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# Form **990**

Department of the Treasury 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 Fo	r the	2012 cal	endar year, or tax year beginning	g 01-01-2012 , 2012, and end	ding 12-31-	2012			
<b>B</b> Ch	eck ıf a	applicable	C Name of organization International Snow Leopard Trust				D Employe	ide	ntification number
Add	dress c	hange	Doing Business As				91-1144	4119	e
_ Na	me cha	ange	Doing Dusiness hs						
Init	tıal retu	urn		nail is not delivered to street address)	Room/suite	<del>.</del>	E Telephone	num	ber
Tei	rmınate	ed	4649 Sunnyside Avenue North No 32	25			(206)63	32-2	421
_ Am	ended	return	City or town, state or country, and 2 Seattle, WA 981036955	ZIP + 4			(200)0		
Ap <sub>l</sub>	plicatio	n pending					<b>G</b> Gross rece	ipts \$	5 2,979,115
			<b>F</b> Name and address of prir Bradley Rutherford	ncipal officer			ıs a group re	turn	
			4649 Sunnyside Avenue No	rth No 325		affilia	ites?		┌ Yes 🗸 No
			Seattle, WA 981036955						ded?┌Yes┌No
r Ta	x-exer	mpt status	<u> </u>	unsert no )	527	If "N	o," attach a	lıst	(see instructions)
			w SnowLeopard org		327	H(c) Grou	ıp exemptior	nur	mber ►
			<u> </u>			T.		1	
<b>∢</b> Fon	m of or	rganızatıon	Corporation Trust Associatio	n  Other ►		<b>L</b> Year of fo	mation 1981	- M	State of legal domicile A
Pa	rt I	Sum	ımary						
			escribe the organization's mission		s				
		The con	servation of the snow leopard an	d its mountain habitat					
Governance									
Ē									
9	2	Check tl	his box দ if the organization di	scontinued its operations or di	isposed of	more than 2	25% of its ne	et as	sets
	3	Number	of voting members of the govern	ing body (Part VI, line 1a)			. 1	3	l 11
š	1		of independent voting members					4	11
Ē	5	Total nu	mber of individuals employed in	calendar year 2012 (Part V , lı	ne 2a) .		[	5	14
Activities &	6	Total nu	mber of volunteers (estimate if n	ecessary)				6	70
			related business revenue from P					7a	0
	Ь	Net unre	elated business taxable income f	rom Form 990-T, line 34 .				7b	0
		Contro	butions and grants (Dart VIII I	no 1 h)		Pric	1,388,67		Current Year 1,270,831
₫	9		ibutions and grants (Part VIII, li am service revenue (Part VIII, li				1,388,078		1,270,831
Ravenue	10		tment income (Part VIII, column			-105,11	149,445		
æ	11		revenue (Part VIII, column (A),				92,54	-	36,268
	12		revenue—add lines 8 through 11				1 276 10		1 456 544
	13		s and sımılar amounts paid (Part				1,376,10	-	1,456,544 582,108
	14		its paid to or for members (Part I					0	0
	15		es, other compensation, employe					+	
\$		5-10	,				458,75	_	494,170
Expenses	16a		ssional fundraising fees (Part IX,					0	1,512
ठ	b		undraising expenses (Part IX, column (D				220.02	_	222.522
	17 18		expenses (Part IX, column (A), expenses Add lines 13–17 (mu				329,92	-	289,699
	19		nue less expenses Subtract line		•		101,21	-	89,055
<b>8</b> 8							g of Current		End of Year
Net Assets of Fund Balances						<b></b>	ear	_	
Ass Ba	20		assets (Part X, line 16)				3,265,82	-	3,452,496
5 E	21 22		liabilities (Part X, line 26)				21,01 3,244,80	-	19,108
	22   13   1		ssets or fund balances Subtract nature Block	mezinomimezo		<u> </u>	3,244,00	۷	3,433,388
		_	perjury, I declare that I have exa	amined this return, including a	ccompany	na schedule	es and state	men	ts, and to the best of
ny k	nowle	dge and	belief, it is true, correct, and con						
orepa	arer h	as any k	nowledge						
		****	***			20	013-08-08		
Sigr	1	Signa	ature of officer				ate		
Her			ley Rutherford Executive Director						
		<u> </u>	e or print name and title						
<b>.</b> .			Print/Type preparer's name Susan Reilly	Preparer's signature	Dat 201	2 00 00   0116		ΓΙΝ 00531	.805
Paid			Firm's name F Watson & McDonell PL	LC .	I		n's EIN 🟲 72-1	6073	47
	pare		Firm's address 🟲 1325 - 4th Avenue Suit	re 1705		Pho	one no (206) 6	24-2	380
JSE	On	ııy  ˈ					(200) 0		
		1	Seattle, WA 98101252	.0					

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

✓ Yes 厂No

Form	Page .
Par	Statement of Program Service Accomplishments  Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
ınstı	Trust is dedicated to the conservation of the snow leopard and its mountain habitat by working in partnership with individuals and tutions in Central Asia, and through educating the public about the snow leopard, its habitat, protection measures and conservation regies
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 700,000 including grants of \$ 377,108 ) (Revenue \$ 53,966 )
	Conservation of the endangered Snow Leopard and its mountain ecosystem. In 2012, the Snow Leopard Trust worked with over 2490 herding families in India, Mongolia, Kyrgyzstan and Pakistan through community-based conservation programs aimed at protecting snow leopards and improving herder livelihoods. We worked with local people to provide economic offsets for livestock lost to snow leopard predation and incentives for wildlife conservation. Our three primary programs were livestock insurance, livestock vaccination, and a handicraft program called Snow Leopard Enterprises. In Mongolia and Kyrgyzstan, 243 herding families made over 31,500 handicrafts through Snow Leopard Enterprises. In Mongolia and India, over 190 herders households insured 4,300 livestock against snow leopard depredation. In Pakistan, over 2000 households vaccinated 36,000 livestock against life-threatening diseases. As part of these programs herders signed Conservation Contracts in which they agreed to protect snow leopards and their key prey.
4b	(Code ) (Expenses \$ 120,000 including grants of \$ 110,000 ) (Revenue \$ )
-	Education and capacity building for snow leopard conservation In India, the Snow Leopard Trust provided environmental education to over 870 children and took 148 children on nature camps. In Pakistan, we helped create 12 Nature Clubs for school children to disseminate information about snow leopard conservation. In Mongolia we worked with 26 communities to distribute information about managing snow leopard predation events and to help them learn and gain more control over conservation land rights. In 2012 we also attended a mass awareness event in China attended by 50,000 people and in India we worked with local and national government to create wildlife management plans. Finally, we were invited to help facilitate a Global Forum to bring together heads of state from all 12 snow leopard countries to create a unified plan for snow leopard conservation across the species' entire range.
	(Code ) (Expenses \$ 281,327 including grants of \$ 95,000 ) (Revenue \$ )
	Research and monitoring of Snow Leopards and their environment In 2012 we continued our long-term snow leopard study in South Gobi, Mongolia to increase our understanding of snow leopard ecology, behavior, and habitat needs. As part of this study we tracked snow leopards using GPS collars, performed prey surveys, and collected population data via remote camera surveys. We also worked with nine communities in western Mongolia to establish social and biological baselines for monitoring snow leopard threatsand threat reductionover time. We also supported surveys in other key parts of snow leopard range, including trap camera surveys in northern India and rapid biological assessments on the Tibetan Plateau in China.
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 1,101,327

## Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
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		No
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		No
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 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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 debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9		No
LO	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	Yes	
L1	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	Yes	
b	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	11b	Yes	
C	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		Νo
d	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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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	Yes	
L5	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	Yes	
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	Yes	
L7	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		No
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	Yes	
L9	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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		No
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		No
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		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	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		No
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		No
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	26		No
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		No
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	ı	1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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</i> "Yes," complete Schedule R, Part I	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2 \cdot . \cdot .$	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Check if Schedule O contains a response to any question in this Part V	-	Yes	N
La	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   5		162	I N
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
		1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
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			
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 e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		l I N
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		N
ь				
_	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	-		
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	70		
		5c		
	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		٨
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_	l	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
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		   
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		_
) -	Sponsoring organizations maintaining donor advised funds.			
_	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		
) _	Section 501(c)(7) organizations. Enter  Instruction foce and control control to the product of Port VIII. Inc. 12			
	Initiation fees and capital contributions included on Part VIII, line 12	1		
ı	facilities  Section F01(c)(12) organizations Enter			
	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
	Gross income from members or shareholders	1		
J	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			
;	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
ь	Enter the amount of reserves the organization is required to maintain by the states			
_	in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	Ţ		
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		١
_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI	

)	ection A. Governing Body and Management				
			Yes	No	
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent				
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		No	
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		No	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No	
6	Did the organization have members or stockholders?	6	Yes		
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?	7a		No	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
а	The governing body?	8a	Yes		
b	<b>b</b> Each committee with authority to act on behalf of the governing body?				
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		No	
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	in Cod	<u> </u>	
		CVCIII	ie Cou	<del>.</del> .)	
			Yes	No No	
10a	Did the organization have local chapters, branches, or affiliates?	10a			
	Did the organization have local chapters, branches, or affiliates?			No	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a 10b		No	
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10a 10b	Yes	No	
b 11a 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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b	Yes	No	
b 11a b 12a	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	10a 10b 11a	Yes	No	
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b 11a	Yes Yes	No	
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b 11a 12a 12b	Yes Yes Yes	No	
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes	No	
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No	
b 11a b 12a c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No	
b 11a b 12a c 13 14 15	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	No	
b 11a b 12a c 13 14 15	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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No	
b 11a b 12a c 13 14 15 a 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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No	
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No	

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►WA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
- ✓ Own website ✓ Another's website ✓ Upon request ✓ Other (explain in Schedule O)

  9 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of
- interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization The Organization 4649 Sunnyside Avenue North No 325 Seattle, WA (206) 632-2421

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	more pers and	than on is a dir	one bot	not box h ar or/tr	ustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	, , ,	,	and related organizations
(1) Elizabeth Betsy Alanız	2 00	×						0	0	0
Member									_	
(2) Harry Freeman	2 00	×						0	0	0
Member										
(3) Jed Gorden	2 00	×						0	0	0
Member (4) Gayle Podrabsky	2.00									
	2 00	x						0	0	0
Member (5) Betsy Dennis	2 00									
Member		Х						0	0	0
(6) Henry Happel Member	2 00	х						0	0	0
(7) Walter Pereyra	2 00									
Member		×						0	0	0
(8) Rhetick Sengupta	5 00	х		х				0	0	0
Vice-President (9) Andrea Gates Sanford	5 00									
Vice-President		х		х				0	0	0
(10) Steven Kearsley	5 00									
Secretary/Treasurer		×		х				0	0	0
(11) Carol Hosford	5 00									
President		X		Х				0	0	0
(12) Bradley Rutherford	40 00			.,				22.2.	_	
Executive Director				Х				93,000	0	4,800
										Form <b>990</b> (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion ( han d on is	ne l both	box, an c	heck unless officer stee)	<b>3</b>	( <b>D</b> ) Reportabe compensa from the	etion compensation te from related n (W- organizations (V		ortable Estimensation amount related comperations (W-		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee			Highest compensated employee	Former	2/1099-M		2/1099-MISC)	no	rganizati relate organiza	on and
												+		
												+		
												+		
1b	Sub-Total							<b>&gt;</b>						
C	Total from continuation sheet	s to Part VII, S	ection A	١.				Þ						
d	Total (add lines 1b and 1c) .							•		93,000		0		4,800
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received n	nore th	an			
_					_						г		Yes	No
3	Did the organization list any <b>fo</b> on line 1a? <i>If</i> "Yes," complete S								, or nighest co	ompen:	sated employee	3		No
4	For any individual listed on line organization and related organ individual											_		N -
5	Did any person listed on line 1 services rendered to the organ										or individual for	4		No_
			, сотгрг	CLC 31	criea	uie J	10154	си р	CI 3 UII		[	5		No_
S∈	Complete this table for your five	ve highest comp											<b>.</b>	
	compensation from the organiz	(A) lame and business	-	ation	тог	tne c	aiena	arye	ear ending wit		(B) cription of services	onsi	(C) Compen	
												$\blacksquare$		
												-		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

Form 99 Part V		Statement of	of Revenue					Page
- GI C V			ule O contains a respor	se to any question i		<u> </u>	<u></u>	<u></u>
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s s	1a	Federated cam	ipaigns 1a					
ant	b	Membership di	ues <b>1b</b>					
ច្ច	c	Fundraising ev	ents <b>1c</b>	166,008				
£l. Ag	d	Related organiz	zations 1d					
ું હું	e	Government grant						
Sin								
를 들	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	1,104,823				
들돌	g	Noncash contributi 1a-1f \$	ions included in lines	51,125	į			
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add line	s 1 a - 1 f		1,270,831			
				Business Code				
Ę	2a			Business Code				
e Kei	b							
Œ.	c							
Ş	d		_					
33	e							
뎚	f	ΔII other progr	am service revenue					
Program Serwce Revenue	-							
<u></u>	g	Total. Add line						
	3		come (including dividend (ar amounts)		107,397			107,39
	4		stment of tax-exempt bond p	<u> </u>				
	5	Royalties .	<u></u>	🕨				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	, ,	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of	1,382,639					
		assets other than inventory						
	b	Less cost or other basis and	1,340,591					
		sales expenses						
	C .	Gain or (loss)	42,048		42,048			42,04
	d   8a		ss)	• • •	42,040			42,04
<u>o</u>		events (not inc						
Other Revenue		Ψ	5,008					
ě		See Part IV, lir	s reported on line 1c) ne 18					
<u>.</u>			а	12,637				
ž	b		(penses <b>b</b>	30,335				
0	C		(loss) from fundraising (	events 🛌	-17,698			-17,69
	9a		from gaming activities ne 19					
		,	а					
	ь		openses b					
	С		(loss) from gaming activ	vities				
	10a	Gross sales of returns and all						
		recurris and all	a a	205,611				
	ь	Less cost of g	oods sold <b>b</b>	151,645				
	С		(loss) from sales of inve		53,966	53,966		
		Mıscellaneou	s Revenue	Business Code				
	11a							
	b							
	С							
	d	All other reven	l					
	e	<b>Total.</b> Add line	s 11a-11d					
	12	Total revenue.	See Instructions		1,456,544	53,966		131,74
					±, 100,044	22,200	U	

	IX Statement of Functional Expenses				
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns All		•		
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	582,108	582,108		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	93,000	65,100	13,950	13,950
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	330,013	234,671	35,107	60,235
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	36,255	24,898	4,687	6,670
10	Payroll taxes	34,902	24,764	4,036	6,102
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	10,500		10,500	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	1,512			1,512
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	44,704	21,031	23,673	
12	Advertising and promotion	11,701	21,031	23,073	
13	Office expenses	14,143	10,979	1,674	1,490
14	Information technology	14,143	10,979	1,074	1,490
15	Royalties	22.500	17.000	1.000	2.550
16	Occupancy	23,590	17,030	4,002	2,558
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	57,870	57,486		384
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	22,527	21,527		1,000
23	Insurance				
24	Other expenses Itemize expenses not covered 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)				
а	Taxes, fees and license	58,871	111	58,192	568
b	Printing & Postage	24,593	14,132		10,461
С	Special Events	19,787	19,787		· ·
d	Education and Awareness	13,114	7,703	943	4,468
e	All other expenses	,	,		, -
25	Total functional expenses. Add lines 1 through 24e	1,367,489	1,101,327	156,764	109,398
26	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 ► ☐ if following SOP 98-2 (ASC 958-720)	_,	-,,	230,7.31	

Part X Balance Sheet

Par	t X	Balance Sheet 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	340,071	1	438,736
	2	Savings and temporary cash investments	212,323		305,409
	3	Pledges and grants receivable, net	157,929		118,020
	4	Accounts receivable, net	38,219	4	14,500
	5	Loans and other receivables from current and former officers, directors, trustees, key	· '	-	11,000
		employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 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			
	l _			6	
AS	7	Notes and loans receivable, net	404.550	7	100 500
	8	Inventories for sale or use	121,550	8	120,599
	9	Prepaid expenses and deferred charges	4,212	9	11,311
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  92,632			
	b	Less accumulated depreciation 10b 92,632	, ,	10c	0
	11	Investments—publicly traded securities	185,108	11	886,784
	12	Investments—other securities See Part IV, line 11	2,183,882	12	1,557,137
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,265,821	16	3,452,496
	17	Accounts payable and accrued expenses	21,018	17	19,108
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Ø.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qе		persons Complete Part II of Schedule L		22	
<b>=</b>	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	21.212	25	
	26	Total liabilities. Add lines 17 through 25	21,018	26	19,108
<b>У</b> ФО		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
ē	27	Unrestricted net assets	86,949	27	423,003
8	28	Temporarily restricted net assets	285,078	28	137,609
됟	29	Permanently restricted net assets	2,872,776	29	2,872,776
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and			
9		complete lines 30 through 34.			
Ş	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
đ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Set	33	Total net assets or fund balances	3,244,803	33	3,433,388
_	34	Total liabilities and net assets/fund balances	3,265,821	34	3,452,496

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,4	156,544
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,3	367,489
3	Revenue less expenses Subtract line 2 from line 1	3			89,055
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3 2	244,803
5	Net unrealized gains (losses) on investments	5			99,530
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,4	133,388
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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As Filed Data -

DLN: 93493220001433

**Employer identification number** 

OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Total

### **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.

2012

Open to Public Inspection

Interna	itional	Snow Leo	pard Trust						01 1144	110			
Pai	τI	Reas	on for Pu	blic Charity Sta	tus (All ord	nanizations	s must comi	nlete this	91-11441		ns		
				e foundation becaus					<u> </u>	isti actioi	113.		
1	Г			on of churches, or a									
2			•	in <b>section 170(b)(1</b>									
3				perative hospital se			· ·	n 170(b)(1	L)(A)(iii).				
4		A medi	cal researcl	n organization opera	ted ın conjun	ction with a	hospital des	cribed in <b>se</b>	ection 170(b)(	1)(A)(iii)	. Enter the		
		hospital's name, city, and state											
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		sect ior	170(b)(1)(	A)(iv). (Complete P	art II )								
6	Γ	A feder	al, state, or	local government o	government	al unit desc	rıbed ın <b>secti</b>	on 170(b)(	(1)(A)(v).				
7				at normally receives			support from	a governm	ental unit or f	rom the ge	eneral publ	ıc	
8	$\vdash$			on 170(b)(1)(A)(vi). described in <b>sectio</b> i			nnlata Dart II						
9	<u>'</u>		-	at normally receives			-	-	ibutions mam	harshin fa	es and are	cc	
,	'			ities related to its e								.33	
		•		oss investment inco	•	-			` '				
				janızatıon after June						,	5456556.		
10	Г			ganized and operated									
11	,	_		ganized and operated						o carry ou	ut the purpo	ses of	
	•			ly supported organiz									
				bes the type of supp									
	_			b Type II c									
е	ı	•	_	ox, I certify that the on managers and ot	_						•		
			n 509(a)(2)	on managers and oc	ner than one	or more pur	mery support	eu organiza	ations describ	eu iii sect	.ioii 509(a)	(1)01	
f		If the c	rganization	received a written d	etermination	from the IR	S that it is a	Type I, Ty	pe II, or Type	III suppo	rting organ	iizatio <u>n,</u>	
			this box	2006				<b>c</b>					
g			august 17, 2 ng persons?	2006, has the organ	ization accep	oteα any giπ	or contributi	on from an	y or the				
				rectly or indirectly o	ontrols, eith	er alone or	together with	persons de	escribed in (ii)	1	Yes	No	
		and (III	) below, the	governing body of th	e supported	organizatio	n?			1	1g(i)		
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				1:	1g(ii)		
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			11	Lg(iii)		
h		Provide	e the followi	ng information about	the support	ed organizat	ion(s)						
					Г		•						
•	) Nan		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you		(vi) Is		1 -	mount of	
	uppo	rted ation		organization (described on	organızatı col <b>(i)</b> lıs		the organiz		organizat col (i) org			netary oport	
0.	guiiiz	acion		lines 1- 9 above	your gove		suppor		in the U		ا عنا	эрогс	
				or IRC section	docume								
				(see									
				instructions))	Yes	No	Yes	No	Yes	No			

Schedule A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 **(e)** 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 1,082,019 1,147,621 1,110,429 1,388,676 1,270,831 5,999,576 include any "unusual grants ") 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 1,082,019 1,147,621 1,110,429 1,388,676 1,270,831 5,999,576 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 811,159 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 5,188,417 line 4 Section B. Total Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 **(c)** 2010 (d) 2011 **(e)** 2012 (f) Total beginning in) 🟲 1,082,019 1,147,621 1,110,429 1,388,676 1,270,831 5,999,576 Amounts from line 4 Gross income from interest, dividends, payments received on 20,290 9,894 14,979 68,728 107,397 221,288 securities loans, rents, royalties and income from similar sources Net income from unrelated 10 11 12 13 15 16a b 17a

carried on				
Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	20		23,256	
through 10)			6,244,120	
Gross receipts from related activities, etc. (see instructions)	12		899,211	
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as this box and stop here			nization, check	
Section C. Computation of Public Support Percentage		_		
Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	<b>14</b> 83		
Public support percentage for 2011 Schedule A, Part II, line 14	15	<b>15</b> 81 180		
<ul> <li>33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3 and stop here. The organization qualifies as a publicly supported organization</li> <li>33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is</li> </ul>		,	<b>▶</b> ▼	
box and <b>stop here.</b> The organization qualifies as a publicly supported organization  10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 1 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box an in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies	.6b, and li d <b>stop her</b>	ne 14 <b>e.</b> Explai	n orted	
<ul> <li>b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16l 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization supported organization.</li> <li>b Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check trinstructions.</li> </ul>	and <b>stop</b> qualifies a	<b>here.</b> s a public	cly ►⊏	
Sch	edule A (	Form 990	or 990-EZ) 2012	

18

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493220001433

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► 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

**Supplemental Financial Statements** 

Open to Public

emal Revenue	e Service	m 990. ► See separate instructions.			Inspect	tion
	the organization al Snow Leopard Trust		Emp	oloyer ident if ica	tion numbe	er
	·		91-	1144119		
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts	. Comple	te ıf the
		(a) Donor advised funds		(b) Funds and	other accou	ınts
Total	I number at end of year					
Aggr	egate contributions to (during year)					
Aggr	egate grants from (during year)					
Aggr	egate value at end of year					
	the organization inform all donors and donor advisors are the organization's property, subject to the or		or adv	ısed	┌ Yes	┌ No
used	the organization inform all grantees, donors, and de I only for charitable purposes and not for the benef erring impermissible private benefit?				┌ Yes	┌ No
art II	Conservation Easements. Complete if	the organization answered "Yes" to	o Forn	n 990, Part IV	<sup>7</sup> , line 7.	
	ose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space plete lines 2a through 2d if the organization held a ement on the last day of the tax year	or education) Preservation of an Preservation of a c	ertifie	d historic struc	ture	
				Held at the	End of the	Year
<b>a</b> Tota	I number of conservation easements		2a			
<b>b</b> Tota	l acreage restricted by conservation easements		2b			
<b>c</b> Num	ber of conservation easements on a certified histo	oric structure included in (a)	2c			
	ber of conservation easements included in (c) acq oric structure listed in the National Register	juired after 8/17/06, and not on a	2d			
Num	ber of conservation easements modified, transferr	red, released, extinguished, or terminate	d by th	ne organization	during	
the t	ax year ►					
Num	ber of states where property subject to conservat	ion easement is located ▶				
Does	s the organization have a written policy regarding treement of the conservation easements it holds?			f violations, and	┌ Yes	┌ No
Staff ▶	and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents (	during the year		
A mo ► \$	unt of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	durın	g the year		
Does	s each conservation easement reported on line 2(o section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı)	☐ Yes	┌ No
bala	art XIII, describe how the organization reports con nce sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financial		•		
art III	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, ( es" to Form 990, Part IV, line 8.	or Ot	her Similar .	Assets.	
work	e organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asse ice, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reven its held for public exhibition, education, o	or rese	earch in furthera		
work	e organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asse ice, provide the following amounts relating to thes	ts held for public exhibition, education, o				lıc
(i) <sub>R</sub>	evenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii) ∆	Assets included in Form 990, Part X					
Ifth	e organization received or held works of art, histor wing amounts required to be reported under SFAS		r finan			
a Reve	enues included in Form 990 Part VIII line 1			<b>b</b> - ⊄		

**b** Assets included in Form 990, Part X

Par	t IIII Organizations Maintaining Co	llections of Art	t, His	tori	cal Tr	<u>easur</u>	es, or C	<u>)the</u>	Similar A	<u>sset</u>	S (co.	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of tl	he follo	wing that	are a	sıgnıfıcant us	e of it	:s	
а	Public exhibition		d	Γ	Loan c	or excha	ange prog	rams				
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's control Part XIII	ollections and expla	in hov	w the	y furthe	r the or	ganızatıor	n's ex	empt purpose	ın		
5	During the year, did the organization solicit								ılar	_		_
	assets to be sold to raise funds rather than								" -	<u> </u>	es	│ No
Ра	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	ea "Ye	es" to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						other ass	sets n	ot	ГΥ	es	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	ving t	able		_					
									Α	moun	t	
С	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year						ļ.	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?							┌ Y	es	∏ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natio	on has b	een pro	vided in f	art X	III			
Pa	rt V Endowment Funds. Complete											
1-	Degunning of very helping	(a)Current year 2,632,966	(b)	Prior y	ear   I 823,645	<b>b (c)</b> Two	years back 1,092,826		hree years back 1,074,150			ars back 1,047,000
1a L	Beginning of year balance	2,032,900		۷,	97,040		1,682,910	+	18,676			27,150
b	Contributions				37,040		1,002,910	1-	10,070			27,130
С	Net investment earnings, gains, and losses	248,975		-	173,558		48,909	Э	4,497			
d	Grants or scholarships											
е	Other expenditures for facilities and programs	88,000			78,000		1,000		4,497			
f	Administrative expenses	39,877			36,161		<u> </u>					
a a	End of year balance	2,754,064		2,	632,966		2,823,64	5	1,092,826			1,074,150
2	Provide the estimated percentage of the cur	rent vear end halan	ce (lir	e 1 a	columr	1 (a)) he	ald as	1				
a	Board designated or quasi-endowment	rene year ena baran	CC (III	cig	, coraiiii	1 (u )) 110	.14 45					
b	Permanent endowment • 100 000 %											
	r ermanent endowment P											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
За	Are there endowment funds not in the posse		ation	that	are held	and ad	ministere	d for i	the			
-	organization by	solon of the organiz	acion	cira c	are nera	una aa		u 101		Γ	Yes	No
	(i) unrelated organizations									(i)		Νo
	(ii) related organizations								-	(ii)		No
ь	If "Yes" to 3a(II), are the related organization	•						•	3	Bb		
4	Describe in Part XIII the intended uses of the company of the comp					0						
Pa	rt VI Land, Buildings, and Equipment  Description of property	ent. See Form 99	70, Pa	_	, iiiie 1 a) Cost o		(b)Cost or	r other	(c) Accumula	ted	(d) B	ook value
	Description of property				asis (Inves		basis (ot		depreciatio		` ,	
12	Land			+								
	Buildings		•									
	Leasehold improvements		•	$\vdash$								
	F		•	$\vdash$				92,632	0	2,632		0
	Other		•	$\vdash$			<u> </u>	,2,032	ļ ,	-,002		0
	II. Add lines 1a through 1e (Column (d) must 6	equal Form 990. Part	X, coli	<u> </u>	B), line :	10(c))			<u>l</u> ▶			0
	Times and again to (Solution (a) master	,	., 25,4	(	,,	- (-/*/	<u> </u>		Schedule	D (Fo	rm 9	
									Julieuule	- 150	7	: <del>-</del>

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) Bonds	91,189	F
(B) Mutual Funds	1,465,948	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,557,137	
Part VIII Investments—Program Related. Se		3
(a) Description of investment type	(b) Book value	(c) Method of valuation
	, ,	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u>•</u>	
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(a) Descri	ption	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)	
Part X Other Liabilities. See Form 990, Part X		·
1 (a) Description of liability	(b) Book value	
Federal income taxes		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )		
2 Fin 48 (ASC 740) Footnote In Part XIII provide the te	vt of the feetnets to the ergan	unation la financial atatamenta that vancita the

, , , , , ,	Aute B (1 01111 3 3 0 ) 2 0 1 2						rage ¬
Par	t XI Reconciliation of Revenue per Audited Financial Stat	eme	ents W	ith Re	venue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements					1	1,568,026
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
а	Net unrealized gains on investments	2a			99,530		
b	Donated services and use of facilities	2b			400		
c	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIII)..................................	2d			11,552		
e	Add lines <b>2a</b> through <b>2d</b>	•				2e	111,482
3	Subtract line <b>2e</b> from line <b>1</b>				[	3	1,456,544
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a					
b	Other (Describe in Part XIII)..............	4b					
c	Add lines <b>4a</b> and <b>4b</b>	-				4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)			[	5	1,456,544
Par	XII Reconciliation of Expenses per Audited Financial Sta	tem	ents \	With E	cpenses	per	Return
1	Total expenses and losses per audited financial statements					1	1,379,441
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	2	1		400		
b	Prior year adjustments	21	)				
C	Other losses	20	2				
d	Other (Describe in Part XIII)..................................	20	i		11,552		
e	Add lines <b>2a</b> through <b>2d</b>					2e	11,952
3	Subtract line <b>2e</b> from line <b>1</b>					3	1,367,489
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4					
b	Other (Describe in Part XIII)................	4	,				
c	Add lines <b>4a</b> and <b>4b</b>					4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18	)			5	1,367,489

#### Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part 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 provide any additional information

I dentifier	Return Reference	Explanation
Description of Intended Use of Endowment Funds	Part V, Line 4	International Snow Leopard Trust's endowment consists of three donor-restricted endowment funds. The Felburn and Schiller funds are general funds. The Freeman fund specifies that \$1,000 be granted annually to an individual that lives in the snow leopard range and works to promote the conservation of the species.
Description of Uncertain Tax Positions Under FIN 48	Part X, Line 2	The Trust is exempt from federal income tax under section 501 (c)(3) of the Internal Revenue Code. It has been classified as an organization that is not a private foundation within the meaning of section 509(a) because it is an organization of the type described in section 509(a)(2). The Trust's income tax filings are subject to examination by various taxing authorities. The Trust's open examination periods are 2009 and thereafter. The Trust follows the provisions of uncertain tax positions as addressed in FASB Accounting Standards Codification Subtopic 740-10, Income Taxes. The Trust believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.
Part XI, Line 2d - Other Adjustments		Special Events 11,552
Part XII, Line 2d - Other Adjustments		Special Events 11,552

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DLN: 93493220001433

**Employer identification number** 

OMB No 1545-0047

Open to Public Inspection

#### 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.

Department of the Treasury Internal Revenue Service

International Snow Leopard Trust

Name of the organization

91-1144119 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States. Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e g, program service, describe for and investments employees, agents, and fundraising, program specific type of in region region ındependent services, investments, grants service(s) in region contractors in to recipients located in the region region) 0 Program services 705,600 Asıa Snow Leopard Conservation, Research, and Education

ol

0

3a Sub-total

to Part I

**b** Total from continuation sheets

c Totals (add lines 3a and 3b)

705,600

705,600

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe
		Asıa - Mongolia	Snow Leopard Conservation, Education, and Research	208,000	Wire Transfer			
		Asıa - India	Snow Leopard Conservation, Education, and Research	129,508	Wire Transfer			
		Asıa - Pakıstan	Snow Leopard Conservation, Education, and Research	140,000	Wire Transfer			
		Asıa - Kyrgyzstan	Snow Leopard Conservation, Education, and Research	32,000	Wire Transfer			
		Asıa - Kazakhstan	Snow Leopard Conservation, Education, and Research	7,100	Wire Transfer			
		Asıa - Chına	Snow Leopard Conservation, Education and Research	57,000	Wire Transfer			
			ted above that are re					

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

Part III Can be	duplicated if addit		eeueu.		1		ı
(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	( <b>h)</b> Method of valuation (book, FMV, appraisal, other)
Snow Leopard Research Stipend	Asıa	2	8,500	Wire Transfer			
						Calcada	ulo E (Eormo 000) 2012

#### Part IV Foreign Forms

1	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)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Y	'es	্য	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)	Г	Y	'es	<u> </u>	Νo
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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
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)	Г	Υ	'es	<u> </u>	Νo
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).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

#### 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).

act of these organizations on a regular basis and we have at least weekly communications concerning our ongoing program that we implement in partnership with these NGOs. In addition each organization submits formal mid-term and year end report Trust steff also visit each of the programs each year except where travel or security restrictions make that impossible sue as in Pakistan in 2003.  Method Used to Account for Schedule F, Part I, Line 3. Actual Costs.  Schedule F, Part I, Line 3. Actual Costs.	as applicable. Also cor	nplete this part to provide any	additional information (see instructions).
act of these organizations on a regular basis and we have at least weekly communications concerning our ongoing program that we implement in partnership with these NGOs. In addition each organization submits formal mid-term and year end report Trust steff also visit each of the programs each year except where travel or security restrictions make that impossible sue as in Pakistan in 2003.  Method Used to Account for Schedule F, Part I, Line 3. Actual Costs.  Schedule F, Part I, Line 3. Actual Costs.	I dentifier	ReturnReference	Explanation
Expenditures	Procedure for Monitoring Grants O utside the U S		least weekly communications concerning our ongoing programs that we implement in partnership with these NGOs In addition each organization submits formal mid-term and year end reports Trust staff also visit each of the programs each year except where travel or security restrictions make that impossible such as in Pakistan in 2009
	Method Used to Acccount for Expenditures		Schedule F, Part I, Line 3 Actual Costs
			Schedule F (Form 990) 2012

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DLN: 93493220001433

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

International Snow Leopard Trust

**SCHEDULE G** 

# **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. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

**Employer identification number** 

						91-1144119	
Pa	rt I Fundraising Act	<b>ivities.</b> Complete	If the o	rganızatı	on answered "Yes" t	to Form 990, Part IV	, line 17.
a b c d	Indicate whether the organ  Mail solicitations  Internet and email solic  Phone solicitations  In-person solicitations  Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at least	citations written or oral agre Form 990, Part VII) t paid individuals or	ement witl or entity entities (f	e f g n any Indi In connec	Solicitation of non Solicitation of gov Special fundraisin vidual (including officer	regovernment grants rernment grants g events rs, directors, trustees fundraising services?	<b>F Yes F No</b> ndraiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
Tota			<u>.</u>	<b>&gt;</b>			
3	List all states in which the discensing	organization is regis	tered or li	censed to	solicit funds or has be	en notified it is exempt	from registration or

		more than \$15,000 of fundr events with gross receipts of		ions and gross income	e on Form 990-EZ, lir	ies 1 and 6b. List
		<u> </u>	(a) Event #1 Fall Dinner	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	- Col (C)
ΕE	1	Gross receipts	178,64!	5		178,645
Revenue	2	Less Contributions	166,008	3		166,008
<u>~</u>	3	Gross income (line 1 minus line 2)	12,63	7		12,637
	4	Cash prizes				
ဟ	5	Noncash prizes				
Expenses	6	Rent/facility costs	1,20	2		1,202
ă	7	Food and beverages .	18,78	3		18,783
Direct	8	Entertainment	4,820			4,820
à	9	Other direct expenses .	5,530			5,530
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	ı(d)		(30,335)
	11	Net income summary Combine I	_			-17,698
Par	t II			"Yes" to Form 990, Pa	ırt IV, lıne 19, or rep	
	I	\$15,000 on Form 990-EZ, li		(1) 5 -11 - 1 - (7 1 1	( ) ( ) ( )	(D. T. d.
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
Expenses	2	Cash prizes				1
× De	3	Non-cash prizes				
ы Б	4	Rent/facility costs				
百	5	Other direct expenses				
	6	Volunteer labor	☐ Yes	Г Yes Г Nо	☐ Yes	
		Direct expense summary Add line				
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)	<u> </u>	
9 a b	Is	ter the state(s) in which the organiz the organization licensed to operate 'No," explain	e gaming activities in eac	h of these states?		「Yes 「No
10a b		re any of the organization's gaming 'Yes," explain				

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gamıng <sup>,</sup>		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ied by the third party 🟲 \$		
С	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
<b>.</b> 6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation <b>I</b>	<b>*</b> \$		
	Description of services provided	<b>&gt;</b>		
	☐ Director/officer	<b>F</b> Employee	Independent contractor	
<b>.7</b>	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Yes $\Gamma_{No}$
b		required under state law distributed t	o other exempt organizations or sp	ent
	<u> </u>	activities during the tax year > \$		
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Department of the Treasury

**SCHEDULE M** 

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**Noncash Contributions** 

Internal Revenue Service Name of the organization

**Employer identification number** International Snow Leopard Trust 91-1144119

Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(c Method of c noncash contril	determir	_	:s
1	Art—Works of art							
	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
9	Securities—Publicly traded .	X	1	51,125	Fair Market Value			
10	Securities—Closely held stock							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15								
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
23	•							
24	•							
	Other ► ()							
	O ther ►() O ther ►()							
28								
	Number of Forms 8283 received	by the orga	nization during the tax yea	r for contributions				
	for which the organization comple				29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year				d to be used			
	for exempt purposes for the enti					30a		No
	If "Yes," describe the arrangem			roway of any non-standard	aantrihutiana?	21		No
31	Does the organization have a gif					31		<u>No</u>
32a	Does the organization hire or us contributions?	e third parti		to solicit, process, or sell i	noncash • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t an amount	in column (c) for a type of	property for which column (	a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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2012

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization
International Snow Leopard Trust

91-1144119

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 6	The corporation shall have one or more classes of members, as provided in the bylaws. Provided, however, that members shall have no parliamentary or voting rights or other voice in the corporation.
	Form 990, Part VI, Section B, line 11	The Executive Director emails a copy of the 990 before filing with a deadline for submitting responses
	Form 990, Part VI, Section B, line 12c	The Executive Director knows each board member and reviews all contracts entered into by the Trust Each contract is reviewed to ensure compliance with the conflict of interest policy
	Form 990, Part VI, Section B, line 15	There is a review committee that conducts the review and salary decision for the Executive Director. As part of the process the entire board is canvased on any salary recommendation for the ED made by the committee.
	Form 990, Part VI, Section C, line 19	The Snow Leopard Trust has its 990 reviewed and assessed by both Charity Navigator and Guidestar - the two major evaluators of nonprofit organizations. Both groups post the 990 and their reviews online Forms are also available upon request