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_{Form} 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service benefit trust or private foundation)

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

<u> </u>	For the 2	012 cale	ndar year, or tax yea	r beginning	January 1	, 2012, a	and endin	g De	<u>cemb</u>	<u>er 31</u>	, 20 12	
B	Check if ap	oplicable:	C Name of organization	Yellowstone	to Yukon Conser	vation initiative)		P	Employer	identification num	ber
	Address ch	nange	Doing Business As								810535303	
	Name char	nge	Number and street (or	P.O box if mai	I is not delivered to s	treet address)	Room/sui	te	E	Telephone	number	
	Initial return	n n	P O Box 157								103-678-7097	
	Terminated	,	City, town or post offic	ce, state, and Z	IP code							
	Amended r	return	Bozeman MT 59771-	0157					G	Gross rec	eipts \$ 1.9	27,392
$\overline{\Box}$			F Name and address of		Karsten Heuer			H(a) is			r affibates? Yes	
		1	1240 Railway Ave, U								luded? Yes	_
	Tax-exemp		✓ 501(c)(3)	501(c) (4947(a)(1) or	527				ist. (see instructions)	
J	Website:		v.y2y.net	== 00.(0) 1				H(c) 6	es auora	remotion r	number ▶ n/	/a
- -			Corporation Trust	Associati	on ☐ Other ▶	L Ye	ar of format	1	$\overline{}$	 `		MT
P	art I	Summ				,	<u> </u>		000	otato o	. togal donnollo	<u></u>
			scribe the organiza	tion's missic	on or most signif	icant activities					·	
	1 -		-		-				laa bal			
Activities & Governance	1		wstone to Yukon Cor			locus on conne	scring and	protecti	ng nai	DILLET ITO	n tellowsione to	
nan	<u>.</u>	ukon 80	that together people	and nature o	can innive.				-			
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ĝ							isposea c	i more i	man Z	1 . 1	s net assets.	_
٩ğ			of voting members						• •	3		6
ijes	1		of independent votir	•						4		6
Ξ̈			nber of individuals e				-			5		2
Ac	1		nber of volunteers (e		• •					6	- · · · · · · · · · · · · · · · · ·	0
	1		elated business reve			•				7a		0
	b N	let unrel	ated business taxal	ole income f	rom Form 990-T	, line 34			• •	7b		0
						CEIVEL	\ \	Pric	or Year		Current Year	
Revenue	1		tions and grants (Pa	2,10	03,817	1,9	09,635					
	9 P	rogram	service revenue (Pa	art VIII, line 2					14	15,615		17,550
	10 lr	nvestme	nt income (Part VIII, enue (Part VIII, colu	, column (A),	lines 3, 4, and 7	(d) or 2013	RS-0			122		207
ш	11 0	Other rev	enue (Part VIII, colu	ımn (A), lines	5, 6d, 3 d, 9c, ∕h	ob, and 1 fe) .	12			0		0
	12	otal reve	enue-add lines 8 th	rough 11 (mi	ust equal Part VII	L.column (A), li	ne, 12)		2,2	19,554	1,9	27,392
	13 G	rants ar	nd similar amounts į	paid (Part IX	, column (A), line	STREN, U)	ı		0	····	0
		Benefits paid to or for members (Part IX, column (A), line 4)										
g	15 S	alaries, d	other compensation,	employee be	enefits (Part IX, co	olumn (A), lines	5–10)			56,047		84,663
Expenses	1		nal fundraising fees		-					0		0
8	1		draising expenses (I	-		•					*	
ũ	1		oenses (Part IX, colu						1.67	78,114	2.2	95,619
	1		enses. Add lines 13				5) . [•	34,161		80,282
	II.	-	less expenses. Sub	•	•		′ F			15,393		52,890
ㅎ	1						E	Seginning o	_		End of Year	<u> </u>
\$ E	20 T	otal ass	ets (Part X, line 16)				🗠		Q	9,463	5.	45,951
t Assets	21 T		ilities (Part X, line 26	6)						24,340		23,718
題	. [ts or fund balances.		e 21 from line 20	 1	· · Ի			75,123		
			ure Block	- Cubtract III	0 27 110111 11110 21				- 3,	3,123		22,233
			ry, declare that have ex	vamined this re	turn including accom	nanvina echadula	e and etator	neate and	to the l	pact of my	knowledge and be	ind it is
tru	ie, correct, a	and comple	et Declaration of prepar	rer (other than o	fficer) is based on all	information of whi	ch preparer	has any k	nowledg	30 ,	/ NIOWIEUGE AND DE	iici, it is
			m/h						7 -	7 /a/	12	
Siç	an 📗	Signs	ature of officer						Date	44	12	
He		, J.	1/ hl	ELSON	Treasu					'		
	"	Tyme	or print name and title	2200,0	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				_			
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<u> </u>			ddress ▶			- t · · · · ·		1	Phone	no.		
			s this return with the			e instructions)	<u> </u>	<u> </u>	<u> </u>		Yes _	
For	Panerwo	rk Reduc	ction Act Notice, see	the separate	instructions.		Cat No	11282Y			Form 99 0	J (2012)

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Form 99	00 (2012)	Page 2
Part		
	Check if Schedule O contains a response to any question in this Part III	<u>. </u>
1	Briefly describe the organization's mission:	
	Connecting and protecting habitat from Yellowstone to Yukon so people and nature can thrive	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	 No
•	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Z Na
	If "Yes," describe these changes on Schedule O	<u>v</u> N∪
4	Describe the organization's program service accomplishments for each of its three largest program services, as meast	ired by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	the total expenses, and revenue, if any, for each program service reported	
4a)
	In its Conservation program, Y2Y studies habitat needs of wildlife in the Rocky, Purcell & Mackenzie mountains to determine w	
	configuration of habitats & linkages between them are needed for wildlife populations to survive over time. Y2Y has researched	
	designed for publication conservation strategies for specific species, such as grizzly bears and specific priority landscapes such as grizzly bears.	
	wildlife conflict issues through education, community engagement and research Y2Y is also collaborating on the issue of	2119
	climate change and the role of landscape connectivity in climate change adaptation Y2Y produces & disseminates maps &	
	narratives on an ongoing basis describing wildlife & human needs. The organization makes Y2Y science products available for	land
	management decisions and conservation work of partners. It provides networking services (website, listserve, electronic news,	
	workshops), organizes meetings and science workshops	
4b	(Code:) (Expenses \$ 224,998 including grants of \$ 0) (Revenue \$ 17,550)
	In its Communications program, Y2Y works to ensure healthy coexistence of wildlife and communities within the Y2Y region.	•
	Y2Y develops tools and messages to effectively communicate with foundations, businesses, governments, and members of the	<u>, </u>
	general public. The organization produces publications, makes visual presentations, attends & participates in public events,	
	collaborates on producing museum exhibits, maintains a website (www.y2y.net) and online news service for public education	<u>It</u>
	communicates and responds to enquiries from various audiences regarding wildlife needs of the region.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	<u> </u>
	(Codds) (Expended # moldaling grants of #) (Nevende #	,
4d	Other program services (Describe in Schedule O)	
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 2,124,086	
	Total program service expenses 2,124,086	

	00 (2012)			Page 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		/
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	:	1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	IIa		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	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	11c		1
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	120	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12a		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		1
14 a		14a		V
b	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	✓	
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, Parts II and IV	15	•	1
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, Parts III and IV	16		▼
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 (see instructions)	17		√
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		-	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		✓
20 a	If "Yes," complete Schedule G, Part III	19		√
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		✓

Part	IV Checklist of Required Schedules (continued)			. ugo
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
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	1	
24 a	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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓
d 25a		24d		1
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.	25a		/
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	25b 26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		▼
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If "Yes," complete Schedule R, Part I </i>	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	✓	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		√
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	-	1
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			√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	37	1	•

Part	Statements Regarding Other IRS Filings and Tax Compliance	_		
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			,
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	'		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	√	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2 2 2	2b	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	V	-
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
3a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	 	
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-05		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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 as charitable contributions?	6a		✓
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).	1		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	ł		l
	and services provided to the payor?	7a	ļ <u>.</u>	✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	 		,
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	V
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
п 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
Ü	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		ł
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	<u> </u>		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		1
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	ļ		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	
j.	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans]
С	Enter the amount of reserves on hand	1		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	 	 •

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Part	,							
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule 0. S Check if Schedule O contains a response to any question in this Part VI							
Secti	on A. Governing Body and Management	<u> </u>	•	<u>. Ц</u>				
	on A. doverning Dody and management		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a							
	If there are material differences in voting rights among members of the governing body, or	1						
	if the governing body delegated broad authority to an executive committee or similar		l	'				
	committee, explain in Schedule O		}					
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 6	1		'				
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?								
3	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? .							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	_4		✓				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓				
6	Did the organization have members or stockholders?	6		✓				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			,				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		-				
	stockholders, or persons other than the governing body?	7b		✓				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	/					
b	Each committee with authority to act on behalf of the governing body?	8b	1	-				
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		✓				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)					
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	120						
12	Did the organization have a written whistleblower policy?	12c	▼					
13 14	Did the organization have a written document retention and destruction policy?	14	1					
15	Did the process for determining compensation of the following persons include a review and approval by			\vdash				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		*					
а	The organization's CEO, Executive Director, or top management official	15a	√ _					
b	Other officers or key employees of the organization	15b		1				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	*	/				
b	if "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	-					
Secti	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► Montana							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	1 501(c)(3)s	only)				
	available for public inspection. Indicate how you made these available. Check all that apply.							
40	Own website	مغمر ؤ	roct :-	oliov				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year	ımtei	esi E	JUIICY,				
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the)					
20	organization: ► Jane Bewick, 1240 Railway Ave, Unit 200, Canmore AB T1W 1P4 Canada	J. 1110	-					
	Julie Device, 1240 Numbal Ave, Offic 200, Camillote AD 11W 114 Canada							

Page	•
race	

Form	990	(2012)	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- 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 neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per	officer and a director/tru						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Peter Aengst										
Director	ļ	/	<u> </u>		ļ		_	0	. 0	0
(2) Peter Bachman										
Director (O)	_	✓	-				-	0	0	0
(3) Charles Chester	·	/		1				_		_
Chairperson (4) David Johns	 	-		•		<u> </u>		0	0	0
Director	·	1						0	o	0
(5) Kent Nelson		<u> </u>					-	<u>_</u>	- 0	
Treasurer	·	1		1				0	o	0
(6) Bill Weber							_			
Secretary		1		1				o	o	o
(7) Rob Buffler										
Executive Director				✓				12,600	o	113,200
(8) Jane Bewick										
Business Director				✓				0	0	72,200
(9)										
(10)		1								
(11)							<u> </u>			
(12)			-							
(13)										
(14)										

r ai	Section A. Officers, Directors, Trus	lees, key E	mpio	yee		na r C)	ligne	St C	ompensated E	mployees	(continue	ed)		
		(5)			•	sition								
	(A)		(do not check more				e than		(D)	(E)	. 1	_	(F)	
	Name and title	Average hours per					is both		Reportable compensation	Reportal compensation			timated lount of	
		week (list any						+ - /	from	related	ı	•	other	
		hours for related	호호	Stite	Officer	Key employee	ng igh	Former	the organization	organizati (W-2/1099-I			pensation	on
		organizations	ecto	ğ	4	<u>ğ</u>	st c	٩ ا	(W-2/1099-MISC)	(** 2,1000 .	,,,,,,,		anizatio	n
		below dotted line)	~ <u>=</u>	al t		loye	, om	1					related	
			Individual trustee or director	Institutional trustee	ĺ	6	Highest compensated employee			`		orga	nızatıor	15
				ď			ated							
(15)					-	-	_	\dagger						
3	······································		1				i							
(16)				-			_	-						
2			1		ľ	ļ					!			
(17)														
			}		١.									
(18)										-				
(19)				-										
(20)		ļ	Į											
									<u>.</u>			_		
(21)														
100			ļ. <u></u>					_						
(22)														
(00)								\square						
(23)	•••••													
(0.4)														
(24)														
(OE)														
(25)														
1h	Sub-total					-			12.000		-			05.400
	Total from continuation sheets to Part		 n Δ				•		12,600			-	18	85,400
d	T-A-1 /- d-1 P At 1.4.3	-			•		•		12,600	 				DE 400
	Total number of individuals (including but	not limited					- ·) w/		vro than \$1	00 000 6			85 <u>,400</u>
_	reportable compensation from the organi		1 10 111	036	1151	eu a	above	<i>5)</i> VVI	no received inc	ne man φi	00,000 C	<i>)</i> 1		
			-										Yes	No
3	Did the organization list any former of	ficer, direct	tor, o	r trı	uste	e, I	kev e	empl	lovee, or high	est compe	nsated		100	
	employee on line 1a? If "Yes," complete \$							٠.				3	 	
4	For any individual listed on line 1a, is the	sum of reg	oortal	ole c	com	per	satio	n ar	nd other comp	ensation fr	om the			
	organization and related organizations													
	ındıvıdual	•				,						4		1
5	Did any person listed on line 1a receive o									ation or inc	lividual			
	for services rendered to the organization?	If "Yes," c	ompl	ete S	Sch	edu	ile J f	or s	uch person .			5		✓
Section	on B. Independent Contractors													
1	Complete this table for your five highest of	compensate	ed inc	lepe	ende	ent d	contr	acto	ors that receive	d more tha	n \$100,0	000 of	:	
	compensation from the organization. Rep year	ort comper	nsatio	n fo	r th	e ca	alend	ar y	ear ending with	or within	the orga	nızatı	on's ta	ax
	(A) Name and business addi	ress				·			(B) Description of se	ervices	Co	(C)		
Yellow	stone to Yukon Conservation Initiative Socie							rese	earch, education					00,500
	ailway Ave, Unit 200, Canmore, AB T1W 1P4	<u>. J</u>							nmunications,	11)			۲, ۱۱	,0,300
12-70 1	and the one see of summer of the item								draising, admin					
		·							a. a.a.ig, adiiliii					
								-	•					
2	Total number of independent contracto	rs (ıncludın	g bu	t no	ot li	mite	ed to	the	ose listed abo	ve) who				
	received more than \$100,000 of compens								1				h	

Part	VIII	Statement of Revenue					_
,		Check if Schedule O contains a re	sponse to any ques	tion in this Part VI (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts Is	1a	Federated campaigns	1a 0		-		
Contributions, Gifts, Grants and Other Similar Amounts	b		1b 0				
عَ ق	c		1c 0				
ifts Ir A	d		1d 0				
ວຸ:≘	e	<u> </u>	1e 0		1		
Siz	f	All other contributions, gifts, grants,	· ·				
ž ži	١ '		1f 1,909,635	1			
G E	_	Noncash contributions included in lines 1a-1f	1,000,000				
ë E	9	Total. Add lines 1a–1f	· Ψ 13,094]	1 000 035			
	<u>h</u>	Total. Add liftes Ta-11	Business Code	1,909,635			
Ĕ	0-	Fubilities sales			4		
ě	2a	Exhibition sales	712110	17,550	17,550	0	0
ë. E	b						
₹.	C						
လ္တ	d					 -	
Гап	e	A					
Program Service Revenue	Ţ	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f		17,550			
	3	Investment income (including di					
		and other similar amounts)		207	0	0	207
	4	Income from investment of tax-exemp	ot bond proceeds	0	0	0	0
	5	Royalties		0	0	0	0
		(ı) Real	(II) Personal				
	6a	Gross rents	0 0		1		
	b	Less rental expenses	0 0		ļ		
	С	Rental income or (loss)	0 0	1			
	d	Net rental income or (loss)	<u> ▶</u>	0	0	0	0
	7a	Gross amount from sales of (i) Securities	(ıi) Other				
		assets other than inventory	0 0		i		
	Ь	Less, cost or other basis	<u> </u>		ļ.		
		and sales expenses	0 0				
	С	Gain or (loss) .	0 0				
i	d	Net gain or (loss)	•	0	o	o	0
une	8a	Gross income from fundraising					
Other Revenue		events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18					3
‡	L		a 0		1	1	
Ö		Less. direct expenses					
	1	Net income or (loss) from fundraisi		0		0	0
	ya	Gross income from gaming activities See Part IV, line 19					
			~ 	į	[
		Less: direct expenses	b[0				
	l	Net income or (loss) from gaming a		0	0	0	0
		Gross sales of inventory, les returns and allowances	1		-		
	b	Less: cost of goods sold	b0		[
	С	Net income or (loss) from sales of		0	0	o	0
		Miscellaneous Revenue	Business Code	-			
	11a		.				<u>.</u>
	b				1		
	С						
	d	All other revenue		0	0	0	0
	е	Total. Add lines 11a-11d	▶	0			
	12_	Total revenue. See instructions.	▶	1,927,392	17,550		207

Form 990 (2012) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX . (A) Total expenses (B) Program service expenses Do not include amounts reported on lines 6b, 7b, (D) Fundraising expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the United States See Part IV, line 21 0 Grants and other assistance to individuals in 2 the United States See Part IV, line 22 0 n Grants and other assistance to governments, 3 organizations, and individuals outside the United States See Part IV, lines 15 and 16 O Benefits paid to or for members . 4 0 0 Compensation of current officers, directors, trustees, and key employees 12,600 9,238 1,322 2,040 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) n 7 Other salaries and wages . . . 61,800 61,800 ٥ 0 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 0 0 9 Other employee benefits 4,500 4,500 0 0 10 Payroll taxes . . . 5,763 0 5,763 0 Fees for services (non-employees) Management 83,122 45,424 4,672 33,026 b Legal 0 0 0 0 С Accounting . . 5,500 0 5,500 0 Lobbying . d 0 0 0 Professional fundraising services. See Part IV, line 17 0 0 Investment management fees . 0 0 0 0 Other (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O) 77,668 76,963 O 705 12 Advertising and promotion 845 0 845 0 Office expenses 13 9.915 6,131 -140 3,924 Information technology . 14 0 0 0 0 Royalties . 15 0 0 ol 0 Occupancy . 16 0 0 ol 0 Travel 17 . 13,685 9,625 4,060 0 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 0 n 0 Conferences, conventions, and meetings 19 1,142 1,142 0 0 20 0 0 0 21 Payments to affiliates 0 0 0 n 22 Depreciation, depletion, and amortization . 0 0 0 23 Insurance . 1,570 1,570 n 0 Other expenses Itemize expenses not covered 24 above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) bank charges 1,672 1,672 0 contract services 2,100,500 1,903,500 140,500 56,500 C All other expenses е Total functional expenses. Add lines 1 through 24e 25 2,380,282 2,124,086 160,001 96,195 Joint costs. Complete this line only if the organization reported in column (B) joint costs

from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720)

_	Check if Schedule O contains a response to any question in this Part X		· · · ·	
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	451,713	1	493,081
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	547,750	3	52,870
4	Accounts receivable, net	0	4	0
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees			
6	Complete Part II of Schedule L	0	5	0
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		6	۰
Assets	Notes and loans receivable, net	0	7	0
8 ASS	Inventories for sale or use		8	0
9	Prepaid expenses and deferred charges	0	9	0
10a	· · · · · · · · · · · · · · · · · · ·	U U	-	U
Ь	Less: accumulated depreciation 10b 0	0	10c	0
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11	0		0
14	Intangible assets	0		
15	Other assets. See Part IV, line 11		15	0
16	Total assets. Add lines 1 through 15 (must equal line 34)	999,463		545,951
17	Accounts payable and accrued expenses	24,340		23,718
18	Grants payable	0		0
19	Deferred revenue	0		0
20	Tax-exempt bond liabilities	0		0
21	Escrow or custodial account liability Complete Part IV of Schedule D .	0		0
Cabilities 23	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
a	disqualified persons. Complete Part II of Schedule L	0	22	0
	Secured mortgages and notes payable to unrelated third parties .	0	23	0
24	Unsecured notes and loans payable to unrelated third parties	0	24	0
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	0	25	0
26	Total liabilities. Add lines 17 through 25	24,340	26	23,718
s ဗ	Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
<u>k</u> 27	Unrestricted net assets	244,123	27	313,665
<u>e</u> 28	Temporarily restricted net assets	731,000		208,568
[29	Permanently restricted net assets	0	29	
Net Assets or Fund Balances	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			,
န္မ 30	Capital stock or trust principal, or current funds		30	
စ္ကို 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
₹ 32	Retained earnings, endowment, accumulated income, or other funds		32	
2 33	Total net assets or fund balances	975,123	33	522,233
- 34	Total liabilities and net assets/fund balances	999,463	34	545,951

Form **990** (2012)



Form 990 (2012)		

Form 9	90 (2012)			Р	age 12
Par	t XI Reconciliation of Net Assets				<u> </u>
	Check if Schedule O contains a response to any question in this Part XI				. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,9	<u></u> 27,392
2	Total expenses (must equal Part IX, column (A), line 25)	2			80,282
3	Revenue less expenses. Subtract line 2 from line 1	3	_		52,890
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9	75,123
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		5	22,233
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u>.</u>			
		_		Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," exp	olain in			
	Schedule O	Jiaiii iii			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•	2a		√
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both	olled or			
	·				
_	-		.	,	
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audite		2b	✓	
	separate basis, consolidated basis, or both	d on a			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	avarabt			
C	of the audit, review, or compilation of its financial statements and selection of an independent account			,	
	If the organization changed either its oversight process or selection process during the tax year, exp		2c	<u>✓</u>	
	Schedule O	olain in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set to	orth in			
	the Single Audit Act and OMB Circular A-133?.		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	go the		-	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b		
			Forn	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

201

Employer identification number

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.

Open to Public Inspection

OMB No 1545-0047

Yello	wstone to Yukon Co	onservation Initia	ntive							35303	
Pa			rity Status (All orga						nstruction	ons.	
The			ation because it is: (Fo								
1	A church, con	vention of churc	thes, or association of	churche	s describ	ed in sec	tion 170	(b)(1)(A)(i	i).		
2	_		170(b)(1)(A)(ii). (Attac								
3			spital service organiza								
4	_	_	on operated in conjun	ction with	h a hospit	al descri	bed in se	ection 17	0(b)(1)(A)	(iii). Enter	the
	hospital's nam	ne, city, and stat	e:								
5		· •	the benefit of a colle	ge or un	iversity o	wned or	operated	l by a go	vernmen	tal unit de	scribed in
)(1)(A)(iv). (Com									
6			nment or government								
7			receives a substantia		its suppo	ort from a	a governi	mental ur	nit or from	n the gene	eral public
_		• - • •)(A)(vi). (Complete Par	•							
8			n section 170(b)(1)(A		=	-					
9	_	-	receives: (1) more that								-
			d to its exempt funct								
			ent income and unre after June 30, 1975. Se						II DII la	ix) iroili u	usmesses
40	_ ` .	•						•	41		
		-	d operated exclusively nd operated exclusive		-						
• • •		•	olicly supported organ	•			•				,
			describes the type of								c section
	a 🗌 Type I	b 🔲 Type	·							tionally inte	egrated
e	_ ,,		that the organization		•	•				•	•
			ers and other than on								
	or section 509	-			, ,		J.,				
f	If the organiz	ation received	a written determination	on from	the IRS	that it is	а Туре	I, Type	ii, or Ty	oe III supp	orting
	organization, o	check this box									🗆
g	_		he organization accep	pted any	gift or co	ontributio	n from a	ny of the	•		
	following pers									_	
			indirectly controls, eiti					describe	d in (ii) a	nd	Yes No
	• •	-	ody of the supported	-	tion?				•	11g(ı)	/
		•	on described in (i) abo		. •					11g(ii)	✓
			a person described in							11g(m)	
h			ion about the support								
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		ou notify nization in		s the tion in col	(vii) Amount	of monetary port
			above or IRC section		document?	col (ı)	of your port?	(i) organi	zed in the S?		port
			(see instructions))	Yes	No	Yes	No	Yes	No	-	
		 -					 	1		 	
(A)				1		1			1		
/D)							 	1	}		
(B)		1				İ					
(C)											
(0)									<u> </u>		
(D)			1								
			ļ. ————	 	-		 	 	ļ	ļ <u> </u>	
(E)						}]	1	}		
					<u> </u>	 	 	 	 		
Tota	ıl	<u> </u>		1		}		1	1	1	

Sched	ule A (Form 990 or 990-EZ) 2012						Page 2
Par	1-1	ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi	i)
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	te Part III.)	
	ion A. Public Support				<u>-</u>		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.") .	1 222 422	4 40 4 000				
2	Tax revenues levied for the	1,326,480	1,434,038	1,380,028	2,103,817	1,909,635	8,153,998
_	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						
4	Total. Add lines 1 through 3	1,326,480	1,434,038	1,380,028	2,103,817	1,909,635	8,153,998
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)						
6	Public support. Subtract line 5 from line 4						3,687,640
	ion B. Total Support	<u></u>	<u> </u>				4,466,358
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	1,326,480	1,434,038	1,380,028	2,103,817	1,909,635	8,153,998
8	Gross income from interest, dividends,	, , , , , , , , , , , ,		.,,		.,,,,,,,,,	
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	482	1,428	190	122	207	2,429
9	Net income from unrelated business						
	activities, whether or not the business						
40	is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets					i	
	(Explain in Part IV.)			İ	1		
11	Total support. Add lines 7 through 10						0.150.427
12	Gross receipts from related activities, etc	(see instruction	l ons)			12	8,156,427 163,165
13	First five years. If the Form 990 is for th				or fifth tax ve		103,103 1 501(c)(3)
	organization, check this box and stop her						▶ □
Sect	on C. Computation of Public Suppor						
14	Public support percentage for 2012 (line 6					14	54.8 %
15	Public support percentage from 2011 Sch					15	46.9 %
16a	33¹/3% support test—2012. If the organiz						
	box and stop here. The organization qual	•		_			▶ ☑
b	331/3% support test—2011. If the organ					15 is 331/3% c	
	check this box and stop here. The organi			•			· ► □
17a	10%-facts-and-circumstances test—20						
	10% or more, and if the organization mee Part IV how the organization meets the "fa						
	organization				•		pported □
ь	10%-facts-and-circumstances test—20	11. If the orga	nization did no			a 16b or 17a	
~	15 is 10% or more and if the organization						

Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

	THE OF GLANT TO GLANTY			5.1., p. 64.65		···/	
	on A. Public Support			<u> </u>	,	, — — —	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees			}			}
	received. (Do not include any "unusual grants ")			<u> </u>	L		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities			l			ļ
	furnished in any activity that is related to the						1
	organization's tax-exempt purpose .				<u> </u>		
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		ł	1			1
4	Tax revenues levied for the						
	organization's benefit and either paid	ı			1		
	to or expended on its behalf]				ĺ
5	The value of services or facilities						
	furnished by a governmental unit to the			ł			
	organization without charge		ļ				1
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons		1				İ
b	Amounts included on lines 2 and 3						
~	received from other than disqualified						
	persons that exceed the greater of \$5,000		Į .				
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	/					
	line 6.)						
Secti	on B. Total Support		<u> </u>				
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	,					
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,				,		
	royalties and income from similar sources					!	
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	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	1					
	(Explain in Part IV.)	i	j				İ
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	l !		-			1
14	First five years. If the Form 990 is for the	ie organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop he	re	<u></u>				. ▶ 🗆
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2012 (line 8	3, column (f) di	vided by line 1	3, column (f))		15	%
16	Public support percentage from 2011 Sch	nedule A, Part	III, line 15 .		<u></u>	16	%
Secti	on D. Computation of Investment In		ntage				
17	Investment income percentage for 2012 (nn (f))	17	%
18	Investment income percentage from 2011					18	%
19a	331/3% support tests-2012. If the organ						%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2011. If the organiz	ation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	331/3%, and
	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization die	d not check a	box on line 14,	, 19a, or 19b, c	heck this box	and see instru	ctions 🕨 🗍

SCHEDULE D (Form 990)

Supplemental Financial Statements

20**12**

OMB No 1545-0047

Open to Public Inspection ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Employer identification number Yellowstone to Yukon Conservation Initiative Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) . 2 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 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 education) 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 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) and section 170(h)(4)(B)(ii)? In Part XIII, 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X . \$__ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X . . .

Schedule	n	(Form	990	2012
Ochedule	u	(1 () ()	330	2012

Page 2

Par	t III Organizations Maintaining	Collections of	f Art, His	storical `	Treasures	, or O	ther Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and o	other reco	ords, ched	ck any of th	ne follo	wing that are a s	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchanç	ge prog	rams	
b	☐ Scholarly research		е	□ Othe	er			
С	Preservation for future generations							
4	Provide a description of the organizat	tion's collections	and exp	laın how t	they further	the org	ganization's exer	npt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive	e donation	ns of art,	historical ti	reasure	s, or other simila	
Par	ESCROW and Custodial Arra							
rai	line 9, or reported an amoun				garnzanon	answe	red res lo re	omi 990, Partiv,
1a	Is the organization an agent, trustee,				or contribut	tions or	other accete no	<u></u>
10	included on Form 990, Part X? .	, custoulari or ot						
b	If "Yes," explain the arrangement in Pa					•		∐ Yes ∐ No
	in res, explain the arrangement in ra	art Am and comp	nete the n	UllOWING I	able		Δ	mount
С	Beginning balance					10		THOUSE TO THE PARTY OF THE PART
d	Additions during the year		•			1d		···
e	Distributions during the year					1e		·
f	Ending balance			• •		1f		
2a	Did the organization include an amour			e 212	• • •			☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa							
	t V Endowment Funds. Comple	ete if the organi	ization ai	nswered	"Yes" to F	orm 9	90. Part IV. line	10.
		(a) Current year		or year	(c) Two year		(d) Three years back	
1a	Beginning of year balance .							
b	Contributions							
С	Net investment earnings, gains, and	· · · · · · · · · · · · · · · · · · ·		-	_		· 	
	losses							
d	Grants or scholarships		<u> </u>					
е	Other expenditures for facilities and			•				
	programs							
f	Administrative expenses				· · · · · · · · · · · · · · · · · · ·			_
g	End of year balance					İ		
2	Provide the estimated percentage of the	he current year e	nd baland	ce (line 1g	, column (a)) held a	as.	
а	Board designated or quasi-endowmen	nt 🕨	%	_				
b	Permanent endowment ▶	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2							
3a	Are there endowment funds not in the	possession of t	he organi	ızatıon tha	at are held	and adı	ministered for the	e
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(II), are the related organize							3b
4	Describe in Part XIII the intended uses							
Part		ment. See Forr	m 990, P					
	Description of property	(a) Cost or o			or other basis ther)	de	Accumulated preciation	(d) Book value
1a	Land					×	· · · ·	
b	Buildings							
С	Leasehold improvements							
d	Equipment							
<u>e</u>	Other							
Total.	Add lines 1a through 1e. (Column (d) m	ust equal Form 9	90, Part	X, column	i (B), line 10	(c).) .	▶	

Part VII	Investments—Other Securities	. See Form 990, Part X,	line 12.	·
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
(1) Financial	derivatives			
(2) Closely-I	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				· · · · · · · · · · · · · · · · · · ·
(E)			<u> </u>	
(F) (G)			-	
(H)			 	
(l)				
	(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	(c) Method of val	uation
	(a) Decemple of invocation type	(b) Book value	Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)				•
(5)				
(6)				
_(7)				
(8)				
(9)				
(10)	(b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, Cor (B) line 13)	ort V. lino 15		
FaitiA	·- ·- · · · · · · · · · · · · · · · · ·	a) Description		(b) Book value
(1)		,		(-)
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				······································
(8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X, co		<u> </u>	
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value	*****	
	income taxes		4	,
(2)	·		4	*,*
(3)			4	, ,
(4)			4	
(5)			4	
(6)				
(7)			-	
(7) (8) (9)			-{	
(10)			4	, , ,
(11)			4	
	b) must equal Form 990, Part X, col. (B) line 25)		4	÷
	C 740) Footnote. In Part XIII, provide the	text of the footnote to the ord	anization's financial statements that	reports the organization's
liability for ur	ncertain tax positions under FIN 48 (ASC 7	40). Check here if the text of	the footnote has been provided in Pa	art XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return
1 Total revenue, gains, and other support per audited financial statements	1 1,927,392
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.	3,027,2=
a Net unrealized gains on investments	
b Donated services and use of facilities	4 1
c Recoveries of prior year grants	1
d Other (Describe in Part XIII) 2d	
e Add lines 2a through 2d	2e 0
3 Subtract line 2e from line 1	3 1,927,392
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	704
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	*
c Add lines 4a and 4b	40 0
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 1,927,392
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Return
1 Total expenses and losses per audited financial statements	1 2,380,282
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	2,000,202
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	*
d Other (Describe in Part XIII.)	†
e Add lines 2a through 2d	, 2e 0
3 Subtract line 2e from line 1	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	3 2,380,282
a Investment symposon act included on Ferry COO, Book VIII, box 75	
b Other (Describe in Part XIII.)	1 1
c Add lines 4a and 4b	4c 0
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	
Part XIII Supplemental Information	5 2,380,282
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Fart V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to information.	ert IV, lines 1b and 2b; c provide any additional

Schedule D (For	m 990) 2012	Page 5
Part XIII	Supplemental Information (continued)	
		· · · · · · · · · · · · · · · · · · ·

		•
	•••••••••••••••••••••••••••••••••••••••	***************************************
	•••••••••••••••••••••••••••••••••••••••	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization) Emi	ployer identification number
Yellowstone to Yukon Conservation I	nitiative				810535303
	n on Activit	ies Outside	the United States. Com	plete if the organization	on answered "Yes" to
1 For grantmakers. Does the assistance, the grantees' eli			ssistance, and the selection		ard the
grants or assistance?					· · □Yes □No
2 For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use of its	grants and other
3 Activities per Region. (The fo	ollowing Part	l, line 3 table o	can be duplicated if addition	nal space is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (a program service describe specific type service(s) in region	expenditures for and investments
(1) Canada	0	1	program services	conservation	1,705,900
(2) Canada	0	1	program services	communications	197,600
(3) Canada	0	11	administration		140,500
(4) Canada	0	1	fundraisinig		56,500
(5)					
(6)					
(7)		<u> </u>			
(8)					
(9)					
(10)					
(11)		i			
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					
b Total from continuation sheets to Part I					

c Totals (add lines 3a and 3b)

2,100,500

Page 2

Schedule F (Form 990) 2012

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. Part II can be duplicated if additional space is needed. Part II

•	(a) Name of								
-	organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(t) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
E									
Ñ			_				1		
ල	;								
3									
(2)									
(9)									
(2)									
<u>(8</u>			:						
6)									
(10)									
(11)									
(12)									
(13)		·	,						
(14)	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3								
(15)									
(16)									
8	Enter total nur by the IRS, or	mber of recipies for which the g	nt organizations list grantee or counsel h	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ognized as charities 501(c)(3) equivalen	by the foreign councy letter	in country, recognized as tax-exe	ax-exempt	

Schedule F (Form 990) 2012

Enter total number of other organizations or entities

က

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2012

Part III Grants al

(h) Method of valuation (book, FMV, appraisa), other)																			Schedule F (Form 990) 2012
(g) Description of non-cash assistance																			Sche
(f) Amount of non-cash assistance																			
(e) Manner of cash disbursement													;						
(d) Amount of cash grant																			
(c) Number of recipients					i														
of grant or assistance (b) Region (c) Number of recipients		:																	
(a) Type of grant or assistance	(1)	(2)	(6)	(4)	(5)	(6)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

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

Part V	Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III
	(accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
•••••••	
· · · · · · · · · · · · · · · · · · ·	
·	

SCHEDULE J (Form 990)

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service Name of the organization

Yellowstone to Yukon Conservation Initiative

Employer identification number

810535303

Par	Questions Regarding Compensation	303		
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use		-	
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)		İ	,
	·		İ	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain			
		1b	<u> </u>	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	☐ Compensation committee ☐ Written employment contract			l .
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change of control and the	١.	١.	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a	/	
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4b 4c		✓
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40		, ,
			ر اد	
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	•	*' ^	54,
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of.			1
a	The organization?	5a		Ĩ
b	Any related organization?	5b		<u></u>
6	If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			,
	compensation contingent on the net earnings of:			
а	The organization?	6a		1
b	Any related organization?	6b		-
	If "Yes" to line 6a or 6b, describe in Part III.			-
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		√
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	'-		
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)2 if "Ves." described	1		
	mraitin	8	ŀ	✓
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	- 		
	Regulations section 53.4958-6(c)?	9		

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

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

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

		(R) Breakdown of W-2		and/or 1099-MISC compensation				
		O Dicarco		o compensation	(C) Retirement and	(D) Nontaxable		(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred compensation	benefits	(a)(ı)(a)	reported as deferred in
		.	•	compensation				
	3	12,600	0	0	0	0	12,600	0
1 Rob Buffler, Executive Director	€	0		0	0	0	0	
	3							
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	(1)							
8	<u>(ii)</u>							
	(1)							
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11	<u>(ii)</u>							
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16	(E)							

Schedule J (Form 990) 2012

Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II.
ob Buffler's employment with the organization ended August 29, 2012. He was paid a retiring allowance by Yellowstone to Yukon Conservation Initiative Society to December 31, 2012.

Schedule J (Form 990) 2012

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number Name of the organization **Yellowstone to Yukon Conservation Intiative** 810535303 Part VI 11b: The Form 990 was prepared by the Business Director and reviewed by the Executive of the Board, specifically by the Board Treasurer before submitting to the IRS. Part VI Line 12c: The Governance Committee of the Board of Directors distributes a disclosure form annually to all 'Responsible Persons'. A 'Responsible Person' is any person serving as an officer, employee or member of the Board of Directors of the Yellowstone to Yukon Conservation Initiative (Y2Y). The Responsible Persons are asked to identify any relationships, positions or circumstances in which the Responsible Person is involved that he or she believes could contribute to a conflict of interest arising. Prior to board committee action on a contract or transaction involving a conflict of interest, a director or committee member having a conflict of interest and who is in attendance at the meeting discloses all facts material to the conflict of interest. A person who has a conflict of interest will not participate in or be permitted to hear the board's or committee's discussion of the matter except to disclose material facts and to respond to questions. A member of the Board of Directors of Y2Y has a conflict of interest when he or she stands for election as an officer or for re-election as a member of the Board of Directors. Responsible Persons who are not members of the Board of Directors of Y2Y or who have a conflict of interest with respect to a contract or transaction that is not the subject of Board or committee action, shall disclose to the Chair any conflict of interest he or she has with respect to a contract or transaction. Part VI 15a: Executive Director compensation is determined by the Executive Committee of Y2Y's Board of Directors by reviewing the results of the organization's annual performance review for the Executive Director and similar organizations' salary levels for the Executive Director. Part VI line 19: Yellowstone to Yukon Conservation Initiative provides copies of governing documents, conflict of interest policy and financial statements to the public upon request.

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer identification number
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Part I

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Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ See separate instructions. ▶ Attach to Form 990.

2012

OMB No. 1545-0047

Open to Public

Inspection Employer identification number

(f)
Direct controlling
entity 810535303 (e) End-of-year assets (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (c)
Legal domicile (state
or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity Yellowstone to Yukon Conservation Initiative (9)

(g) Section 512(b)(13) controlled entity? Yes No Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (f)
Direct controlling
entity Alberta Societies N/A (e)
Public charity status
(if section 501(c)(3)) (d) Exempt Code section (c) Legal domicile (state or foreign country) Canada (b) Primary activity communications Conservation & (1) Yellowstone to Yukon Conservation Initiative Society 1240 Railway Ave, Unit 200, Canmore AB T1W 1P7 Canada (a)
Name, address, and EIN of related organization Part II 8 € © 9 ල

Schedule R (Form 990) 2012

Cat No 50135Y

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

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Schedule R (Form 990) 2012

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(k) Percentage ownership (i) Section 512(b)(13) controlled ŝ Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Yes (i) General or managing partner? Yes No (h) Percentage ownership amount in box 20 of Schedule K-1 (Form 1065) Code V - UBI end-of-year assets (g) Share of (g) (h)
Share of end-of- Disproportionate year assets allocations? ž (f) Share of total Yes псоте (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d)
Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (c)
Legal domicile
(state or foreign country) (d)
Direct controlling entity (b) Primary activity (c)
Legal
domicile
(state or
foreign
country) (b) Primary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization Part III Part IV E Ξ 3 ල <u>O</u> € © 9 <u>8</u> ල € 9 E

Schedule R (Form 990) 2012

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

Schedule R (Form 990) 2012			
2,100,500 project agreement	2,100,5		(2) Yellowstone to Yukon Conservation Initiative Society
	60		
83.122 time allocation	83.7	0	(1) Yellowstone to Yukon Conservation Initiative Society
(d) Method of determining amount involved	(c) Amount involved	(b) Transaction type (a-s)	(a) Name of other organization
tionships and transaction thresholds.	cluding covered rela	implete this line, in	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.
11 15			1
			r Other transfer of onethor property to related organization(s)
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Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

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

Obsproportionate Code V—UBi General or Percentage allocations? Alocation (i) (ii) (ii) (k) Gode V—UBi General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065)	2															
(g) Share of end-of-year assets																
(f) Share of total income					 											
(e) Are all partners section 501(c)(3) organizations?																
(e) Are all partners section 501(c)(3) organizations?	3															
(d) Predominant income (related, unrelated, excluded from tax under section 512-514)																
(c) Legal domicile (state or foreign country)																
(b) Primary activity																
Name, address, and EIN of entity Name,	(1)	(2)	(8)	(4)	(5)	(9)	ω	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

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Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
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