
		<b>c</b> Government contributions (grants)	<b>1c</b>		
		<b>d</b> Total (add lines 1a through 1c) (cash \$ <u>669,200</u> noncash \$ _____ )	<b>1d</b>		669,200
		<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		-
		<b>3</b> Membership dues and assessments	<b>3</b>		-
		<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		2,547
		<b>5</b> Dividends and interest from securities	<b>5</b>		-
		<b>6a</b> Gross rents	<b>6a</b>		-
		<b>b</b> Less rental expenses	<b>6b</b>		-
		<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>		-
	<b>7</b> Other investment income (describe ▶)	<b>7</b>		-	
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	<b>8a</b>	
	<b>b</b> Less cost or other basis and sales expenses			<b>8b</b>	
	<b>c</b> Gain or (loss) (attach schedule)			<b>8c</b>	
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))			<b>8d</b>	-
	<b>9</b> Special events and activities (attach schedule)				
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>			
	<b>b</b> Less direct expenses other than fundraising expenses	<b>9b</b>			
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>			-
	<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>			
	<b>b</b> Less cost of goods sold	<b>10b</b>			
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>			-
	<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			-
	<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>			671,747
Expenses	<b>13</b>	Program services (from line 44, column (B))	<b>13</b>		862,595
	<b>14</b>	Management and general (from line 44, column (C))	<b>14</b>		251,163
	<b>15</b>	Fundraising (from line 44, column (D))	<b>15</b>		19,649
	<b>16</b>	Payments to affiliates (attach schedule)	<b>16</b>		-
	<b>17</b>	Total expenses (add lines 13, 14, 15, and 16, column (A))	<b>17</b>		1,133,407
Net Assets	<b>18</b>	Ending net assets or fund balances for the year (subtract line 17 from line 12)	<b>18</b>		(461,660)
	<b>19</b>	Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		503,594
	<b>20</b>	Other changes in net assets or fund balances (attach explanation)	<b>20</b>		-
	<b>21</b>	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>		41,934

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**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>760,000</u> noncash \$ _____)	760,000	760,000		
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25 Compensation of officers, directors, etc				
26 Other salaries and wages	101,910	101,261	-	649
27 Pension plan contributions				
28 Other employee benefits				
29 Payroll taxes				
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies				
34 Telephone				
35 Postage and shipping				
36 Occupancy				
37 Equipment rental and maintenance				
38 Printing and publications				
39 Travel				
40 Conferences, conventions, and meetings				
41 Interest				
42 Depreciation, depletion etc (attach schedule)				
43 Other expenses not covered above (itemize) a bank fee	558	3	555	
b directors insurance	1,475	-	1,475	
c consultants	5,478	624	4,854	
d contract services	263,279	-	244,279	19,000
e Montana State Fund (insurance)	707	707		
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	1,133,407	862,595	251,163	19,649

**Joint Costs** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If Yes, enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_ (ii) the amount allocated to Program services \$ \_\_\_\_\_ (iii) the amount allocated to Management and general \$ \_\_\_\_\_ and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See page 24 of the instructions)

What is the organization's primary exempt purpose? **See Mission Statement attached**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a <b>Wildlife Conservation research - see attached description</b>	
(Grants and allocations \$ _____)	438,192
b <b>Conservation Planning - see attached description</b>	
(Grants and allocations \$ _____)	43,485
c <b>Communications - see attached description</b>	
(Grants and allocations \$ _____)	173,500
d <b>Outreach - see attached description</b>	
(Grants and allocations \$ _____)	207,418
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f <b>Total of Program Service Expenses</b> (should equal line 44 column (B) Program services)	862,595

**Part IV Balance Sheets** (See page 24 of the instructions)

Note		(A) Beginning of year		(B) End of year	
<i>Where required attached schedules and amounts within the description column should be for end of year amounts only</i>					
Assets	45	Cash—non-interest-bearing		45	
	46	Savings and temporary cash investments	287,267	46	18,840
	47a	Accounts receivable		47a	
	b	Less allowance for doubtful accounts		47b	47c
	48a	Pledges receivable		48a	
	b	Less allowance for doubtful accounts		48b	48c
	49	Grants receivable	218,590	49	26,140
	50	Receivables from officers, directors, trustees and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule)		51a	
	b	Less allowance for doubtful accounts		51b	51c
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	1,475	53	0
	54	Investments—securities (attach schedule) <span style="float: right;">▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV</span>		54	
	55a	Investments—land, buildings, and equipment basis		55a	
	b	Less accumulated depreciation (attach schedule)		55b	55c
	56	Investments—other (attach schedule)		56	
	57a	Land, buildings, and equipment basis		57a	
	b	Less accumulated depreciation (attach schedule)		57b	57c
58	Other assets (describe ▶ _____ )		58		
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	507,332	59	44,980	
Liabilities	60	Accounts payable and accrued expenses	3,738	60	3,046
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe ▶ _____ )		65	
66	<b>Total liabilities</b> (add lines 60 through 65)	3,738	66	3,046	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	99,487	67	26,219
	68	Temporarily restricted	404,107	68	15,715
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income or other funds		72	
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72) (column (A) must equal line 19, column (B) must equal line 21)		73		
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	507,332	74	44,980	

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions)	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p><b>a</b> Total revenue, gains, and other support per audited financial statements ▶ <b>a</b> 671,747</p> <p><b>b</b> Amounts included on line a but not on line 12 Form 990</p> <p>(1) Net unrealized gains on investments \$ 0</p> <p>(2) Donated services and use of facilities \$ 0</p> <p>(3) Recoveries of prior year grants \$ 0</p> <p>(4) Other (specify) _____</p> <p>----- \$ _____</p> <p>Add amounts on lines (1) through (4) ▶ <b>b</b> 0</p> <p><b>c</b> Line a minus line b ▶ <b>c</b> 671,747</p> <p><b>d</b> Amounts included on line 12 Form 990 but not on line a</p> <p>(1) Investment expenses not included on line 6b Form 990 \$ 0</p> <p>(2) Other (specify) _____</p> <p>----- \$ _____</p> <p>Add amounts on lines (1) and (2) ▶ <b>d</b> 0</p> <p><b>e</b> Total revenue per line 12 Form 990 (line c plus line d) ▶ <b>e</b> 671,747</p>	<p><b>a</b> Total expenses and losses per audited financial statements ▶ <b>a</b> 1,133,407</p> <p><b>b</b> Amounts included on line a but not on line 17 Form 990</p> <p>(1) Donated services and use of facilities \$ 0</p> <p>(2) Prior year adjustments reported on line 20 Form 990 \$ 0</p> <p>(3) Losses reported on line 20 Form 990 \$ 0</p> <p>(4) Other (specify) _____</p> <p>----- \$ _____</p> <p>Add amounts on lines (1) through (4) ▶ <b>b</b> 0</p> <p><b>c</b> Line a minus line b ▶ <b>c</b> 1,133,407</p> <p><b>d</b> Amounts included on line 17, Form 990 but not on line a</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ 0</p> <p>(2) Other (specify) _____</p> <p>----- \$ _____</p> <p>Add amounts on lines (1) and (2) ▶ <b>d</b> 0</p> <p><b>e</b> Total expenses per line 17 Form 990 (line c plus line d) ▶ <b>e</b> 1,133,407</p>

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated see page 26 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Katherine Deuel 126 E Broadway #7, Missoula MT 59802	Outreach Coordinator, 4 hours	31,292	5,267	0
Marguerite Mahr PO Box 423, Kila MT 59920	Conservation Science & Coordinator, 40 hours	29,083	6,026	0
Wendy Francis 710 9th St, Studio B, Canmore AB T1W2V7 Canada	Interim Executive Director, 5 hours	0	0	0
Jane Bewick 710 9th St, Studio B, Canmore AB T1W2V7 Canada	Finance & Operations & Coordinator, 8 hours	0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes" attach schedule—see page 26 of the instructions

**Part VI Other Information** (See page 27 of the instructions)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
78b	If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	✓	
81	If "Yes," enter the name of the organization <b>Yellowstone to Yukon Conservation Initiative Society</b> and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures. See line 81 instructions	81a	
81b	Did the organization file Form 1120-POL for this year?		✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		✓
82b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	NA	
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?		
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
85c	Dues, assessments, and similar amounts from members	85c	
85d	Section 162(e) lobbying and political expenditures	85d	
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
85h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
86b	Gross receipts, included on line 12, for public use of club facilities	86b	
87a	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
87b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
89b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	✓
89c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
89d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed <u>Montana</u>		
90b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	3
91	The books are in care of <u>Jane Bewick</u> Telephone no <u>(403) 609-2666 ext 3</u> Located at <u>710 9th Street, Studio B, Canmore Alberta</u> ZIP + 4 <u>T1W 2V7</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	<input type="checkbox"/>

**Part VII Analysis of Income-Producing Activities** (See page 31 of the instructions)

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			<b>14</b>	<b>2,547</b>	
<b>96</b> Dividends and interest from securities					
<b>97</b> Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
<b>104</b> Subtotal (add columns (B), (D), and (E))				<b>2,547</b>	
<b>105</b> Total (add line 104, columns (B), (D), and (E))					<b>2,547</b>

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 32 of the instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 33 of the instructions)

- (a) Did the organization during the year receive any funds directly or indirectly to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

**Please Sign Here**

Signature of officer: Jane Bewick Date: June 20, 2003

Jane Bewick, Finance and Operations Coordinator

Type or print name and title

---

**Paid Preparer's Use Only**

Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check if self employed:

Firm's name (or yours if self employed) address and ZIP + 4: \_\_\_\_\_ EIN: \_\_\_\_\_

Phone no: \_\_\_\_\_



**SCHEDULE A**  
(Form 990 or 990-EZ)

**Organization Exempt Under Section 501(c)(3)**

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

OMB No 1545-0047

**2002**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information—(See separate instructions )**

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

Name of the organization: **Yellowstone to Yukon Conservation Initiative**  
Employer identification number: **81 0535303**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶	0			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter 'None ')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶	0	



**Part III Statements About Activities** (See page 2 of the instructions)

Yes No

**1** During the year has the organization attempted to influence national, state, or local legislation including any attempt to influence public opinion on a legislative matter or referendum? If Yes enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ \_\_\_\_\_ (Must equal amounts on line 38, Part VI-A or line 1 of Part VI-B)

1

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

**2** During the year has the organization either directly or indirectly engaged in any of the following acts with any substantial contributors trustees directors, officers creators, key employees, or members of their families or with any taxable organization with which any such person is affiliated as an officer director trustee majority owner or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)

[Hatched area]

**a** Sale exchange or leasing of property?

2a

**b** Lending of money or other extension of credit?

2b

**c** Furnishing of goods services, or facilities?

2c

**d** Payment of compensation (or payment or reimbursement of expenses if more than \$1 000)?

2d

**e** Transfer of any part of its income or assets?

2e

**3** Does the organization make grants for scholarships fellowships, student loans etc? (See Note below)

3

**4** Do you have a section 403(b) annuity plan for your employees?

4

**Note** Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

[Hatched area]

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5**  A church convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6**  A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7**  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8**  A Federal state or local government or governmental unit Section 170(b)(1)(A)(v)
- 9**  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10**  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a**  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b**  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12**  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc functions—subject to certain exceptions and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13**  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above or (2) section 501(c)(4) (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3) )

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

**14**  An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10 11 or 12.) *Use cash method of accounting*

**Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>15</b> Gifts, grants and contributions received (Do not include unusual grants See line 28)	453,333	227,300			680,633
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization's charitable etc purpose					
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents royalties and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30 1975	2,854				2,854
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
<b>23</b> Total of lines 15 through 22	456,187	227,300			683,487
<b>24</b> Line 23 minus line 17	456,187	227,300			683,487
<b>25</b> Enter 1% of line 23	4,562	2,273			
<b>26 Organizations described on lines 10 or 11</b>					
<b>a</b> Enter 2% of amount in column (e) line 24					<b>26a</b> 13,670
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					<b>26b</b> 534,310
<b>c</b> Total support for section 509(a)(1) test Enter line 24 column (e)					<b>26c</b> 683,487
<b>d</b> Add Amounts from column (e) for lines 18 <u>2,854</u> 19 <u>0</u> 22 <u>0</u> 26b <u>534,310</u>					<b>26d</b> 537,164
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> 146,323
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 21.4 %
<b>27 Organizations described on line 12</b>					
<b>a</b> For amounts included in lines 15 16 and 17 that were received from a disqualified person prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year					
(2001) ..... (2000) ..... (1999) ..... (1998) .....					
<b>b</b> For any amount included in line 17 that was received from each person (other than disqualified persons) prepare a list for your records to show the name of and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11 as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2001) ..... (2000) ..... (1999) ..... (1998) .....					
<b>c</b> Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b> _____
<b>d</b> Add Line 27a total _____ and line 27b total _____					<b>27d</b> _____
<b>e</b> Public support (line 27c total minus line 27d total)					<b>27e</b> _____
<b>f</b> Total support for section 509(a)(2) test Enter amount from line 23, column (e)					<b>27f</b> _____
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> _____ %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> _____ %
<b>28 Unusual Grants</b> For an organization described in line 10 11 or 12 that received any unusual grants during 1998 through 2001 prepare a list for your records to show, for each year, the name of the contributor the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15					

**Part V Private School Questionnaire** (See page 7 of the instructions)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
<b>29</b>	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter bylaws other governing instrument, or in a resolution of its governing body?		
<b>30</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues and other written communications with the public dealing with student admissions programs and scholarships?		
<b>31</b>	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe if "No" please explain (If you need more space attach a separate statement ) ..... ..... .....		
<b>32</b>	Does the organization maintain the following		
<b>a</b>	Records indicating the racial composition of the student body, faculty and administrative staff?		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
<b>c</b>	Copies of all catalogues brochures announcements and other written communications to the public dealing with student admissions programs and scholarships?		
<b>d</b>	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain (If you need more space attach a separate statement ) ..... .....		
<b>33</b>	Does the organization discriminate by race in any way with respect to		
<b>a</b>	Students' rights or privileges?		
<b>b</b>	Admissions policies?		
<b>c</b>	Employment of faculty or administrative staff?		
<b>d</b>	Scholarships or other financial assistance?		
<b>e</b>	Educational policies?		
<b>f</b>	Use of facilities?		
<b>g</b>	Athletic programs?		
<b>h</b>	Other extracurricular activities?  If you answered "Yes" to any of the above please explain (If you need more space attach a separate statement ) ..... .....		
<b>34a</b>	Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b please explain using an attached statement		
<b>35</b>	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587 covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group    Check  **b** if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	0
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	0
38	Total lobbying expenditures (add lines 36 and 37)	38	0
39	Other exempt purpose expenditures	39	0
40	Total exempt purpose expenditures (add lines 38 and 39)	40	0
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	<b>If the amount on line 40 is—</b>		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	<b>The lobbying nontaxable amount is—</b>		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	0
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0

**Caution** If there is an amount on either line 43 or line 44 you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	0	0	0	0	0
46					0
47	0	0	0	0	0
48	0	0	0	0	0
49					0
50	0	0	0	0	0

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h)			

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

**Part VII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
- (ii) Other assets

**b** Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities equipment or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

**c** Sharing of facilities equipment mailing lists other assets or paid employees

**d** If the answer to any of the above is Yes complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods other assets or services received.

	Yes	No
<b>51a(i)</b>		✓
<b>a(ii)</b>		✓
<b>b(i)</b>		✓
<b>b(ii)</b>		✓
<b>b(iii)</b>		✓
<b>b(iv)</b>		✓
<b>b(v)</b>		✓
<b>b(vi)</b>		✓
<b>c</b>		✓

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers transactions and sharing arrangements

**52a** Is the organization directly or indirectly affiliated with or related to one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶  Yes  No

**b** If "Yes" complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship



## YELLOWSTONE TO YUKON CONSERVATION INITIATIVE

### **Mission Statement**

The Yellowstone to Yukon Conservation Initiative

People working together to maintain and restore the unique natural heritage of the Yellowstone to Yukon region

Combining science and stewardship, we seek to ensure that the world-renowned wilderness, wildlife, native plants and natural processes of the Yellowstone to Yukon region continue to function as an interconnected web of life, capable of supporting all of the natural and human communities that live within it, for now and for future generations

### **Vision Statement**

Ours is a vision for the future of the wild heart of North America. Aware that the Yellowstone to Yukon region constitutes the world's last best chance to retain a fully functioning mountain ecosystem, we envision a day

- When a life-sustaining web of protected wildlife cores and connecting wildlife corridors has been defined and designated for the Yellowstone to Yukon region,
- When that life-sustaining web is embraced as a source of pride for those who live within it, and is acknowledged as a living testimony to a society wise enough to recognize the need for such a web, altruistic enough to create it, and prudent enough to maintain it,
- When all natural and human communities in the Yellowstone to Yukon region coexist in a healthy mountain ecosystem of clean air and water, abiding beauty, and abundant wildlife and wilderness,
- When natural resources in the region are managed with the goals of ecosystem integrity and long-term economic prosperity in mind;
- And when residents of the Yellowstone to Yukon region take it for granted that their long-term personal, spiritual, and economic well-being is inextricably connected to the well-being of natural systems

**Yellowstone to Yukon Conservation Initiative**  
**990 – 2002**  
**Part III**

- a. **Wildlife conservation research** We are identifying the habitat needs of wildlife in the Rocky Mountains to determine which core and connecting areas are needed to perpetuate wildlife populations. We have published an *Atlas* and will produce maps and narratives describing wildlife and human needs. We make Y2Y science available as a tool for making land management decisions.
- b. **Conservation planning** We integrate on-the-ground wildlife information with population and distribution models that consider larger landscapes. We provide information for the conservation of biological diversity. In addition, we try to understand and incorporate other human values into our habitat conservation maps, including recreational, aesthetic and spiritual values and the knowledge and traditions of aboriginal people.
- c. **Communications** We work to understand the values, needs and attitudes of residents in the Y2Y region and to develop tools and messages for more effective communication with them.
- d. **Outreach** We produce publications, slide presentations and the other materials for public education, which is central to our mission. We make presentations to general audiences regarding the wildlife needs and socio-economic dynamics in the region and we respond to inquiries. We also maintain a web site and provide training and other services to other organizations.