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Form 990

Internal Revenue Service

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)

OMB No 1545-0047 Open to Public

► The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection For the 2009 calendar year, or tax year beginning and ending D Employer identification number Check if applicable. C Name of organization Piease use IRS label or Address change Conservation Force, Inc. pant of Name change 72-1364493 type Doing Business As Initial Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number 837-1233 Termin-3240 S. I-10 Service Road West 200 (504)Instruc-Amende City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-70001-6911 Metairie, LA H(a) Is this a group return F Name and address of principal officer: John J. Jackson Yes X No for affiliates? same as C above H(b) Are all affiliates included? Yes No Tax-exempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) ∰ website: ▶ www.conservationforce.org H(c) Group exemption number ▶ Form of organization X Corporation Trust Association Other > L Year of formation 1997 M State of legal domicile LA Summary Briefly describe the organization's mission or most significant activities: Wildlife conservation through SCANNISO DE & Activities & Governance education, science and services. Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 6 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 5 20 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII. column: (C), line 7a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** RS-OSC 732,459. 710,857. Contributions and grants (Part Vill, line 1h) 2010 Program service revenue (Part VIII, line 2g) 3,035. 576. Investment income (Part VIII, column (A), lines 3, 4, and Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c) and 1) er N 17,733. 11 753,227. 711,433. Total revenue - add lines 8 through 11 (must equal Part VIII, column 12 239,312. 183,653. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 104,589 138,998. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 5,000. b Total fundraising expenses (Part IX, column (D), line 25) 518,004 412,707. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 735,358. 861,905. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -108,678.-23,925. Revenue less expenses. Subtract line 18 from line 12 58 Beginning of Current Year End of Year Assets (Balance 2,492,251 2,468,326. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 2,468,326. 2,492,251. 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Part II this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, to be best of all information of which preparer has any knowledge Under penalties of penury, I declare Sign Here Type or print name and title Check if Preparer's identifying number (see instructions) Paid signature Katherine A. Hoffman, employed > Preparer's Firm's name (or BERNARD & FRANKS, CORP. OF* EIN 🕨 yours if Use Only self-employed), 4141 VETERANS BLVD, SUITE 313 METAIRIE, LA 70002-5581 Phone no \triangleright (504)885-0170

Form 990 (2009)

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

(Code: Robin Hurt Wildlife Foundation (f/k/a the Cullman & Hurt Community Wildlife Project): We are a funding partner of the RHW Foundation which has built 48 schools, operates 12 medical dispensaries, 2 mobile medical units, and 3 full time anti-poaching patrols fully equipped with vehicles, uniforms, etc., in Tanzania. continuous operation for 16 years and has grown both in scale and We currently partner with 33 villages spanning 8 Districts and 7 Regions throughout Tanzania. Given the fact that 70% of all Tanzanians live at the resource base level, 40% of Tanzanias land area is covered by one form of Protected Area or another, and 30% of the total land area is covered by hunting blocks, the involvement of local communities in conservation is paramount if Tanzania is going to

4-4	Other present condess	(Decembe in	Cahadula (A)	
4a	Other program services.	. (Describe in	Schedule O I	

374,123 · including grants of \$ 5,000.) (Revenue \$

689,500. Total program service expenses ▶\$

(Code:

(Code:

Form 990 (2009) Conservation Force, Inc. 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)?		v	
_	If "Yes," complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
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	-	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		Х
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			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
_	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	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	1		
	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	, , , , , , , , , , , , , , , , , , , ,			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	-		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			·····
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	^	
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	446	X	
45	and program service activities outside the United States? If "Yes," complete Schedule F, Part I 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, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	'		
	located outside the United States? If "Yes," complete Schedule F, Part III	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	ļ	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? 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		_X_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form ¹	9 <mark>90</mark> (2	2009)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
		04		
		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		X
24a	· · · · · · · · · · · · · · · · · · ·			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		X
	Schedule K. If "No", go to line 25	24a		
	Did the organization invest 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	24b		
С		24c		
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
254	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	İ		
	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 a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			17
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	24		v
^=	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		_ X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	1	X
26	If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35	\dashv	
36	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	20		- 41
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ	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	

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2 a	Enter the number of employees reported on Form W-3, 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?	2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		1	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	_		
_	Tax Shelter Transaction?	5c		-
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		х
	any contributions that were not tax deductible?	6a		
b		6b		1
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		i i	1
а	provided to the payor?	7a	х	1
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
Ĭ	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	.,,,,,		
e	The state of the s			1
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
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			ĺ
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			İ
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			Į
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			į
11	Section 501(c)(12) organizations. Enter:			:
a	Gross income from members or shareholders 11a			
Đ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
	1 i	128		
<u></u> b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

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

<u>Sec</u>	tion A. Governing Body and Management	_			
		1 1		Yes	No
1a	Enter the number of voting members of the governing body	1a	8		
b	Enter the number of voting members that are independent	1b	_6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo	orm 990 was filed?	4	1	Х
5	Did the organization become aware during the year of a material diversion of the organization's asset	ets?	_ 5		Х
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more m	embers of the		İ	
	governing body?	•	7a	<u> </u>	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe		7b	<u> </u>	Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year			
	by the following:			· ·	
	The governing body?		_8a	X	
	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached at the			v
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O)	9		<u> </u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	revenue Code.)	_	V	Nie
40-	December over a land about the second		100	Yes	No_X
	Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such	chantom offiliatos	10a	<u> </u>	
D	and branches to ensure their operations are consistent with those of the organization?	chapters, anniates,	10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	filma the form?	111	 	X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ming the form:			
	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld give rise	120		
	to conflicts?	510 g,v0 1100	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes." describe	1 1		
Ĭ	In Schedule O how this is done	,	12c	X	
13	Does the organization have a written whistleblower policy?		13	Х	
14	Does 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 approve	al by independent			·
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	·			
а	The organization's CEO, Executive Director, or top management official		15a	X	
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 arrange	ment with a			
	taxable entity during the year?		16a	 	<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-		ŀ		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anization's			
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501(c)(3)s only) availa	able for		
	public inspection. Indicate how you make these available. Check all that apply.				
	Own website X Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict of interest polic	y, and fina	ıncıal	
00	statements available to the public.				
20	State the name, physical address, and telephone number of the person who possesses the books a Mr. John J. Jackson III - (504) 837-1233	uio records of the organ	ıızatıon: ▶		
	3240 S. I-10 Service Road W., Metairie, LA 70001				
	The state of the s				

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

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. Use Schedule J-2 if additional space is needed.
- 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. 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.
- 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) Name and Title	(B) Average hours				C) Itior that		oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
John J. Jackson III Chairman & President	80.00	х		х				0.	0.	32,137.
Christian B. Jackson	00.00	**		1	-	 	\vdash	<u> </u>		32/13/6
Secretary & Treasurer	80.00	X		X		ŀ		0.	0.	20,000.
Bert Klineburger										
Director	10.00	X				ļ	ļ	0.	0.	0.
James G. Teer										
Director	7.00	X				ļ	-	0.	0.	0.
Phillippe Chardonet Director	20.00	X						0.	0.	0.
Shane Mahoney	20.00	<u>^</u>							0.	
Director	10.00	X						0.	0.	0.
Gerhard Damm	1400						·			
Director	10.00	X		L				0.	0.	0.
Don Lindsay				;						_
Director	5.00	X						0.	0.	0.
	,									<u>-</u>
										<u> </u>
	<u></u>	<u> </u>	<u> </u>				<u> </u>			

Par	VII Section A. Officers, Directors, Tru	istees, Key Er	nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportable			timate	
		hours per week	<u> </u>	heck	all		app		compensation from the	compensation from related organizations	,	com	nount other pensa	ation
			Individual trustee or director	Institutional trustoe	h	Key employee	Highest compensate employee	 15	organization (W-2/1099-MISC)	(W-2/1099-MIS	C)	org	om th anizat d relat	tion ted
			age.	Instit	ja Bost	Keye	를	Former				orga	anızatı	ions
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		:												
	Total	1			<u> </u>	<u> </u>		<u> </u>	0.		0.	5	2.1	37.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bov	e) wh	no re		,000 in reportable			_,_	
	compensation from the organization												Yes	0 No
3	Did the organization list any former officer,	director or tru	stee	. ke	v en	olar	vee.	or h	nighest compensated er	nolovee on	ſ		162	NO
•	line 1a? If "Yes," complete Schedule J for s			,	,			•	g	.,,	ļ	3		X
4	For any individual listed on line 1a, is the su									the organization		4		х
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a									Ices rendered to	-	4		Α.
	the organization? If "Yes," complete Scheo											5		X
	tion B. Independent Contractors Complete this table for your five highest co				nt o	ont	roote	+	hat received more than	\$100,000 of come		tion f	rom	
1	the organization. NONE	impensated in	aepe	SIIGE	ant C	Ont	iacic	JI 5 L	nat received more than	\$100,000 or com	Je1150	ition i	10111	
	(A) Name and business	nddroee							(B) Description of s	envices	C	(C omper		'n
	Name and business	addless							Description or s	lei vices		- Imper		-
								_						
								\dashv						_
					-4 *	4.			I ale and a decident	Ab				
2	Total number of independent contractors (\$100,000 in compensation from the organi		ot li	mite	a to		se li: 0	stec	above) who received m	ore tnan				
	4.23,000 in sempendation from the organ									 – L		Form (990 (2009)

		1	IVacion	rorce, I	iic.		72-1304	493 Page 9
Pa	rt VII	Statement of Rever	nue		(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	All other contributions, gifts, grant similar amounts not included above	ts, and ve 1f	710,857.	710,857.			
Program Service Revenue	2 a b c d e f	All other program service reve		Business Code				
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties		est, and	576.	576.		
	6 a b c	Gross Rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				·
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities	(ii) Other				
Other Revenue		Gross income from fundraising including \$ contributions reported on line Part IV, line 18	of					
Б	c 9 a b	Net income or (loss) from functions income from gaming active Part IV, line 19 Less: direct expenses Net income or (loss) from gaming active part IV, line 19	traising events tivities. See a b	•				
	10 a	and allowances Less: cost of goods sold Net income or (loss) from sale	returns a b s of inventory	•				
	11 a b			Business Code				
:	d e	All other revenue Total. Add lines 11a-11d			711 422	5.76	0	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl	and 501(c)(4) organizat ete column (A) but are			(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	5,000.	5,000.		·····
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	150 650	150 550		
	See Part IV, lines 15 and 16	178,653.	178,653.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	50 107	22 127	15 000	F 000
	trustees, and key employees	52,137.	32,137.	15,000.	5,000.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	70 225	74 222	2 012	
7	Other salaries and wages	78,235.	74,323.	3,912.	
8	Pension plan contributions (include section 401(k)		1		
_	and section 403(b) employer contributions)	2 641	2,509.	122	
9	Other employee benefits	2,641. 5,985.	5,686.	132.	
10	Payroll taxes	3,963.	5,000.	299.	
11	Fees for services (non-employees):				
а	Management	2 072	3,072.		· · · · · · · · · · · · · · · · · · ·
Ь	Legal	3,072.	3,072.	420.	· · · · · · · · · · · · · · · · · · ·
c	Accounting	420.		420.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other	50.		50.	
12	Advertising and promotion	13,885.		13,885.	
13	Office expenses	1,024.		1,024.	
14	Information technology	1,024.		1,024.	
15	Royalties	28,099.	26,694.	1,405.	
16	Occupancy	20,000.	20,034.	1,403.	
17	Travel	· · · · · · · · · · · · · · · · · · ·			
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings	68,452.	68,452.		
19 20	Interest	00,132.	00/1321		
21	Payments to affiliates		-		
22	Depreciation, depletion, and amortization	2,978.	-	2,978.	
23	Insurance	1,669.		1,669.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total	2,0031		7,000	
•	expenses shown on line 25 below) Projects & Programs	227,711.	227,711.		
d h	Conservation Education	56,653.	56,653.		
0	Membership Fees	7,021.	7,021.		
d	Payroll Processing Fees	1,673.	1,589.	84.	
e	,				
f	All other expenses		,		
25	Total functional expenses. Add lines 1 through 24f	735,358.	689,500.	40,858.	5,000.
26	Joint costs. Check here ▶ ☐ If following	,			
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined		İ		
	educational campaign and fundraising solicitation				
					Form 000 (2000)

Pai	tΧ	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		143,812.	1	131,849.
	2	Savings and temporary cash investments	_	21,918.	2	10,863.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employe	es. Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			1111 111 111 111 1111 1111 1111 1111 1111
1		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete			•
		Part II of Schedule L			6	
S.	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
¥	9	Prepaid expenses and deferred charges			9	2,070.
	10a	Land, buildings, and equipment: cost or other	1 1			
		basis. Complete Part VI of Schedule D	10a 2,314,650.			
	ь	Less accumulated depreciation	10b 45,596.	2,272,031.	10c	2,269,054.
	11	Investments - publicly traded securities		, , , , , , , , , , , , , , , , , , , ,	11	
	12	Investments · other securities. See Part IV, line	11		12	
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		54,490.	15	54,490.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	2,492,251.	16	2,468,326.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Š	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director				
abi		highest compensated employees, and disqualifi	ed persons. Complete Part II			
=		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
		Organizations that follow SFAS 117, check he	ere 🕨 🔲 and complete			
S		lines 27 through 29, and lines 33 and 34.				
Ě	27	Unrestricted net assets			27	
3aic	28	Temporarily restricted net assets			28	
Ď	29	Permanently restricted net assets	<u></u>		29	
Ē		Organizations that do not follow SFAS 117, c	heck here ▶ X and			
6		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other funds	2,492,251.	32	2,468,326.
Z	33	Total net assets or fund balances	-	2,492,251.	33	2,468,326.
	34	Total liabilities and net assets/fund balances		2,492,251.	34	2,468,326.

Form **990** (2009)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3ь

SCHEDULE:A (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.

2009

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Conservation Force, Inc. Employer identification number 72-1364493

Par	ti	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.				
he c	rgant	zation is not a	private foundation	because it is: (For lines	1 through	11, check	only one t	oox.)					
1 [A church, coi	nvention of churches	s, or association of chur	ches desc	nbed in se	ection 170	(b)(1)(A)(i).				
2 [A school des	cribed in section 17	'0(b)(1)(A)(ii) . (Attach Sc	hedule E.)								
3 [A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).					
4 [A medical res	search organization	operated in conjunction	with a hos	prtal desc	nbed in se	ection 170	(b)(1)(A)(i	ii). Enter ti	ne hospital	's nan	ne,
		city, and state	e:										
5 [An organizati	on operated for the	benefit of a college or u	niversity o	wned or o	perated by	a govern	mental un	it describe	ed in		
		section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, sta	ite, or local governm	ent or governmental uni	t describe	d ın sectio	on 170(b)(I)(A)(v).					
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
		section 170(b)(1)(A)(vi). (Complete Part II.)											
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9		-		eives: (1) more than 33			rom contr	butions, n	nembersh	p fees, an	d aross re	celots	from
		•	•	nctions - subject to certa		• •				•	-	•	
				axable income (less sect	•	•	•				-		
			509(a)(2). (Complete	•		•		•	, ,			•	
10				perated exclusively to te	st for publ	ıc safety. S	See secti o	n 509(a)(4	4).				
11		•	•	perated exclusively for the	-	•			•	y out the r	ourposes o	of one	or
		•	,	ations described in secti		•				•	•		
				organization and compl		•	, , , ,	•					
		a Type I	·· —	–	с 🔲 Тур			tegrated		d 🔲	Type III - C	Other	
e [By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified p	ersons oth	er tha	ın
		foundation m	anagers and other t	han one or more publich	y supporte	d organiza	ations des	cribed in s	ection 50	9(a)(1) or s	ection 509	(a)(2).	
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		_	rganization, check th										
g		• • •	•	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
Ū		•		lirectly controls, either al			•					Yes	No
			•	upported organization?		_			, ,	. •	11g(i)		
		(ii) A family	member of a persor	n described in (i) above?)						11g(ii)		
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	97					11g(iii)		
h			•	about the supported or									
			·	••	-								
(N)	Vame :	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	rganization	(v) Did you	notify the	(vi) Is		(vii) Am	nount o	f
(.,		nization	(, 2	organization (described on lines 1-9	1 ',	sted in your			organizati (i) organiz	ed in the		port	•
	·			above or IRC section	governing	document?	(i) of you	r support?	`' ~us	2			
				(see instructions))	Yes	No	Yes	No	Yes	No			
					ł		ļ						
					 	ļ <u>.</u>				<u> </u>			
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			· · · · · · · · · · · · · · · · · · ·										
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F-A-1					1								

 $\mbox{\sc LHA}$ For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Conservation Force, Inc. 72-13644

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.)

Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(ർ) 2008	(e) 2009	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	585,097.	589,286.	738,474.	732,459.	710,856.	3,356,172.			
2	Tax revenues levied for the organ-									
	ızatıon'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	585,097.	589,286.	738,474.	732,459.	710,856.	3,356,172.			
5	The portion of total contributions									
	by each person (other than a					1				
	governmental unit or publicly					1				
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)						143,555.			
6	Public support. Subtract line 5 from line 4						3,212,617.			
	tion B. Total Support									
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
	Amounts from line 4	585,097.	589,286.	738,474.	732,459.	710,856.	3,356,172.			
8	Gross income from interest.			·	·					
_	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	7,560.	8,161.	4,504.	3,035.	576.	23,836.			
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					ĺ				
	assets (Explain in Part IV.)	109.	9,157.	8,759.	17,733.	İ	35,758.			
11	Total support. Add lines 7 through 10		•				3,415,766.			
	Gross receipts from related activities,	etc. (see instruction	ons)			12				
	First five years. If the Form 990 is for	-		d, fourth, or fifth ta	x vear as a section	501(c)(3)				
	organization, check this box and stor	here		,	•	, , , , , , , , , , , , , , , , , , ,	▶□			
Sec	tion C. Computation of Publ	ic Support Per	rcentage							
	Public support percentage for 2009 (i			olumn (f))		14	94.05 %			
15	Public support percentage from 2008	Schedule A, Part	II, line 14			15	94.69 %			
16a	33 1/3% support test - 2009.If the o	rganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or ma	ore, check this box	and			
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright X$			
b	33 1/3% support test - 2008.If the o	rganızatıon did not	check a box on lir	ne 13 or 16a, and l	ine 15 is 33 1/3%	or more, check this	s box			
	and stop here. The organization qual	rfies as a publicly s	supported organiza	ition			ightharpoons			
17a	10% -facts-and-circumstances tes	t - 2009. If the orga	ınızatıon did not ch	neck a box on line	13, 16a, or 16b, ar	nd line 14 is 10% o	r more,			
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Par	t IV how the organi	zation			
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a j	oublicly supported	organization	-	▶ □			
b	10% -facts-and-circumstances tes	t - 2008.If the orga	anization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or			
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the									
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported orga	nızatıon	▶ 🔲			
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u> </u>			

Schedule A (Form 990 or 990 EZ) 2009 Part III Support Schedule for C)rganizations	Described in	Section 509(a)(2) (Complete onl	v if you checked the be	Page 3 ox on line 9 of Part
Section A. Public Support		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		, ,	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants.")		<u></u>				
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-					ľ	
iness under section 513						
4 Tax revenues levied for the organ-						
ızatıon'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			<u> </u>			
8 Public support (Subtract line 7c from line 6)	11,		<u> </u>	<u> </u>		
Section B. Total Support		T	1		_	· · · · · · · · · · · · · · · · · · ·
Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses					1	
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.)						
Total support (Add lines 9, 10c, 11, and 12)First five years. If the Form 990 is for	the ergonization's	first second the	d fourth or fifth t	ov vaar op a godt	on 501(a)(3) organia	ration
	uie organization:	s mat, second, thi	G, IOUTHI, OF HIGH G	an year as a secu	on son(c)(s) organiz	ation,
check this box and stop here Section C. Computation of Publ	ic Support Pe	rcentage				<u> </u>
15 Public support percentage for 2009 (l			column (fl)		15	9
16 Public support percentage from 2008					16	9
Section D. Computation of Inves					• •	·
17 Investment income percentage for 20					17	9/

18 Investment income percentage from 2008 Schedule A, Part III, line 17

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization **Employer identification number** 72-1364493 Conservation Force, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did 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 # | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). X Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area X Protection of natural habitat Preservation of a certified historic structure X Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 294.03 b Total acreage restricted by conservation easements 2b 0 Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 vear > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of X No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 40 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) X No __ Yes and section 170(h)(4)(B)(ii)? 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, 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, 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 relating to these items: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 Conserv	ation For	ce,	Inc.			7	2-13	64493	Page 2
Par	t III Organizations Maintaining C	ollections of	Art, Hi	storical T	reasures, c	or Other	Simila	r Asse	ts (conti	nued)
3	Using the organization's acquisition, accessi	on, and other rec	ords, che	ck any of th	e following tha	t are a sig	nıficant u	se of its	collection	items
	(check all that apply)									
а	Public exhibition		d 🗀	Loan or ex	change progra	ıms				
ь	Scholarly research		e 🗆	Other						
С	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.									
5	During the year, did the organization solicit o									
	to be sold to raise funds rather than to be ma								Yes	No No
	t W Escrow and Custodial Arran					to Form	990, Par	t IV, line		
4	reported an amount on Form 990, Pa	rt X, line 21.		•						
1a	Is the organization an agent, trustee, custod	an or other interr	nediary fo	or contribution	ons or other as	sets not ir	ncluded			
	on Form 990, Part X?								Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the	e following	g table:						
	, ,	•		•					Amount	
С	Beginning balance						1c			
	Additions during the year						1d	-		
	Distributions during the year						1e			
f	Ending balance						1f			
2a	Pa Did the organization include an amount on Form 990, Part X, line 21?									
	b If "Yes," explain the arrangement in Part XIV.									
	Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.									
		(a) Current yea	r (b)	Prior year	(c) Two year	s back (d	f) Three ye	ars back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
đ	Grants or scholarships									
е	Other expenditures for facilities									***************************************
	and programs									
f	Administrative expenses									
	End of year balance								,	
2	Provide the estimated percentage of the year	r end balance he	d as:							
а	Board designated or quasi-endowment		%							
ь	Permanent endowment ▶	%								
С	Term endowment ▶	 %								
	Are there endowment funds not in the posse	ession of the orga	nızation t	hat are held	and administer	red for the	organiza	ation		
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as require	d on Sch	edule R?					3b	
4	Describe in Part XIV the intended uses of the	e organization's e	ndowmen	t funds.						
Par	t VI Investments - Land, Building	s, and Equip	ment. 9	See Form 99	0, Part X, line 1	0.				
	Description of investment	(a) Cost of	or other	(b) Co:	st or other	(c) Acc	umulated	s	(d) Book	value
		basis (inve	stment)		s (other)	depr	eciation			
1a	Land			2,2	63,478.				2,263	,478.
b	Buildings									
c	Leasehold improvements									
d	Equipment							_		
е	Other			ļ	51,172.	4	45 , 59	6.	5	,576.
Total	Add lines 1a through 1e. (Column (d) must e	aual Form 990. P	art X. coli	umn (B), line	10(c).)				2,269	,054.

Schedule D (Form 990) 2009

72-1364493 Page 3

uncertain tax positions under FIN 48.

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.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection **Employer identification number**

Conservation Fo	rce, Inc	•			72-136449	3
Part I General Info	rmation on A		tside the United States. Comp	lete if the organ	nization answered "	Yes"
to Form 990, Par		mointain rocar	do to substantiate the amount of the	ronto or opplet	noo tho	
-	-		ds to substantiate the amount of the g selection criteria used to award the gr	="		Yes No
g,,	3		3 .			
2 For grantmakers. Desc	ribe in Part IV the	e organization's	procedures for monitoring the use of	grant funds out	side the United Sta	tes.
2 Astrutus ner Decree (I	laa Cabadula E 1	(Farm 000) if an	Iddinanal anno in nooded \			
3 Activities per Region. (L. (a) Region	(b) Number of offices in the region	(c) Number of employees or agents in	ditional space is needed.) (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to	is a pro	vity listed in (d) gram service, specific type	(f) Total expenditures for region
	in the region	region	recipients located in the region)		ce(s) in region	ion region
Sub-Sahara Africa	1	0	Grant	N/A		178,653.
				Planning, R	•	
Sub-Sahara Africa	1	0	Program Service	1	eadership and evelopment.	27,330.
		-				
						60.300
North America	1	<u></u>	Grant	N/A		68,320.
North America	1	5	Program Service	Polar Bear	Management	10,169.
				Argali Wild		
Russia	0	0	Program Service	Sheep Manag	ement	2,465.
Southeast Asia	0	0	Program Service	Markhor Pro	ject	670.

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

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Schedule F (Form 990) 2009

287,607.

Page 2

72-1364493	Part It Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any	ved more than \$5,000	
Conservation Force, Inc.	istance to Organizations or Entities Outside the United	recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000	Use Schedule F·1 (Form 990) if additional space is needed.
Schedule F (Form 990) 2009	Part It Grants and Other Assi	recipient who received i	Use Schedule F-1 (Form

USB SCHEDNIE F.	i (Form 99U) ii addiii	Use schedule F-1 (Form 990) il additional space is needed.						
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(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)
		Sub-Sahara Africa	wildlife conservation in Tanzania & anti-poaching efforts	70 000	70.000,wire transfer	0		
				103653.	wire transfer	0.		
		Sub-Sahara Africa	Erongo Mountain Rhino Sanctuary	5,000	000.wire transfer	0.		
2 Enter total number of the IRS, or for which the	recipient organizations	ons listed above that are	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-e>	empt by ■		<u></u>
3 Enter total number of other organizations or entities	other organizations	or entitles						

Schedule F (Form 990) 2009

72-1364493	Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Inc.	d States. C
•	s Outside the United States. Complete
Conservation Force	istance to Individuals Outside
le F (Form 990) 2009	Grants and Other Ass
Schedu	Part III G

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of * valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2009 (g) Description of non-cash assistance (f) Amount of non-cash assistance 0 (e) Manner of cash disbursement 68,320.wire transfer (c) Number of recipients cash grant (b) Region Mexican Desert Sheep Monument North America (a) Type of grant or assistance

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Schedule F (Form 990) 2009 Conservation Force, Inc. /2-1364493	Page 4
Part IV Supplemental Information	
Complete this part to provide the information required in Part I, line 2, and any additional information.	
Schedule F, Part I, Line 2: Monitoring Procedures: The grant expressl	У
provides that if any part is not used as directed, it is to be returne	d
A representative of the organization serves on the operating committee	of
the grantee project, participates in the field, and/or dispenses in	
phases as reports and documentation are furnished. Generally, the	
organization is "friends of" the grantee and is very familiar with the	
project.	
Schedule F, Part I, Line 3: Expenditures are recorded at the time the	
cash is paid out. All expenditures are reported accordingly on the	 -
current year income statement.	
	
	

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

Inspection

Name of the organization

Conservation Force, Inc.

Employer identification number

72-1364493 Types of Property Part I (d) (b) (c) (a) Check If Number of Revenues reported on Method of determining Form 990, Part VIII, line 1o contributions applicable revenues Art · Works of art 2 Art · Historical treasures Art - Fractional interests Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes Intellectual property 8 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures X no value/tax incenti Qualified conservation contribution - Other 14 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 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 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for X 30a the entire holding period? b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or self noncash X

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

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) 2009

32a

contributions?

describe in Part II.

b If "Yes," describe in Part II.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

932211 02-03-10

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Conservation Force, Inc.	Employer identification number 72–1364493
Form 990, Part III, Line 1, Description of Organization M	ission:
collaborative effort combining forces of a consortium or	organizations
and, third, that Conservation Force itself is a proactive	force to be
reckoned with because of its record of successes.	
Form 990, Part III, Line 4b, Program Service Accomplishme	nts:
Pastoralists. We are helping to fund the widely viewed a	nd popular
educational video on predator conservation and livestock	management,
"Living with Lions."	
Form 990, Part III, Line 4c, Program Service Accomplishme	nts:
continue to use tourism, both consumptive and non-consump	tive, as a
means to develop the economy and reduce poverty. Current	ly, all
hunting companies are required by regulation to undertake	community
development activities, support anti-poaching operations,	and to
develop their blocks for improved sustainability. It sho	uld be noted
that RHWF began these vary same activities 10 years prior	to the
establishment of the governments regulations.	
Form 990, Part III, Line 4d, Other Program Services:	
Mexican Desert Sheep: We support desert sheep conservati	on in Mexico
and Arizona.	
Expenses \$ 68320. including grants of \$ 0. Revenue \$	0.
Quest Ministries Project: The Project conducts an annual	Special Youth
Challenge Hunt for special needs youth with physical hand	
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule O (Form 990) 2009

SCHEQULE O

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Conservation Force, Inc.

Employer identification number 72-1364493

Legends Ranch in Michigan. For many of these kids, the opportunties to participate in outdoor events is a dream never thought possible. Project also conducts the annual Billy Ray Parnell Memorial Purple Heart Hunt to honor the countless men and women who unselfishly sacrificed their lives for the freedoms our nation enjoys. Each year nine purple heart recipients are chosen to experience a hunt at the Legends Ranch. Expenses \$ 42337. including grants of \$ 0. Revenue \$ 0. Polar Bear Conservation & Survival: The organization is actively working to establish a co-management agreement between Greenland and Nunavut, reviewing the status of polar bear in the McLintock Channel population, and petitioning for the sustainable use of polar bear in the Gulf of Boothia. Expenses \$ 10169. including grants of \$ 0. Revenue \$ 0. Tarpon Research Project: The organization has partnered with the Florida Fish & Wildlife Commission's Wildlife Research Institute and others to utilize DNA samples in lieu of tags to track and study tarpon in Louisiana. Expenses \$ 9669. including grants of \$ 0. Revenue \$ 0. Clean Water / Marsh Restoration / Doorway to Waterway Project: organization is participating in wetland restoration and perpetuation, holding conservation easements and servitudes, monitoring and protecting the "doorways" to our natural waterways, as well as serving LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009 932211 02-03-10

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

name of the organization	Conservation	Force, Inc.		72-1364493
on the Louisiana	a Wildlife & F	Fisheries Boar	rd, Louisiana Bl	ack Bear
Committee, Louis	siana Wildlife	e Federation E	Board, among sev	veral other
boards and commi	ttees.			
Expenses \$ 16502	. including	g grants of \$	0. Revenue \$	0.
Erongo Mountain	Rhino Sanctua	ary support.		
Expenses \$ 5000.	including	grants of \$ 5	8000. Revenue	\$ 0.
Habitat Protecti	ion Program:	The organizat	ion establishes	conservation
easements to mai	ntain wild p	laces for wild	llife on private	lands for
their perpetual	sustainable ι	ise in their r	natural condition	on.
Expenses \$ 14823	. including	g grants of \$	0. Revenue \$	0.
Camp Force: The	organization	n supports and	l runs Camp Forc	e for youth in
Expenses \$ 12350). including	g grants of \$	0. Revenue \$	0.
Argali Wild Mour	ntain Sheep Pr	coject support	in Russia.	
Expenses \$ 2465.	including	grants of \$ 0	Revenue \$ 0	•
Other Miscellane Expenses \$ 19248		and Programs.		0.
Form 990, Part V	/I, Section B,	line 11: Aft	er the complete	d Form 990 is
received by the	organization,	it is review	wed by the Board	of Directors and
formally approve			_	
LHA For Privacy Act and Pap 932211 02-03-10	erwork Reduction Act No	otice, see the Instructions	s for Form 990.	Schedule O (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

(Form 990)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Department of the Treasury Internal Revenue Service

Attach to Form 990.

2009 Open to Public Inspection

Employer identification number Name of the organization 72-1364493 Conservation Force, Inc. the IRS. Form 990, Part VI, Section B, Line 12c: To insure that the organization operates in a manner consistent with charitable purposes, the organization performs periodic reviews of the Conflict of Interest Policy. Each Director, Principal Officer, and member of a committee with governing board-delegated powers shall annually sign a statement which affirms that such person: (1) received a copy of the policy, (2) read and understands the policy, (3) agrees to comply with the policy, and (4) understands the organization's exempt purpose. Form 990, Part VI, Section B, Line 15: Officer's compensation is waived except for health and life insurance and retirement, which are allowed only for those working more than fifty hours a week in the main office, such as John and Chrissie Jackson. An independent committee approves and monitors this compensation to insure that no private insurement occurs. Form 990, Part VI, Section C, Line 19: The organization makes its Form 990, Form 1023, governing documents, conflict of interest policy and financial statements available to the public upon request. The organization keeps financial statements on a modified cash basis.