

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

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

Open to Public Inspection

A F	or the	2009 calendar year, or tax year beginning	and	ending						
B c	heck if	Please use IRS	-		D Employer identifi	cation number				
	Addres	ss   label or   THE INTERNATIONAL RHI	NO FOUNDATION							
	Name change	Doing Business As		ı <del></del>	75-2	<u>395006</u>				
$\vdash$	Instial return	See Number and street (or P.O. box if mail is	• 1	Room/suite	1 '					
$\vdash$	Termin ated Amend	Instruction Instruction Instruction		2600		)390-4800				
$\vdash$	_return	City or town, state or country, and ZIP			G Gross receipts \$	1,720,906.				
_	_tion pendin	FORT WORTH, IA 70104			H(a) Is this a group re					
		F Name and address of principal officer SUS	E ELLIS		for affiliates?	Yes X No				
		SAME AS C ABOVE empt status  X 501(c) ( 3  )	4947(a)(1) or 527		H(b) Are all affiliates ind	luded? Yes No list (see instructions)				
		te: NWW.RHINOS-IRF.ORG	4947(a)(1) or 527	<u> </u>	H(c) Group exemptio	·				
			ociation Other	I Vear		State of legal domicile: TX				
	irt I	Summary		<u>  L TÇAI</u>	Orioimation. 1991	Totale of logal definione. 121				
		Briefly describe the organization's mission or most	significant activities SURV	IVAL (	OF THE WORLD	'S RHINOS				
Activities & Governance	1	THROUGH CONSERVATION AND F								
rna		Check this box 🕨 🔲 if the organization discon		sed of mor	e than 25% of its net as	sets.				
ove	3	Number of voting members of the governing body (	Part VI, line 1a)		3	15				
ර න	4	Number of independent voting members of the gov	erning body (Part VI, line 1b)		4	<u>17</u>				
es	5	Total number of employees (Part V, line 2a)			5	0				
ĬΞ	6	Total number of volunteers (estimate if necessary)			6	0				
Act		Total gross unrelated business revenue from Par V		7	7a	0.				
	ь	Net unrelated business taxable income from Form S	90-Thine-34 CIVICU	<del>.</del>	7b	0.				
_ <del>_</del> _					Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)	JUN 2 8 2010	김 누	1,965,042.	1,720,449.				
<u></u>	9		i iš		10 270					
() Reventive	10	Investment income (Part VIII, column (A), lines 3, 4,	and fully was seen as	<u>-</u> } ⊢	10,378.	457.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c.		<b>』</b> ├	6. 1,975,426.	1 720 006				
٤	12	Total revenue - add lines 8 through 11 (must equal F			59,000.	1,720,906. 272,367.				
β		Grants and similar amounts paid (Part IX, column (A Benefits paid to or for members (Part IX, column (A)			33,000.					
C		Salaries, other compensation, employee benefits (P		-						
	162	Professional fundraising fees (Part IX, column (A), lir				68,134.				
JENNING.	,	Total fundraising expenses (Part IX, column (D), line		56.		00/1011				
Z.		Other expenses (Part IX, column (A), lines 11a-11d,			1,905,134.	1,258,816.				
Œ.	h	Total expenses Add lines 13-17 (must equal Part IX	•		1,964,134.	1,599,317.				
	1	Revenue less expenses. Subtract line 18 from line 1			11,292.	121,589.				
5 S S				В	eginning of Current Year	End of Year				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			924,247.	973,766.				
age Bases	21	Total liabilities (Part X, line 26)			90,271.	18,201.				
		Net assets or fund balances. Subtract line 21 from I	ine 20		833,976.	<u>955,565.</u>				
Pε	ırt II	Signature Block			<del></del>					
		Under penalties of perjury, I declare that I have examined this return and complete. Declaration of preparer (other than officer) is based of	, including accompanying schedules ar n all information of which preparer has a	nd statements, any knowledge	and to the best of my knowledg	ge and belief, it is true, correct,				
		MIMA GILLA			1213.	. 200				
Sig		Signature of officer		-	Date Date	LC 2010				
Her	e	,	DIDUCTION							
		SUSIE ELLIS, EXECUTIVE Type or print name and title	DIRECTOR							
		Preparer's	Date			r's identifying number				
Paid -		signature signature	4/14/	se en	lf- nployed ▶	tructions)				
	arer's	ers Firm's name (or WHITLEY PENN LIP								
Use	Only	y yours if self-employed), 1400 WEST 7TH STREET, STE, 400								
		address, and ZIP + 4 FT. WORTH, TX 761	Phone no. ▶ 8	17-259-9100						
May	the iF	RS discuss this return with the preparer shown above				X Yes No				

Form **990** (2009)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
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		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable .	11	X	<u> </u>
•	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			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX.  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	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.			
10	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII.	12	X	
128	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	,,_		
124	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	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		<u> </u>
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	_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		<u> X</u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	<u>X</u>
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Form 990 (2009) THE INTERNATIONAL RHINO FOUNDATION

Part IV | Checklist of Required Schedules (continued)

			Yes	No
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	_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			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			İ
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	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		X
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			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		_X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		_X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990 (	2009)

009) THE INTERNATIONAL RHINO FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance Part V

			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 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
За	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	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> X</u>
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?	<u>5a</u>		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		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		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7-		X
L	provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		-
С	to file Form 8282?	7c	,	x
ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
ŭ	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
q.	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		000	
		Corm	9907	2000

Form 990 (2009) THE INTERNATIONAL RHINO FOUNDATION 75-2395006 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 75-2395006 to line 8à, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 15			
b	Enter the number of voting members that are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_		_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
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 members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		!	
	by the following		.	
а	The governing body?	8a	X	
b	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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		.,,	
	,		Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		_X_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b	-,,	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	_X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		.,	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a_	<u> </u>	
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		· ·	
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	v	
40	In Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13 14	X	
14 15	Does the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a		X
	Other officers or key employees of the organization	15b		<u>x</u>
D	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions )	100		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization'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) available	or		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and	d fina	ncıal	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	on. 🕨	·	
	TOM WHITE - (817)390-8400		_	
	201 MAIN, STE 2600, FORT WORTH, TX 76102			

75-2395006

#### THE INTERNATIONAL RHINO FOUNDATION

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

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

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

Check this box if the organization did not co	•	y cu	ırrer			, dire	ecto	1	T	
(A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average hours	10					LΑ	Reportable compensation	Reportable compensation	Estimated amount of
	per	<u> </u>	Teci	laii	Il that apply)			from	from related	other
	week	recto						tho	organizations	compensation
		o d	寶			sated		organization	(W-2/1099-MISC)	from the
		truste	altrus		eg	mpeu		(W-2/1099-MISC)		organization
		ndividual trustee or director	Institutional trustee	<sub>55</sub>	Key employee	est co loyee	er			and related organizations
		를	list.	Officer	Key	Highest compensated employee	Form			Organizations
LEE M BASS										
DIRECTOR/TREASURER	2.00	X	<u> </u>	X				0.	0.	0.
JOHN LUKAS										
DIRECTOR/PRESIDENT	4.00	X		X				0.	0.	0.
DON FARST									,	
DIRECTOR/SECRETARY	2.00	X		X				0,	0.	0.
RICK BARONGI									_	
DIRECTOR/VP AFRICAN PROG	2.00	X		X		<u> </u>		0.	0.	_0.
MICHAEL FOURAKER									_	_
DIRECTOR	0.30	X			_			0.	0.	0.
BETH STEVENS										
DIRECTOR	0.30	X						0.	0.	0.
TERRI ROTH										•
DIRECTOR/VP ASIAN PROG	2.00	X		X		<u> </u>		0.	0.	0.
PETER HALL									_	•
DIRECTOR	0.30	X	<del> </del>		_	₩.		0.	0.	0.
EVAN BLUMER	0 00								_	•
DIRECTOR	0.30	<u>X</u>		-		₩-		0.	0.	0.
RANDY RIECHES	2 00	٠,								0
DIRECTOR	2.00	A		<u> </u>		₩		0.	0.	0.
BILL WARREN	2 00	<b>.</b>						0.	0.	_0.
DIRECTOR PATRICK R. CONDY	2.00	_	├	-	_	├				
DIRECTOR	0.30	v						0.	0.	_0.
DIANE LEDDER	0.50	^		-	$\vdash$	$\vdash$				
DIRECTOR	2.00	v						0.	0.	0.
MATTHEW HOHNE	2.00	^	┢╾	<del> </del>	$\vdash$	╁╌	_	- 0.		<u></u>
DIRECTOR	0.30	x						0.	0.	0.
CAMERON KERR							_			<u>.</u>
DIRECTOR	0.30	x						0.	0.	0.
OLIVIER PAGAN		<u> </u>	$\vdash$							
DIRECTOR	0.30	$\mathbf{x}$	1					0.	0.	0.
GUY COOPER		T	Т			†				
DIRECTOR	0.30	X						0.	0.	0.
					_					

Par	T VII Section A. Officers, Directors, Tru	1	nplo	yee	s, a	nd l	High	est		ees (continued)	<del>,</del>			
	, (A)	(B)			(0	•			(D)	(E)				
	Name and title	Average hours	/61		Posi		app	LΛ	Reportable compensation	Reportable compensation				
		per week	Individual trustee or director		all	yee			from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS		comp fro orga	other pensa om the inizati	tion e on
			Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					relati nizatio	
														_
											$\dashv$			
											_	_		
										· · · · · · · · · · · · · · · · · · ·				
	Total						L		0.		0.			0.
2	Total number of individuals (including but r	ot limited to th	ose	liste	d at	oove	e) wh	no re						<u> </u>
	compensation from the organization													0
											Г		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	, key	em /	plo	yee,	or h	nighest compensated er	nployee on		3		Х
4	For any individual listed on line 1a, is the stand related organizations greater than \$15									the organization		4		х
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion f					•	ces rendered to				37
Sec	the organization? If "Yes," complete Schedition B. Independent Contractors	ule J for such	pers	on					······································	. <u>-</u>		5		X
1	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of comp	ensa	ation fr	om	
	(A) Name and business	.,							(B) Description of s	ervices	Co	(C) ompen		າ
	E HOWARD GILMAN FOUNDA' 1705 WHITE OAK ROAD, Y	•							EXECUTIVE DI	RECTOR		130	),0	00.
								_						
								-						<del></del>
2	Total number of independent contractors (i \$100,000 in compensation from the organi	_	ot lii	mite	d to	tho	se lis 1	sted	d above) who received m	ore than			000.6	

Forn	n 990 (	(2009) THE ]	INTERNAT:	ONAL RHI	NO FOUNDAT	ION	75-2395006 Page <b>9</b>			
Pa	rt VII		nue							
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
환화	1 a	Federated campaigns	1a							
Contributions, gifts, grants and other similar amounts	b	Membership dues .	1b							
ts, c	С	Fundraising events	. 1c							
<u>agi</u>	d	Related organizations .	1d					•		
S.E	е	Government grants (contribut	tions) <u>1e</u>	389,116.				•		
it s	f	All other contributions, gifts, gran	nts, and							
듗죑		similar amounts not included abo	ove 1f	1331333.						
E E	g	Noncash contributions included in lines	s 1a-1f \$							
<u>0 8</u>	h	Total. Add lines 1a-1f		<u>,                                     </u>	1720449.					
				Business Code						
့်	2 a									
Serv	b	· · · · · · · · · · · · · · · · · · ·					<del>-</del>			
n S	С	· · · · · · · · · · · · · · · · · · ·								
Program Service Revenue	d	· · · · · · · · · · · · · · · · · · ·								
ğ	e									
_		All other program service reve	enue .							
$\dashv$	<u> </u>	Total. Add lines 2a-2f Investment income (including	duudondo intor	oot and	<del></del>			<u> </u>		
	3	other similar amounts)	aividends, inter	est, and	457.			457.		
	4	Income from investment of ta	ıv-exemnt hand ı	· 1				<u> </u>		
	5	Royalties	ix exempt bond i	broccedas	·-					
	•	rioyanics	(ı) Real	(II) Personal						
	6 a	Gross Rents	(1) 1 100.1	(ii) i Giodilai						
		Less rental expenses								
		Rental income or (loss)								
		Net rental income or (loss)		<b>•</b>						
		Gross amount from sales of	(i) Securities	(ii) Other						
		assets other than inventory								
	b	Less cost or other basis				,				
		and sales expenses								
	С	Gain or (loss)	-			į				
	d	Net gain or (loss)								
a	8 a	Gross income from fundraisin	ng events (not							
Other Revenue		including \$	of							
Š		contributions reported on line	1c) See							
e.		Part IV, line 18	а							
듄	b	Less: direct expenses	. b	· L						
-		Net income or (loss) from fund	•	<b>&gt;</b>						
	9 a	Gross income from gaming ac	ctivities See	1						
		Part IV, line 19	а							
		Less: direct expenses	b							
		Net income or (loss) from gan		<b>P</b> _				<del></del>		
	10 a	Gross sales of inventory, less								
		and allowances	a			:	i			
		Less cost of goods sold	b	'L						
}	<u>c</u>	Net income or (loss) from sale		Dunis O . I						
	44 -	Miscellaneous Revenu		Business Code						
	11 a									
	b		<del></del>					<del></del>		
	c d	All other revenue				-				
	_	Total. Add lines 11a-11d	-				-			
	12	Total ravanua Saginstructions			1720906	0.	0	457		

#### Part IX Statement of Functional Expenses

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

	All other organizations must comp		not required to comple		(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) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	31,590.	31,590.		
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.				
	See Part IV, lines 15 and 16	240,777.	240,777.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				<u> </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes .			_	
11	Fees for services (non-employees)				
а	Management				
b	Legal .				
С	Accounting	16,061.		16,061.	·
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	68,134.			68,134.
f	Investment management fees				
9	Other				
12	Advertising and promotion .	·			
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	25,675.		25,675.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization				
23	Insurance	435.		435.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
9	INDONESIA RHINO PROTECT	506,511.	506,511.		
a b	ZIMBABWE RHINO CONSERVA	295,520.	295,520.		
2	PROGRAM DIRECTOR FEES	130,000.		130,000.	·
d	RHINO CONSERVATION MEDI	90,995.	90,995.		
e	INDONESIA SUMATRAN RHIN	51,974.	51,974.		
f	All other expenses	141,645.	114,315.	17,708.	9,622.
25	Total functional expenses. Add lines 1 through 24f	1,599,317.	1,331,682.	189,879.	77,756.
<u>25</u> 26	Joint costs. Check here J if following		2,002,002.		,,,,,,,,,
20	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	obadanana dampaign and landraiding adiiditation				

Part X	(2009) THE INTERNATIONAL RHINO FOUNDA Balance Sheet		<u>75-2</u>	395006 Page 1
	•	(A) Beginning of year		<b>(B)</b> End of year
1	Cash · non-interest-bearing	95,067.	1	82,126
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	43,189.	3	66,500
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II			
	of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
	Part II of Schedule L		6	
g 7	Notes and loans receivable, net		7	
488e18	Inventories for sale or use		8	
g   3	Prepaid expenses and deferred charges		9	·
10:				
	basis Complete Part VI of Schedule D 10a			
	Less accumulated depreciation 10b	1	10c	
11	Investments - publicly traded securities	785,991.	11	820,448
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	· · · · · · · · · · · · · · · · · · ·
15	Other assets. See Part IV, line 11	0.	15	4,692
16	Total assets. Add lines 1 through 15 (must equal line 34)	924,247.	16	973,766
17	Accounts payable and accrued expenses	90,271.	17	18,201
18	Grants payable		18	•
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key employees,			
Į   —	highest compensated employees, and disqualified persons. Complete Part II			
ž	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	90,271.	26	18,201
	Organizations that follow SFAS 117, check here   X and complete			
ဖွာ	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	32,894.	27	202,690
10 28	Temporarily restricted net assets	801,082.	28	752,875
29	Permanently restricted net assets		29	
§	Organizations that do not follow SFAS 117, check here			
5	complete lines 30 through 34.			
27 28 29 30 31 32 33 32 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	833,976.	33	955,565
34	Total liabilities and net assets/fund balances	924,247.	34	973,766

-orm	990 (2009) THE INTERNATIONAL RHINO FOUNDATION 75-239	<u> </u>	Pa	ge I∠
Pa	t XI Financial Statements and Reporting			
	,		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	if the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		_X
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

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

2009

Open to Public Inspection

Name of the organization

Employer identification number

										5-2395006		
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t) See inst	tructions				
The orga	inization is not a	a private foundation	because it is (For lines 1	through 1	11, check	only one b	ox.)					
1 🖳	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)	).				
2	A school des	cribed in section 17	<b>'0(b)(1)(A)(ii).</b> (Attach Sc	hedule E.)								
з 🖳	A hospital or	a cooperative hospi	tal service organization o	described	ın section	170(b)(1)	(A)(iii).					
4 🗀	A medical res	search organization	operated in conjunction	with a hos	pıtal desci	nbed in <b>se</b>	ction 170	(b)(1)(A)(ii	i). Enter t	the hospital's name	,	
	city, and stat					_						
5	_		benefit of a college or ur	niversity ov	wned or op	erated by	a governi	mental uni	t describe	ed in		
	7	(b)(1)(A)(iv). (Compl	•									
6		•	ent or governmental unit					6 41				
7 LX			eives a substantial part e	or its supp	ort from a	governme	ental unit c	or from the	general	public described in		
8	section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9	7		eives. (1) more than 33 1			rom contri	butions, m	nembershi	p fees, ar	nd gross receipts fro	om	
•	-	-										
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975											
		509(a)(2). (Complete			,		•	, ,		,		
10 🗀	7		perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	<b>1</b> ).				
11		-	perated exclusively for th	· · · · · · · · · · · · · · · · · · ·	-			-	v out the	purposes of one or		
			ations described in section									
	describes the	e type of supporting	organization and comple	ete lines 1	1e through	11h.						
	a Type	ı b 🗆	Type II c	: 🔲 тур	e III - Func	tionally int	egrated		d 🗀	Type III - Other		
е 🗀	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified (	persons other than		
	foundation m	nanagers and other t	han one or more publicly	, supporte	d organiza	itions desc	cribed in s	ection 509	9(a)(1) or	section 509(a)(2)		
f	If the organiz	ation received a writ	tten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box								Ш	
g	•		organization accepted ar			-				[ <del></del>		
	(i) A perso	n who directly or inc	lirectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (ıi) and (	ııı) below,		No_	
	•	• •	upported organization?							11g(i)		
	• • • • •	•	n described in (i) above?							11g(ii)		
	(iii) A 35% (	controlled entity of a	ı person described in (i) o	or (II) above	∍?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
			(iii) Type of	(iv) Is the s	organization	(v) Did voi	notify the	(vi) Is	the			
	ne of supported	(ii) EIN	organization		sted in your		ion in col.	organizátio	on in col.	(vii) Amount of support		
OI.	ganization		(described on lines 1-9 above or IRC section		document?		support?	(i) organız U.S	.?	зирроге		
			(see instructions))	Yes	No	Yes	No	Yes	No			
			, , , , , , , , , , , , , , , , , , , ,		1.74			1			—	
		<u> </u>										
										<del>-</del>		
								1				
										<del></del>		
	<u>-</u>	-						<del>                                     </del>				
		<u> </u>	1									
				1	1		1	I	1			

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complète only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (e) 2009 (a) 2005 (c) 2007 Calendar year (or fiscal year beginning in) (b) 2006 (d) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 2,275,581 1,785,890 1,618,375 1,965,042 1,720,449. 9,365,337. 2 Tax revenues levied for the organization'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 2,275,581 1,785,890 1,618,375. 1,965,042 1,720,449. 9,365,337. 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 781,186. 8,584,151. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1,720,449 9,365,337. 2,275,581 1,785,890 1,618,375 1,965,042 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 54,580. 10,378. 457. 144,174. 23,364. 55,395. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 9,509,511. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 90.27 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 98.50 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ▶LXJ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% 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-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% 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-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009 THE INTERNATIONAL RHINO FOUNDATION

75-2395006 Page 2

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) 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.") Gross receipts from admissions. merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (f) Total (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 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 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) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 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 more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 19 a, 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 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

Department of the Treasury

Internal Revenue Service

(Form 990)

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

THE INTERNATIONAL RHINO FOUNDATION

Employer identification number 75-2395006

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 II 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) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Total acreage restricted by conservation easements 2b 2c Number of conservation easements on a certified historic structure included in (a) d 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 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 Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		CRNATIONAL								Page Z
Par	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following the	at are a s	ignifican	t use of its	collection	items
	(check all that apply):		_							
а	Public exhibition	C	; <u> </u>	Loan or exc	hange progi	rams				
b	Scholarly research	•	• 🔲	Other	<del> </del>					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how t	hey further t	he organizat	tion's exe	mpt pur	ose in Par	t XIV.	
5	During the year, did the organization solicit o	r receive donations	of art, h	istorical trea	sures, or oth	her sımıla	r assets			
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	ınızatıon's c	ollection?				Yes	No.
Par	t IV   Escrow and Custodial Arran	gements. Compl	ete if or	ganization a	nswered "Ye	es" to Foi	m 990, F	art IV, line	9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for	contribution	ns or other a	ssets no	included	j		
	on Form 990, Part X?		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowina	table <sup>.</sup>		•				
_									Amount	
С	Beginning balance						1c			
	Additions during the year				•		1d			
	Distributions during the year						1e			
4	Ending balance						1f			
0-	Did the organization include an amount on Fo	 orm 000 Bort V line	212					· -	Yes	□ No
	· ·	Jim 990, Fart A, line	211	•		•			_ 1es	NO
Par	t V Endowment Funds. Complete if	the erganization or	noworod	"Voo" to Fo	rm 000 Port	t 1\/_lino :	10		-	
rai	Elidowinielit i dilds. Complete ii							haal	(-) Faur	vaara baak
_	<u></u>	(a) Current year	{D} F	Prior year	(c) Two yea	ars dack	(a) Tillee	years back	(e) Four	years back
1a	Beginning of year balance	<del></del>	<del></del>							<del></del> ,
b	Contributions	<del></del>								
С	Net investment earnings, gains, and losses		-							
d	Grants or scholarships	-								
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance				<u> </u>					
2	Provide the estimated percentage of the year	r end balance held a	as							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment >	%								
С	Term endowment ▶	%								
За	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	and administe	ered for t	he organ	ızatıon		
	by.	_							Γ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations			•					3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required of	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the								<u> </u>	
Par	t VI Investments - Land, Building				). Part X. line	10				
	Description of investment	(a) Cost or o			or other	1	ccumulat	ed	(d) Book	value
	Description of investment	basis (investi			(other)	1	preciatio		(U) DOOR	·uiuo
4-	Land	223.0 (			·	"				
		<b> </b>		<del> </del>					<u></u>	
	Buildings .			<del> </del>		-				<del></del>
	Leasehold improvements			<del> </del>	<del></del>					·
	Equipment			<del> </del>				-		
	Other (2)	15 222 5		(2)	10(-1)	<u>L.</u>				
Total	l. Add lines 1a th <u>rough 1e. (Column (d) must e</u> e	qual ⊢orm 990, Part	X, colui	mn (B), line 1	1U(C)) , ,					0.

Schedule D (Form 990) 2009

(a) Description of security or category (not Book value (cost or end-of-year market value (cost or end-of-ye	Schedule D (Form 990) 2009 THE INTERN  Part VII Investments - Other Securities.	ATIONAL RHINO See Form 990, Part X, line 12	FOUNDATION	75-2395006 Page
Closely held equity interests Other  Total. (Col (b) must equal form 990, Part X, col (8) line 12.)  Part VIII Investments - Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Blook value  Cost or end of year market value  Total. (Col (b) must equal form 990, Part X, col (8) line 13.)  Part IX   Other Assets. See Form 990, Part X, line 15.  (a) Description  (b) Blook value  (c) Method of valuation  Cost or end of year market value  (b) Blook value  (c) Method of valuation  Cost or end of year market value  (c) Method of valuation  Cost or end of year market value  (c) Method of valuation  Cost or end of year market value  (d) Description  (e) Blook value  (e) Description  (b) Blook value  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Forderal income taxes.	(a) Description of security or category		(c) Met	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)  Part VIII   Investments - Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Book value  Cost or end of year market value  Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)  Part IX   Other Assets. See Form 990, Part X, tine 15.  (a) Description   (b) Book value  (b) Book value  (c) Method of valuation: Cost or end of year market value  (c) Method of valuation: Cost or end of year market value  (c) Method of valuation: Cost or end of year market value  (a) Description   (b) Book value  (b) Book value  Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)  Part X   Other Liabilities. See Form 990, Part X, tine 25.  (a) Cescription of liability (b) Amount  Part IX   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.)  Part X   Other Liabilities. See Form 990, Part X, col (B) line 25.	Financial derivatives			
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Part VIII   Investments - Program Related. See Form 990, Part X, line 15.   (c) Method of valuation Cost or end of year market value				100000 1
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(a) Description  (b) Book value  (c) Book value  (d) Description  (e) Must equal Form 990, Part X, col (B) line 15 )  Part X   Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Amount  Federal income taxes  (a) Description of liability (b) Amount  Federal income taxes  Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncoertain tax positions under FIN 48.	Part IX Other Assets. See Form 990. Part X. lin			
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uncertain tax positions under FIN 48.				
232053		otnote to the organization's	financial statements that rep	oorts the organization's liability for
	932053			Schedule D (Form 990) 200

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	dule D (Form 990) 2009 THE INTERNATIONAL RAINO FC					2393006 Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	o Audit	ed Fina	inciai State	emen	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			.   1		1,720,906.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		1,599,317.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		121,589.
4	Net unrealized gains (losses) on investments		•	4		
5	Donated services and use of facilities			5		
6	Investment expenses			6		0.044
7	Prior period adjustments .			7	•	<2,241.
8	Other (Describe in Part XIV.)			8		.0 041
9	Total adjustments (net). Add lines 4 through 8			9		<2,241.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 at XII Reconciliation of Revenue per Audited Financial Statements.		ith Pov	10 Dor F	Octur	119,348.
		GIILO VV	IUI Nev	ellue per r	1 1	1,720,906.
1	Total revenue, gains, and other support per audited financial statements				1	1,720,900.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	ا ء ا				
а	Net unrealized gains on investments .	2a			-	
ь	Donated services and use of facilities	2b			┨ ┃	
С.	Recoveries of prior year grants	2c	_		+	
d	Other (Describe in Part XIV.)	2d			ا م	0
e	Add lines 2a through 2d				2e 3	1,720,906.
3	Subtract line 2e from line 1				3	1,720,300.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	المدا				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b			1	
b	Other (Describe in Part XIV.)	40			1 40	0.
c	Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		•		4c	1,720,906.
5 Pai	rt XIII Reconciliation of Expenses per Audited Financial Statem	nents V	Vith Exr	enses per		
1	Total expenses and losses per audited financial statements				1	1,601,558.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	•				
ے a	Donated services and use of facilities	2a				
a h	Prior year adjustments	2b		2,241.	1 1	
	Other losses	2c			1	
4	Other (Describe in Part XIV.)	2d			7	
e	Add lines 2a through 2d	,			2e	2,241.
3	Subtract line 2e from line 1				3	1,599,317.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b			1 1	
	Add lines 4a and 4b			•	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	1,599,317.
	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also com					
			_			

## 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.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

For the contract of the state o

Nam	e of the organization					Employer identi	fication number
тні	E INTERNATION	IAI, RHINO	FOUNDAT	TON		75-23950	0.6
Pa	rt I General Info	rmation on A	Activities Out	tside the United States. Compl	ete if the orgar	nization answered '	'Yes"
	to Form 990, Par						
1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of the g	rants or assista		
	grantees' eligibility for th	ne grants or assi	stance, and the	selection criteria used to award the gra	ants or assistar	nce?	Yes 🔲 No
2	For grantmakers. Desc	cribe in Part IV th	e organization's	procedures for monitoring the use of g	rant funds out	side the United Sta	ates.
_	A-1 1		(F 000) f - d	dd.			
3		_	1	ditional space is needed.)	(a) If oats	utu liatad in (d)	(6) Total
	(a) Region	(b) Number of offices	(c) Number of employees or	<ul><li>(d) Activities conducted in region</li><li>(by type) (i e , fundraising,</li></ul>		vity listed in (d) gram service,	(f) Total expenditures
		in the region	agents in	program services, grants to		specific type	for region
		}	region	recipients located in the region)		e(s) in region	
		<u> </u>				<del></del>	
							İ
							<u> </u>
		1					
				- "			
					· <del>-</del>		
		<del> </del>					<del> </del>
<b>.</b>	ı <b></b>	] ,					

THE INTERNATIONAL RHINO FOUNDATION

Schedule F (Form 990) 2009

Use Schedule F-1 (Form 990) if additional space is needed

Part II

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 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Page 2

75-2395006

×

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)
		ONITED KINGDOM	SUPPORT FOR RHINO RESOURCE INFORMATION CENTER	15,000.	15,000.WIRE TRANSFER	0.		
		INDIA	ANTIPOACHING SUPPORT FOR ORANG WILDLIFE SANCTUARY	18,517.	18,517.WIRE TRANSFER	0		
		INDIA	SUPPORT FOR LARGE ANIMAL CONSERVATIONIST POSITION	7,200.	7,200.WIRE TRANSFER	0		
		INDIA	INDIAN RHINO VISION 2020 - 2010 IRANSLOCATIONS	73,125.	73,125.WIRE TRANSFER	0		
		ONITED KINGDOM	PAN AFRICAN PHYLOGEOGRAPHY AND EVOLUTIONARY HISTORY OF THE BLACK RHINO	41,485.	41,485.WIRE TRANSFER	0.		
		NDIA	POPULATION GENETIC MONITORING OF INDIAN RHINOS IN ASSAM: AN EVALUATION OF GENETIC	17,950.	17,950.WIRE TRANSFER	0.		
		CANADA	GENETIC ESTIMATES OF JAVAN RHINO POPULATION SIZE AND SEX RATIO USING FECAL	17,500.	17,500.WIRE TRANSFER	0.		
		TANZANIA	SUPPORT FOR SELCUS RHINO TRUST BLACK RHINO ACTIVITIES.	30,000.	30,000.WIRE TRANSFER	0.		

SEE PART IV FOR COLUMN (D) DESCRIPTIONS Enter total number of other organizations or entitles

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

N

က

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by

Schedule F (Form 990) 2009

Page 3

75-2395006

THE INTERNATIONAL RHING FOUNDATION

Schedule F (Form 990) 2009

Part III 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

	additional space is no	himborof	A Amount of		(A) Amount of	o notation (a)	(h) Mathod of
(a) Type of grant or assistance	(b) Region	recipients	cash grant	cash disbursement	non-cash assistance	non-cash assistance	(book, FMV, appraisal, other)
					:		
							:

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 THE INTERNATIONAL RHING FOUNDATION 75-2395006 Page 4 Part IV Supplemental Information
Complete this part to provide the information required in Part I, line 2, and any additional information.
PART II, COLUMN (D):
REGION: INDIA
(D) PURPOSE OF GRANT: POPULATION GENETIC MONITORING OF INDIAN RHINOS IN
ASSAM: AN EVALUATION OF GENETIC DIVERSITY AND POPULATION DIFFERENTIATION
THROUGH NON-INVASIVE SAMPLING.
IMOUGH NON INVADIVE BANEETING:
REGION: CANADA
(D) PURPOSE OF GRANT: GENETIC ESTIMATES OF JAVAN RHINO POPULATION SIZE
AND SEX RATIO USING FECAL SAMPLES AND OPTIMIZING GENOTYPING AND GENETIC
SEXING OF SUMATRAN RHINO FECALS; BUILDING ON RECENT PROGRESS.
COMPANDE E DADE T LINE 2.
SCHEDULE F, PART I, LINE 2:
THE ORGANIZATION REQUIRES GRANT RECIPIENTS TO SUBMIT REPORTS ON THE USE
OF GRANT FUNDS.

Page 2	(i) Method of valuation (bbok, FMV, appraisal, other)	•				
	(h) Description of non-cash assistance					
75-2395006 F (Form 990), Part II, line 1	(g) Amount of non-cash assistance	0	0.	0.		
75-23 Schedule F (Form 9	(f) Manner of cash disbursement	12,000.WIRE TRANSFER	5,000.WIRE TRANSFER	3,000.WIRE TRANSFER		
ON United States, (	(e) Amount of cash grant	12,000.8	5,000.1	3,000.1		
1 (Form 990) 2009 THE INTERNATIONAL RHINO FOUNDATION 75-2395006 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, Ine 1)	(d) Purpose of grant	SUPPORT FOR THE AFRICAN RHINO SPECIALIST GROUP.	STRENGTHENING THE SECURITY OF RHINOS IN SOUTHERN AFRICA.	SUPPORT FOR THE ASIAN RHINO SPECIALIST GROUP.		
THE INTERNATIONAL RHI	(c) Region	SOUTH AFRICA	SOJIH AFRICA	INDIA		
DO THE I	(b) IRS code sectron and EIN (if applicable)					
Schedule F-1 (Form 990) 2009  Part II   Continuation of G	96					

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number 75-2395006 THE INTERNATIONAL RHINO FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants а Mail solicitations Internet and email solicitations f X Solicitation of government grants b Special fundraising events Phone solicitations C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No MARGARET MEYER MOORE CONSULTING Х 0. 68,134 <68,134.> 68,134. Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing TX

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

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through col (c)) (event type) (event type) (total number) Gross receipts 2 Less: Charitable contributions Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages 8 Entertainment Other direct expenses 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? 9a b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain. 11 Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer chantable gaming?

Schedule G (Form 990 or 990-EZ) 2009 THE INTERNATIONAL RHINO FOUNDATION

75-2395006 Page 2

Schedule G (Form 990 or 990-EZ) 2009 THE INTERNATIONAL RHINO FOUNDATION	13-439	<u> </u>	<u>о</u> Ра	age 3
			Yes	No
13 Indicate the percentage of gaming activity operated in				
a The organization's facility	%			
b An outside facility	%_			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords.			
Name ▶				
Address >				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amof gaming revenue retained by the third party ▶ \$	ount			
c If "Yes," enter name and address of the third party:				
Name				
Address ►				
16 Gaming manager information.				
Name				
Gaming manager compensation  \$				
Description of services provided				
Director/officer Employee Independent contractor				
17 Mandatory distributions:				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	}			
retain the state gaming license?		17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spen	t in the			
organization's own exempt activities during the tax year > \$				

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Open to Public Inspection

▶ Attach to Form 990.

Name of the organization THE INTERNATIONAL RHIND	NATIONAL.		FOITHDATTON			-	Employer identification number 75-239506
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of	o substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	lion
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for moni	toring the use of grant	funds in the United	d States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	e United States. C	complete if the organical	anization answered "Y	res" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash grant and address of organization (e) EIN (f) Method of cash grant non-cash assistance or government or government assistance or government or government or government assistance or government or gove	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, Appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PAIM BEACH ZOO 1301 SUMMIT BOULEVARD WEST PAIM BEACH, FL 33405	59-1259270	501 (C) (3)	28,590.	Ö			EFFECTS OF ACID-BASE, ELECTROLYTE, ENERGY AND CARDIORESPIRATORY IMPALANCES DURING CAPTURE
INTERNATIONAL RHINO KEEPER'S ASSOCIATION - 581705 WHITE OAK ROAD - YULEE, FL 32097		501 (C) (3)	3,000.	0.			SUPPORT FOR THE INTERNATIONAL RHINO KEEPER'S WORKSHOP.
<ul> <li>2 Enter total number of section 501(c)(3) and government organizations</li> <li>3 Enter total number of other organizations</li> </ul>	nd government or	ganizations					2.

Schedule I (Form 990) 2009

THE INTERNATIONAL RHINO FOUNDATION

Schedule I (Form 990) 2009

Page 2

75-2395006

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, Ine 22
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					•
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: THE ORGANIZATION REQUIRES GRANT RECIPIENTS TO	GANIZATI	ON REQUIRE	S GRANT RE	CIPIENTS TO	
SUBMIT REPORTS ON THE USE OF GRANT FUI	FUNDS.				

COLUMN (H): LINE 1, PART II NAME OF ORGANIZATION OR GOVERNMENT: PALM BEACH ZOO

ELECTROLYTE, (H) PURPOSE OF GRANT OR ASSISTANCE: EFFECTS OF ACID-BASE, ENERGY AND CARDIORESPIRATORY IMBALANCES DURING CAPTURE AND CONFINEMENT ON

BOMA ADAPTION IN WHITE RHINOS.

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

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

THE INTERNATIONAL RHINO FOUNDATION

Employer identification number 75-2395006

FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE COMMITTEE, WHICH HAS
THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTORS, REVIEWED A COPY
OF THE FORM 990 AND RELATED SCHEDULES PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: DIRECTORS ARE REQUIRED TO ANNUALLY
DISCLOSE CONFLICTS OF INTEREST. THIS POLICY IS REGULARLY AND CONSISTENTLY
MONITORED BY THE PROGRAM DIRECTOR.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART XI, LINE 2C
THE EXECUTIVE COMMITTEE, WHICH HAS THE AUTHORITY TO ACT ON BEHALF OF
THE BOARD OF DIRECTORS, ASSUMES RESPONSIBILITY FOR THE SELECTION OF AN
INDEPENDENT ACCOUNTANT TO AUDIT THE ORGANIZATION'S FINANCIAL
STATEMENTS.

#### **International Rhino Foundation**

Form 990, Part III: Statement of Program Service Accomplishments 2009

#### Organizational Overview:

In 1989, in response to alarming poaching rates of black rhinos in Zimbabwe, a group of concerned individuals and institutions founded the International Black Rhino Foundation to assist in the conservation of black rhinos through efforts in the wild and in captivity. In part because of the International Black Rhino Foundation's support, poaching was virtually eliminated and Zimbabwe's black rhino population began to stabilize.

In 1993, recognizing that the escalating crisis facing all five rhino species was not receiving the attention it deserved, the International Black Rhino Foundation expanded its mission and became the International Rhino Foundation (IRF). For the last 17 years, IRF has funded and operated rhino conservation programs in Africa and Asia, focusing expertise and resources in areas where rhinos are most in need of protection, and where conservation efforts will have the most significant impact.

IRF also works with conservation centers and zoos to provide linkages between captive and wild populations of rhinos, with the ultimate objective of helping captive populations become a truly integral part of conservation strategies for rhinos. Since its founding, IRF has provided funding for scientific research that enhances the ability to manage rhinoceros populations both in the wild and in captivity.

At the heart of IRF's vision is the belief that these magnificent species should endure for future generations, and that protecting rhinos ensures the survival of many other species that share their habitat, including people.

# Summary of 2009 Programs and Projects:

Zimbabwe Rhino Conservation – The IRF-supported Lowveld Rhino Trust manages rhino monitoring and anti-poaching units in Zimbabwe. Its rhino operations team anesthetized and treated 72 rhinos in 2009. Treatments ranged from wire snare removal and pre-emptive horn removal to reduce the risk of poaching, to translocations of animals from high-risk poaching areas to safer conservancies. With poaching reaching a 15-year high in 2009, the Trust is increasingly being forced to undertake emergency operations to rescue rhinos. Fifty-three emergency translocations took place in 2009, and six orphaned calves were hand-reared.

Selous Black Rhino Project, Tanzania - Black rhinos were believed to be extinct in the Selous until 1990, when black rhino tracks were detected. IRF's partner, the Selous Rhino Trust, was then able to confirm that a viable population of black rhinos exists in the Selous. The Selous Rhino Trust, along with the Tanzania Wildlife Department, surveys and monitors rhinos in the Selous to determine population, distribution and status and to assure their long term security. A team of 12 rangers regularly patrols and carries out basic anti-poaching activities, also reporting on animal sightings and signs of potential threats. At least 19 black rhinos have been confirmed

in the northern part of the Reserve and signs of at least another 20 have been found in limited surveys in the south.

India Rhino Conservation – IRF provided support for implementing *Indian Rhino Vision 2020*, a collaborative effort among the government of Assam (India), WWF -India, and IRF with the goal of increasing the population of Indian rhinos to 3,000 by the year 2020 and translocating animals in order spread the population out more evenly over at least seven national parks. The success of this program is heavily dependent on both government and community support and involvement. IRF and partners are working with local community organizations and government as well as park authorities to implement the IRV 2020 recommendations. Translocations planned for 2009 could not take place due to problems with procurement of the immobilization drugs. IRF funded construction of a fence to keep rhinos from straying out of Manas National Park in 2009, which has also led to significant increase in support from local communities as the fence has eliminated conflict with rhinos, as well as allowing farming in areas previously subject to intense elephant crop-raiding.

Indonesian Rhino Conservation – IRF supports three major rhino conservation initiatives: *Rhino Protection Units* (RPUs) rigorously patrol forests to destroy snares and traps (the main made of poaching for these species) and apprehend poachers. By gathering intelligence from local communities, RPUs also proactively prevent poaching attempts before they take place. RPUs have been very effective in protecting the rhino from poachers - only five Sumatran rhinos have been lost to poachers since the inception of the program, and no Javan rhinos have been killed. By virtue of the RPUs' consistent presence and patrolling, other species, such as Sumatran tigers and elephants also benefit, as does the ecosystem as a whole. Eight patrol units operate in Bukit Barisan Selatan National Park in Sumatra, one of the highest priority areas for Sumatran megafauna. Approximately 60-85 Sumatran rhino (the second largest population in the world) inhabit the Park, along with 40-50 Sumatran tigers and around 500 Asian elephants. Five patrol units operate in Way Kambas National Park, which has a resident population of 40+ Sumatran rhino (the third largest population of Sumatran rhinos) and is also the site of the Sumatran Rhino Sanctuary. Four RPUs protect Javan rhinos in Ujung Kulon National Park, where the only viable population of the species exists (estimated between 38 and 44 animals).

The Sumatran Rhino Sanctuary (SRS) encompasses 100 hectares (247 acres) for propagation, research and education, and received its first rhino in 1998. Until recently, the Sanctuary held only one pair of animals, which were not reproductively sound. The SRS is now home to five animals and is staffed by two full-time Indonesian veterinarians, ten keepers, and several administrative and support staff. Over the years, a number of circumstantial, medical, and management problems have been addressed and overcome. As a result, within the last decade, the husbandry and captive propagation of Sumatran rhinos has passed from its infancy to its adolescence. The IRF has been steadfastly working to address these issues with the expertise of numerous veterinarians and reproductive biologists.

Javan Rhino Conservation - Ujung Kulon National Park is home to the only remaining viable population of Javan rhinos in the world – no more than 44 animals. IRF works closely with Yayasan Badak Indonesia (YABI), its implementing partner in Indonesia, WWF-Indonesia and the local, provincial, and national government towards the species' conservation. In June 2009,

IRF and partners funded a survey (including rapid habitat and social-cultural assessments) which recommended an initial expansion of the Javan rhino range into the Gunung Honje area of Ujung Kulon National Park. (Javan rhinos currently wander into this area occasionally, but there is not a resident population.) IRF is working to obtain formal approval of the Government of Indonesia for this expansion so that work can begin, including clearing the site for an electric fence and adjacent patrol road, constructing small bridges and the electric fence, habitat management such as clearing and planting rhino food plants and providing for a water supply and saltlick, constructing new guard posts, hiring guards and other staff, and socialization work with local communities.

Rhino Conservation Medicine Program - IRF's Rhino Conservation Medicine Program (RCMP), a collaboration among IRF, Fossil Rim Wildlife Center, and Cornell School of Veterinary Medicine, which provides veterinary expertise to the Sumatran Rhino Sanctuary (SRS). RCMP staff provide advanced training for SRS vets and Indonesian students on rhino veterinary knowledge and skills. The RCMP also provides training opportunities for Cornell University students, residents and faculty in field conservation medicine, melding medicine principles with global health and conservation issues to link wildlife health, ecology, domestic animals and people.

Technical Assistance – IRF provided funding to other rhino-focused groups, including support for the Chairman and Scientific Officer of the IUCN/SSC African Rhino Specialist Group, Chairman of the IUCN/SSC Asian Rhino Specialist Group, the Rhino Resource Center (a central repository for rhino information), and funding for a Large Mammal Conservationist for the Wildlife and Areas Welfare Trust in India.

Research - As part of its commitment to rhino conservation research, IRF issued a request for pre-proposals, and invited 11 of the 30 pre-proposals received to submit a full proposal for funding consideration. Pre-proposals and proposals were reviewed by independent outside researchers and five were selected for grant awards, with a total of \$240,325 awarded. The projects are: Radio frequency identification system for monitoring wild rhino populations (\$25,000); Pan-African physiogeography and evolutionary history of the black rhinoceros (\$53,945); Population genetic monitoring of Indian rhino in Assam: an evaluation of genetic diversity and population differentiation through non-invasive sampling (\$55,100); Effects of acid-base, electrolyte, energy and cardiorespiratory imbalances during capture and confinement on boma adaptation in white rhinos (\$36,280); and Genetic estimates of Javan and Sumatran rhino population size and sex radio using fecal samples - building on recent progress (\$70,000).

## Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

• If yo	ou are filing for an <b>Automatic 3-Month Extension, complete only Part I</b> and check this box ou are filing for an <b>Additional (Not Automatic) 3-Month Extension, complete only Part II</b> (on page 2 of this o <b>t complete Part II unless</b> you have already been granted an automatic 3-month extension on a previously fi	-	
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		<del></del>
A corp Part I	ooration required to file Form 990-T and requesting an automatic 6-month extension - check this box and comonly	nplete	<b>▶</b> □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar income tax returns.	exter	nsion of time
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or compust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits.	cally if	f (1) you want the additional ated Form 990-T Instead,
Type oprint	or Name of Exempt Organization	Emp	loyer identification number
•	THE INTERNATIONAL RHINO FOUNDATION	7	75-2395006
file by to due dat filing you return	e for Number, street, and room or suite no. If a P.O. box, see instructions  1 201 MATN STREET. NO. 2600		
instructi			
<b>X</b>	Form 990-EZ Form 990-T (trust other than above)  Form 990-PF Form 1041-A  Form 990-EX Form 990-T (trust other than above)  Form 990-PF Form 1041-A  Form 990-PF Form 1041-A	227 069	
Tel ● Ifti ● Ifti	TOM WHITE be books are in the care of ▶ 201 MAIN, STE 2600 - FORT WORTH, TX 761 be books are in the care of ▶ 201 MAIN, STE 2600 - FORT WORTH, TX 761 be be organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all	s is fo	or the whole group, check this pers the extension will cover.
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt  AUGUST 16, 2010 , to file the exempt organization return for the organization named a is for the organization's return for.  X calendar year 2009 or tax year beginning , and ending		The extension
2	If this tax year is for less than 12 months, check reason		Change in accounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a_	\$
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
b		0.5	<b>  \$</b>
b	tax payments made Include any prior year overpayment allowed as a credit	3b	<del></del>
b c	tax payments made Include any prior year overpayment allowed as a credit  Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)  See instructions	3c	\$ N/A