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# Return of Organization Exempt From Income Tax

**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>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C Name of organization</b> <b>Yellowstone to Yukon Conservation Initiative</b>		<b>D Employer identification number</b> <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 Telephone number</b> ( 403 ) 609-2666 ext 3
		City or town, state or country, and ZIP + 4 <b>Missoula, Montana 59802</b>		<b>F Accounting method</b> <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 ▶ .....  
**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**G Web site:** ▶ [www.y2y.net](http://www.y2y.net)

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

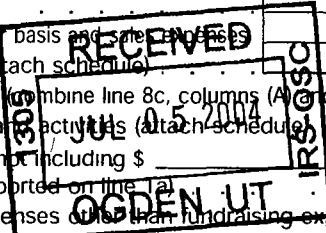
**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

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

**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>		<b>669,200</b>	
	<b>b</b> Indirect public support	<b>1b</b>			
	<b>c</b> Government contributions (grants)	<b>1c</b>			
	<b>d Total</b> (add lines 1a through 1c) (cash \$ <b>669,200</b> noncash \$ .....)	<b>1d</b>			<b>669,200</b>
	<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>			<b>2,547</b>
	<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>			-	
Revenue	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	<b>b</b> Less cost or other basis and sales expenses	<b>8a</b>	<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 Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>			<b>671,747</b>	
Expenses	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		<b>862,595</b>	
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		<b>251,163</b>	
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		<b>19,649</b>	
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		-	
	<b>17 Total expenses</b> (add lines 16 and 44, column (A))	<b>17</b>		<b>1,133,407</b>	
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		<b>(461,660)</b>	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<b>503,594</b>	
	<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>		<b>41,934</b>	

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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 \$ <b>760,000</b> noncash \$ _____)	<b>760,000</b>	<b>760,000</b>		
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	<b>101,910</b>	<b>101,261</b>	-	<b>649</b>
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) <b>a bank fee</b>	<b>558</b>	<b>3</b>	<b>555</b>	
	<b>b directors insurance</b>	<b>1,475</b>	-	<b>1,475</b>	
	<b>c consultants</b>	<b>5,478</b>	<b>624</b>	<b>4,854</b>	
	<b>d contract services</b>	<b>263,279</b>	-	<b>244,279</b>	<b>19,000</b>
	<b>e Montana State Fund (insurance)</b>	<b>707</b>	<b>707</b>		
44	Total functional expenses (add lines 22 through 43) <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15</i>	<b>1,133,407</b>	<b>862,595</b>	<b>251,163</b>	<b>19,649</b>

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? <b>See Mission Statement attached</b>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
<b>a Wildlife Conservation research - see attached description</b>  (Grants and allocations \$ <b>401,500</b> )	<b>438,192</b>
<b>b Conservation Planning - see attached description</b>  (Grants and allocations \$ <b>40,000</b> )	<b>43,485</b>
<b>c Communications - see attached description</b>  (Grants and allocations \$ <b>173,500</b> )	<b>173,500</b>
<b>d Outreach - see attached description</b>  (Grants and allocations \$ <b>145,000</b> )	<b>207,418</b>
<b>e Other program services (attach schedule)</b> (Grants and allocations \$ _____)	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services)	<b>862,595</b>

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

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

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.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . ▶	<b>a</b>	671,747
<b>b</b>	Amounts included on line <b>a</b> but not on line 12, Form 990		
	(1) Net unrealized gains on investments . . . \$ 0		
	(2) Donated services and use of facilities \$ 0		
	(3) Recoveries of prior year grants . . . \$ 0		
	(4) Other (specify):		
	----- \$		
	Add amounts on lines (1) through (4) ▶	<b>b</b>	0
<b>c</b>	Line <b>a</b> minus line <b>b</b> . . . . . ▶	<b>c</b>	671,747
<b>d</b>	Amounts included on line 12, Form 990 but not on line <b>a</b> :		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$ 0		
	(2) Other (specify):		
	----- \$		
	Add amounts on lines (1) and (2) ▶	<b>d</b>	0
<b>e</b>	Total revenue per line 12, Form 990 (line <b>c</b> plus line <b>d</b> ) . . . . . ▶	<b>e</b>	671,747

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . ▶	<b>a</b>	1,133,407
<b>b</b>	Amounts included on line <b>a</b> but not on line 17, Form 990.		
	(1) Donated services and use of facilities \$ 0		
	(2) Prior year adjustments reported on line 20, Form 990 . . . . . \$ 0		
	(3) Losses reported on line 20, Form 990 . . . \$ 0		
	(4) Other (specify):		
	----- \$		
	Add amounts on lines (1) through (4) ▶	<b>b</b>	0
<b>c</b>	Line <b>a</b> minus line <b>b</b> . . . . . ▶	<b>c</b>	1,133,407
<b>d</b>	Amounts included on line 17, Form 990 but not on line <b>a</b> :		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$ 0		
	(2) Other (specify):		
	----- \$		
	Add amounts on lines (1) and (2) ▶	<b>d</b>	0
<b>e</b>	Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> ) . . . . . ▶	<b>e</b>	1,133,407

**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
<i>Revised</i> Wendy Francis 710 9th St, Studio B, Canmore AB T1W2V7 Canada	Interim Executive Direct	0	0	0
Jane Bewick 710 9th St, Studio B, Canmore AB T1W2V7 Canada	Finance & Operations C	0	0	0
Rob Ament 40 E Main St, Suite 2, Bozeman, MT 59715	Director	0	0	0
Barb Cestero 201 S Wallace, Suite B3C, Bozeman MT 59715	Director	0	0	0
Brian Churchill SS 2 Site, Comptmt 23, Fort St John BC V1J 4M7 CA	Secretary	0	0	0
Bob Ekey 105 West Main St, Ste E, Bozeman MT 59715-5016	Chairperson	0	0	0
Wendy Francis 11 Glebe Road East, Toronto, ON M4S 1N7 CA	Vice Chairperson	0	0	0
Dave Hadden Box 2001, Bigfork, MT 59911	Director	0	0	0
David Johns Box 725, McMinnville OR 97128-0725	Treasurer	0	0	0
see attached list				

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
<b>76</b>	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		<input checked="" type="checkbox"/>
<b>77</b>	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		<input checked="" type="checkbox"/>
<b>78a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		<input checked="" type="checkbox"/>
<b>78b</b>	<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>79</b>	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		<input checked="" type="checkbox"/>
<b>80a</b>	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?	<input checked="" type="checkbox"/>	
<b>81a</b>	<b>b</b> 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.		
<b>81a</b>	Enter direct or indirect political expenditures See line 81 instructions <b>81a</b>		
<b>81b</b>	<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?		<input checked="" type="checkbox"/>
<b>82a</b>	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?		<input checked="" type="checkbox"/>
<b>82b</b>	<b>b</b> 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) . . . . . <b>82b</b>		
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	
<b>83b</b>	<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<input checked="" type="checkbox"/>	
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		
<b>84b</b>	<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>85a</b>	<b>85 501(c)(4), (5), or (6) organizations a</b> Were substantially all dues nondeductible by members?		
<b>85b</b>	<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
<b>85c</b>	<b>c</b> Dues, assessments, and similar amounts from members . . . . . <b>85c</b>		
<b>85d</b>	<b>d</b> Section 162(e) lobbying and political expenditures . . . . . <b>85d</b>		
<b>85e</b>	<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . . <b>85e</b>		
<b>85f</b>	<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . . <b>85f</b>		
<b>85g</b>	<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
<b>85h</b>	<b>h</b> 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?		
<b>86a</b>	<b>86 501(c)(7) orgs</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12 <b>86a</b>		
<b>86b</b>	<b>b</b> Gross receipts, included on line 12, for public use of club facilities . . . . . <b>86b</b>		
<b>87a</b>	<b>87 501(c)(12) orgs</b> Enter <b>a</b> Gross income from members or shareholders. . . . . <b>87a</b>		
<b>87b</b>	<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . <b>87b</b>		
<b>88</b>	<b>88</b> 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		<input checked="" type="checkbox"/>
<b>89a</b>	<b>89a 501(c)(3) organizations</b> 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>		
<b>89b</b>	<b>b 501(c)(3) and 501(c)(4) orgs.</b> 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 . . . . . <b>89b</b>		<input checked="" type="checkbox"/>
	<b>c</b> Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ► <u>0</u>		<u>0</u>
	<b>d</b> Enter: Amount of tax on line 89c, above, reimbursed by the organization. . . . . ► <u>0</u>		<u>0</u>
<b>90a</b>	List the states with which a copy of this return is filed ► <b>Montana</b>		
<b>90b</b>	<b>b</b> Number of employees employed in the pay period that includes March 12, 2002 (See instructions.) <b>90b</b>		<u>3</u>
<b>91</b>	The books are in care of ► <b>Jane Bewick</b> Telephone no ► <b>(403) 609-2666 ext 3</b> Located at ► <b>710 9th Street, Studio B, Canmore Alberta</b> ZIP + 4 ► <b>T1W 2V7</b>		
<b>92</b>	<b>92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ► <u>92</u>		

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

**Note:** Enter gross amounts unless otherwise indicated.

	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:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> 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:					
<b>a</b> debt-financed property . . . . .					
<b>b</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 <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .				<b>2,547</b>	
<b>105</b> <b>Total</b> (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, Finance and Operations Coordinator Date: \_\_\_\_\_

Type or print name and title: \_\_\_\_\_

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**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: \_\_\_\_\_ Preparer's SSN or PTIN (See Gen. Inst. W): \_\_\_\_\_

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







## 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.

**Yellowstone to Yukon Conservation Initiative**

**2002 Form 990**

**Part V Continued Revised June 28, 2004**

(A) Name & Address	(B) Position	(C) Compensation	(D) Contributions to employee(E) Expense account benefit plan & deferred compensation	(E) Expense account & other allowance
Mac Hislop Box 31095, Whitehorse, Yukon Y1A 2P7	Director	-0-	-0-	-0-
Ernie LaBelle PO Box 11809, Jackson, WY. 83002	Director	-0-	-0-	-0-
Stephen Legault PO Box 8145, Canmore, AB T1W 2W2	Director	-0-	-0-	-0-
Harvey Locke 11 Glebe Road East, Toronto, ON. M4S 1N7	Director	-0-	-0-	-0-
Troy Merrill 208 S Main Street, Ste 7 Moscow, Idaho 83843	Director	-0-	-0-	-0-
Jerry Pavia Box 912, Bonners Ferry, ID. 83805	Director	-0-	-0-	-0-
Bob Peart 11166 Willow Road, Sidney, BC V8L 5K6	Director	-0-	-0-	-0-
Ray Rasker 201 S Wallace, Suite B3C, Bozeman MT 59715	Director	-0-	-0-	-0-
Wayne Sawchuk Box 2049, Chetwynd, BC. V0C 1J0	Director	-0-	-0-	-0-
Tom Skeele 1116 S Pincrest, Bozeman, MT. 59715	Director	-0-	-0-	-0-
Craig Stewart 351 St Joseph Blvd. 21st. Floor, Hull PQ K1A 0H3	Director	-0-	-0-	-0-
Gary Tabor Box 296, Bozeman, MT 59771	Director	-0-	-0-	-0-
Ellen Zimmerman Box 1496, Golden, BC V0A 1H0	Director	-0-	-0-	-0-