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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)

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

2012
Open to Public Inspection

Α	For the	2012 calendar year, or tax year beginning $\ \ JUL\ 1$, $\ 2012$ and end	ling J	UN 30, 2013	
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	AFRICAN PEOPLE & WILDLIFE FUND INC.			
L	Name change			20-3	153855
E	initial return Termin ated	, , , , , , , , , , , , , , , , , , , ,	m/suite	E Telephone number 908-	642-1540
Ē	Ameno return Applic	City, town, or post onice, state, and ZIP code		G Gross receipts \$	494,968.
_	tion pendir			H(a) Is this a group re	Yes X No
		F Name and address of principal officer:LALY LICHTENFELD 19 PHEASANT HILL DRIVE, FAR HILLS, NJ 0	7931	for affiliates? H(b) Are all affiliates inc	
T	Tax-exe	mpt status: X 501(c)(3) 501(c) ()	527	lf "No," attach a	list (see instructions)
J	Websit	e: ▶ WWW.AFRPW.ORG		H(c) Group exemption	
ĸ	Form of	organization: X Corporation Trust Association Other ►	L Year	of formation: 2005 N	State of legal domicile: NJ
P	art I	Summary			
		Briefly describe the organization's mission or most significant activities: ${ m TO}$ ${ m CON}$	SERV	E AFRICA'S	WILDLIFE,
Governance		PROTECT THEIR NATURAL HABITATS AND TO PROMO	OTE	VILLAGE DEV	ELOPMENT
ř	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed	of more	than 25% of its net as	
Š.	3	Number of voting members of the governing body (Part VI, line 1a)		3	6
ত	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	4
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	2
Ϋ́	6	Total number of volunteers (estimate if necessary)		6	0
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		303,020.	451,914.
	9	Program service revenue (Part VIII, line 2g)		12,722.	2,160.
	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		17.	19.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		39,780.	29,474.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		355,539.	483,567.
	13	Grants and smilar amounts pate (Patt Kncolumn (A), lines 1-3)		0.	270,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ģ		Salaries, othercompensation, employee benefits (Part IX, column (A), lines 5-10)		50,142.	93,823.
Expenses	16a	Professional rundraising (jees [Pat k) Clump (2) line 11e)		0.	0.
xbe	b	Total fundraising expenses (Part IX, column (D); line 25)	<u>·</u> ∟	3 * 3000 -	· · · · · · · · · · · · · · ·
Ш	17	Other expenses (Part X, column (A), lines 11a-11d, 11f-24e)		197,309.	76,483.
	18	Total expenses. Add lines 13 172 (must equal Part IX, column (A), line 25)		247,451.	440,306.
_		Revenue less expenses. Subtract line 18 from line 12		108,088.	43,261.
Net Assets or			Be	ginning of Current Year	End of Year
Sets	20	Total assets (Part X, line 16)		640,294.	683,555.
TAS	21	Total liabilities (Part X, line 26)		0.	0.
킬	22	Net assets or fund balances Subtract line 21 from line 20		640,294.	683,555.
	art II	Signature Block			
		ities of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is baced on all imprimation of which p	preparer	has any knowledge.	
		The Frederice		1013111	<u> </u>
Sig	ın	Signature of officer		Date	
He	re	LALY LICHTENFELD, PRESIDENT V			
_		Type or print name and title		loto I	TI BYIN
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai		MICHAEL SOMER Town	<u> </u>	10/29/13 self-employe	
	parer	Firm's name EISNERAMPER LLP		Firm's EIN	13-1639826
Use	Only	Firm's address 111 WOOD AVENUE SOUTH			20 042 5000
		ISELIN, NJ 08830-2700		Phone no. 7	32-243-7000
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)	_		X Yes No

4e Total program service expenses ►
232002
12-10-12

(Expenses \$

Other program services (Describe in Schedule O.)

Form 990 (2012)

419,135.

	t 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			Ţ,
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	٣		 -
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
0	Schedule D, Part III	8		х
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	_9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	_	-	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		х
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		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f		110		
٠	the organization's separate of 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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Λ	
D	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	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
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		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	A
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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			-
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
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		<u> </u>
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			7.
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		i	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K. If "No", go to line 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
ZOa	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	2.50		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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		X
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		<u> </u>
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):	م نشست		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		$\frac{x}{x}$
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		I	X
0.4	contributions? If "Yes," complete Schedule M	30	\dashv	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	ł	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
J _	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	-	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	-		
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			37
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		. l	
	Note. All Form 990 filers are required to complete Schedule O	38_	990 (2010
		rom	33U (2012)

Form	990 (2012) AFRICAN PEOPLE & WILDLIFE FUND INC. 20-3153	<u> 855</u>	P	<u>age 5</u>
Par				
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable]		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	2		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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	X	
ь	If "Yes," enter the name of the foreign country ► TANZANIA			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	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		х
h	If "Yes." did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			, ,
a	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			_
·	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	, · ·		^ 1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g	If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?	7h		_
ь 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	 ```		
0	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.	۴	-	
9	Did the organization make any taxable distributions under section 4966?	9a		
a		9b		
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?	30		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a	1		,
a				25,
. b		-		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			:
a		-		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against			,
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		·
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			,
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	-		,
	Enter the amount of reserves on hand	1		T.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X

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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Form **990** (2012)

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

	to the day, of the below, describe the directinations, processes, of the ignorance of the metabolisms.			[T.F.]
	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6			
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		~ _	
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990)
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			·
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NJ	_		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvaılab	le	
	for public inspection. Indicate how you made these available Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d fınar	icial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion: 🕨	·	
	ROSALIE BALLANTINE - 908-766-9668			
	19 PHEASANT HILL DRIVE, FAR HILLS, NJ 07931			

12-10-12

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization (A)	(B)				C)			(D)	(E)	(F)	
Name and Title	Average			Pos	ition	١		Reportable	Reportable	Estimated	
	hours per	box	not c , unle	neck ss pe	more than one erson is both an			compensation	compensation	amount of	
	week	\vdash	officer and a director/trustee)			or/trus	tee)	from	from related	other	
	(list any	rector				ł		the	organizations	compensation	
	hours for	ē	8			ated		organization	(W-2/1099-MISC)	from the	
	related organizations	ustee	trust		8	Bens		(W-2/1099-MISC)		organization and related	
	below	量	tonal		yoldr	ncou	L			organizations	
	line)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Ē			v.gaa	
1) ROSALIE BALLANTINE	10.00	Ī	_								
REASURER		X		X				0.	0.	0	
2) LALY LICHTENFELD	40.00										
PRESIDENT		X		X				41,800.	0.	0	
3) JONATHAN MEADE	5.00										
SECRETARY		X		X				0.	0.	C	
4) CHARLES TROUT	40.00	l							_	_	
TICE CHAIRMAN		X		X		_	<u> </u>	29,800.	0.	C	
5) MARK LICHTENFELD	5.00	١								_	
DIRECTOR		Х				_	<u> </u>	0.	0.	C	
6) ANN SMITH	5.00	٠,					Ī		0		
DIRECTOR		X	\vdash			\vdash	┝	0.	0.	0	
		ł									
			_			_	\vdash				
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Form **990** (2012)

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

232008 12-10-12 Form **990** (2012)

Page 8

Form 990 (2012) AFRICAN PEOPLE & WILDLIFE FUND INC.

Part VIII Statement of Revenue

			Check if Schedule O cont	ains a response	to any question				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts	1	— а	Federated campaigns	1a				-	_
ᄪᇎ			Membership dues	1b					
اغ ق			Fundraising events	1c					
# F			Related organizations	1d					
ار اران			Government grants (contribut						
ğ iğ		f	All other contributions, gifts, gran	· · -					
돌힐		•	similar amounts not included abo	1 1	451,914.				
불팅					7,977.				
Contributions, Gifts, Grants and Other Similar Amounts		g h	Noncash contributions included in lines Total. Add lines 1a-1f	11a-11 9		451,914.			
-		<u>''-</u>	Total. Add lines 1a-11	· .	Business Code				
	2	2	ENVIRONMENTAL C	ENTER	561520	2,160.	2,160.	m m e	
Š		b				<u> </u>	•		-
Ser		C							
E S		d				-			
Pe									
Program Service Revenue		e	All other program convectors				-		
		· -	All other program service reverage. Add lines 2a-2f	ilue		2,160.			
_	3	9	Investment income (including	dividends inter	est and	2,2000			
	3		other similar amounts)	dividends, intere	est, and	19.			19.
	4		Income from investment of ta	v avamnt hand r	rocoods				
	4			x-exempt bond p	Dioceeds -				
	5		Royalties	(i) Real	(II) Personal				+
		_	Cross vents	(i) neai	(II) Fersonal				
	6		Gross rents						
			Less: rental expenses						
			Rental income or (loss)		<u> </u>	***************************************	* 15 % to a proper require to the manufacture		
			Net rental income or (loss)	(3 Coot.oo	T				
	1	а	Gross amount from sales of	(i) Secunties	(II) Other			,	/ . /
			assets other than inventory						
		D	Less: cost or other basis			*		~	, ;
			and sales expenses		_				
			Gain or (loss)	<u></u>					
			Net gain or (loss)		<u> </u>				
enne	8	а	Gross income from fundraisin	-					
ven			including \$						
Re			contributions reported on line	•	40,875.				
Other Rev			Part IV, line 18	a	11 101				-
₹			Less: direct expenses	, b	11,401.	29,474.			29,474.
			Net income or (loss) from fund		P	47,474.			47,212.
	9	а	Gross income from gaming ac		1				1
			Part IV, line 19	a					
			Less: direct expenses	b					
			Net income or (loss) from gam					-	 ,
	10	а	Gross sales of inventory, less		İ				
		_	and allowances	a					`
			Less: cost of goods sold	b					
		С	Net income or (loss) from sale		<u> </u>				
	4.	_	Miscellaneous Revenu	ie	Business Code				
	11								
		b							+
		C		 ,					
		d	All other revenue				 		
		е	Total. Add lines 11a-11d			483,567.	2,160.	0	. 29,493.
23200	12 9	_	Total revenue. See instructions.		<u> </u>	=03,307.	2,100.		Form 990 (2012)

Form 990 (2012) AFRICAN PEOPLE
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	omplete column (A)	
	Check if Schedule O contains a respor		is Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in		1		
	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	270,000.	270,000.		
4	Benefits paid to or for members		<u></u>		
5	Compensation of current officers, directors,	71 600	71 600		
	trustees, and key employees	71,600.	71,600.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages			· · · · · · · · · · · · · · · · · · ·	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	16,136.	16,136.		
9	Other employee benefits	6,087.	6,087.		
10	Payroll taxes	0,007.	0,007.		
11	Fees for services (non-employees)				
a	Management				
b	Legal Accounting	1,800.		1,800.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17		,	、	
f	Investment management fees				
q	Other. (If line 11g amount exceeds 10% of line 25,				
3	column (A) amount, list line 11g expenses on Sch O.)	1,641. 819.	780.	255.	606.
12	Advertising and promotion	819.			819.
13	Office expenses	10,409.	2,797.	2,914.	4,698.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	13,369.	13,214.		155.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		-	4 000	
19	Conferences, conventions, and meetings	4,000.		4,000.	
20	interest				
21	Payments to affiliates	20 254	27 760	1,586.	
22	Depreciation, depletion, and amortization	39,354.	37,768.	1,300.	
23	Insurance	<u> </u>			
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)	1			
_	amount, list line 24e expenses on Schedule 0.) GRANT WRITING	3,105.		3,105.	
a b	UNIFORMS	753.	753.	3,103.	
C	BANK CHARGES AND OTHER	453.	, 55 •	453.	
d	COMPUTER EXPENSES	451.		451.	
e	All other expenses	329.		329.	
25	Total functional expenses. Add lines 1 through 24e	440,306.	419,135.	14,893.	6,278.
26	Joint costs. Complete this line only if the organization		· · ·	· i	·
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet

Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 239,028. 254,532. Cash - non-interest-bearing 6,476. 18,238. 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L Assets 7 Notes and loans receivable, net Я Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 511,273 basis Complete Part VI of Schedule D 10a 100,488. 394,790. 410,785. 10b b Less accumulated depreciation Investments - publicly traded securities 11 11 12 12 Investments - other securities See Part IV, line 11 13 13 Investments · program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 640,294. 683,555. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 0. 0. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 683,555. 640,294. 27 27 Unrestricted net assets 28 Temporanly restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 640,294. 683,555. 33 33 Total net assets or fund balances 640,294. 683,555. Total liabilities and net assets/fund balances

Form 990 (2012)

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 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

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

review, or compilation of its financial statements and selection of an independent accountant?

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

X

2c

За

Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

Employer identification number

De		Deces		TEOPLE & WI							0-313363	<u> </u>
	rt I			ity Status (All organiz		_			tructions			
The	organ			because it is: (For lines 1								
1	닏	•		s, or association of church			ection 170	(b)(1)(A)(i)).			
2	\square			70(b)(1)(A)(ii) . (Attach Sc	-							
3	닏			tal service organization of								
4		A medical res	search organization	operated in conjunction	with a hos	prtal desc	nbed in se	ction 170	(b)(1)(A)(ii	ii). Enter	the hospital's na	ıme,
		city, and stat										
5		An organizat	on operated for the	benefit of a college or ur	niversity ov	wned or o	perated by	a governi	mental un	it describ	ped in	
			(b)(1)(A)(iv). (Comple									
6	\square	A federal, sta	ite, or local governm	ent or governmental und	t described	d in sectio	n 170(b)(I)(A)(v).				-
7	X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public describe	d in
		section 170(b)(1)(A)(vi). (Comple	te Part II.)								
8	닏	-		section 170(b)(1)(A)(vi). (-						
9		-	-	eives: (1) more than 33 1								
				nctions - subject to certa								
		income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	ısınesses a	acquired b	y the orga	anization	after June 30, 1	975.
	_	See section	509(a)(2). (Complete	e Part III.)								
10	닏	•		perated exclusively to te	-							
11		-		perated exclusively for th								
				ations described in section				2). See se c	ction 509(a)(3). Ch	eck the box that	í
	describes the type of supporting organization and complete lines 11e through 11h											
		a Type		•	ype III - Fui		-		• • •		n-functionally inf	•
е	ш		•	at the organization is not		-	-	-				
			=	han one or more publicly						9(a)(1) or	section 509(a)(2	<u>'</u>).
f		•		tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
			rganization, check th							_		Ш
g				organization accepted ar							<u></u>	
				lirectly controls, either al	one or tog	ether with	persons o	lescribed	in (ii) and ((III) below		s No
		•		upported organization?							11g(i)	+
			· ·	n described in (i) above?							11g(ii)	+-
			-	person described in (i) o							[11g(iii)]	—
h		Provide the f	ollowing information	about the supported org	ganizationi	(S)						
			i	I	(iv) lo the e	rannization	(v) Did vo	. notification	(vi) Is	the		
(i)		of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) h		(v) Did yor organizat	ion in col.	Lorganizáti	on in col.	(vii) Amount of n	ionetary
	orga	anızatıon			governing			support?	(i) organiz U.S	ea in the	support	
				(see instructions))	Yes	No	Yes	No	Yes	No		
					-		100		1	'''	 	
-					 							
										ļ		
												
						 						
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Tota	31		l .	I	I	ı	I	I	1	1	I	

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

LHA For Paperwork Reduction Act Notice, see the Instructions for

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Sec	ction A. Public Support	-					
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	112,595.	239,242.	257,773.	303,020.	451,914.	1,364,544.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to	·					
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	112,595.	239,242.	257,773.	303,020.	451,914.	1,364,544.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						546,134.
6	Public support. Subtract line 5 from line 4						818,410.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	112,595.	239,242.	257,773.	303,020.	451,914.	1,364,544.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	747.	9.	12.	17.	19.	804.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10	* * * *	, , , , , , , , , , , , , , , , , , ,		4,*		1,365,348.
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	31,282.
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and sto	here					<u> </u>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage			гт	<u> </u>
	Public support percentage for 2012 (•	•	column (f))		14	59.94 %
	Public support percentage from 2011					15	67.96 _%
16a	33 1/3% support test - 2012. If the				14 is 33 1/3% or п	nore, check this bo	
	stop here. The organization qualifies		_				► X
b	33 1/3% support test - 2011. If the	_			I line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					rt IV how the organ	ization
	meets the "facts-and-circumstances"	_	•		_		
t	10% -facts-and-circumstances tes						
	more, and if the organization meets t						,
	organization meets the "facts-and-cir						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sche	edule A (Form 990	or 990-EZ) 2012

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

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

Sec	ction A. Public Support	ciow, picago com	piete r art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	1=, =000	_,	13,20.0	1	1 37.20.2	(1) 1 0 10.
•	membership fees received. (Do not						
	include any "unusual grants.")				İ	İ	
2	Gross receipts from admissions,						
-	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that				 	+	
J	are not an unrelated trade or bus-					1	İ
	iness under section 513					İ	
				<u> </u>	 	 	
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from fine 6.)						
Sed	ction B. Total Support				-		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
þ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b			ĺ			
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						
13	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)			<u> </u>			
	First five years. If the Form 990 is for	r the organization's	s first second this	rd fourth or fifth t	ax vear as a section	on 501(c)(3) organiz	ration
•	check this box and stop here	the organization.	5 m 5t, 5555 ma, tim	a, roaran, or mar a	an your as a soon	on oo nono, organiz	▶ □
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2012 (column (fl)		15	%
	Public support percentage from 2011		•	JOIGHT (1,)		16	<u> </u>
	ction D. Computation of Inves					1.91	
	Investment income percentage for 20					17	
	Investment income percentage from 2		• • • • • • • • • • • • • • • • • • • •	10, column (I))		18	
	33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than		
198	more than 33 1/3%, check this box a	•					is not
		•	•	• •	• • •		and and
10	33 1/3% support tests - 2011. If the	_					
~	line 18 is not more than 33 1/3%, che						*
_	Private foundation. If the organization	n dia not check a	DOX ON line 14, 19	a, or 190, check to		estructions hedule A (Form 99	0 or 000 E7\ 0010
14つ0	23 12-04-12				×0	HERRING A CENTR QQ	or www/1 70179

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2012

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
	69,850.	42,543.
· · · · · · · · · · · · · · · · · · ·	30,000.	2,693.
	38,000.	10,693.
	40,000.	12,693.
	217,547.	190,240.
	140,000.	112,693.
	126,500.	99,193.
·	30,000.	2,693.
	100,000.	72,693.
		 -
		<u> </u>
· · · · · · · · · · · · · · · · · · ·		
	- -	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2012
Open to Public Inspection

Name of the organization

AFRICAN PEOPLE & WILDLIFE FUND INC.

Employer identification number 20-3153855

Pa	t I Organizations Maintaining Donor Advised		Accounts Complete if the
Га			Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line		(b) Funds and other accounts
_	Total count of and of count	(a) Donor advised funds	(b) I dilus and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	-	
_	are the organization's property, subject to the organization's e		Yes No
6	Did the organization inform all grantees, donors, and donor ad	<u> </u>	
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose confe	• — —
Do	impermissible private benefit?		Yes No
Pa			, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g , recreation or ed	[]	
	Protection of natural habitat	Preservation of a certified h	iistoric structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
Ь	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure.	· ·	2c
d	Number of conservation easements included in (c) acquired af	ter 8/17/06, and not on a historic structure	1 1
	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the orga	nization during the tax
	year >		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the period	_ ·	
_	violations, and enforcement of the conservation easements it I		U Yes □ No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	_	· · ·
7	Amount of expenses incurred in monitoring, inspecting, and er		
8	Does each conservation easement reported on line 2(d) above	satisty the requirements of section 170(n)(4)(l	··· — —
^	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	•	
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the or	ganization's accounting for
Pai	conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Other	Similar Assets
	Complete if the organization answered "Yes" to Form 9		J
12	If the organization elected, as permitted under SFAS 116 (ASC		nd balance sheet works of art
14	historical treasures, or other similar assets held for public exhil	•	·
	the text of the footnote to its financial statements that describ-		public service, provide, iii r art Am,
h	If the organization elected, as permitted under SFAS 116 (ASC		palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu		
	relating to these items.	reation, or research in furtherance of public se	rvice, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		~ ¢
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treas	curse or other cimilar accets for financial acia	
2	the following amounts required to be reported under SFAS 116	•	provide
2	Revenues included in Form 990, Part VIII, line 1	o vice ood, relating to these items	• •
a h	Assets included in Form 990, Part X		► \$ ► \$
D	ASSOCIATIONALEM ITT ON IT 230, FAILA		Ψ

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

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.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection Employer identification number

AFI	RICAN PEOPLE	& WILDLI	FE FUND	INC.		20-315385	5
Pa				tside the United States. Compl	ete if the organ		
	to Form 990, Par			2 - 1.1-	-		
1	For grantmakers. Does	s the organization	n maintain recor	ds to substantiate the amount of its gr	ants and other	assistance,	
	the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance?	Yes No
2		cribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and of	ther assistance outs	side the
	United States.						
3				an be duplicated if additional space is			
	(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in region (by type) (e.g., fundraising, program		vity listed in (d) gram service,	(f) Total expenditures
		in the region	agents, and independent contractors	services, investments, grants to	1 '	specific type	for and
				recipients located in the region)	of service	e(s) in region	investments in region
		 	ın region		CONSERVATIO	N OF AFRICA'S	
				PROGRAM SERVICES AND GRANTS	WILDLIFE P	ROTECTION OF	
				TO RECIPIENTS LOCATED IN		AL HABITANTS	
sub-	-SAHARAN AFRICA	1	2	THE REGION		ON OF VILLAGE	419,135.
-							
-						-	
					Ì		
		1					
							
		į					
3 а	Sub-total	1	2				419,135.
b	Total from continuation						
	sheets to Part I	0	0				0.
С	Totals (add lines 3a						
	and 3b)	1	2				419,135.

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed Part II

Enter total number of reciprent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by 1 the RBS, or for which the grantee or counse has provided a section 500 (c)3 equivalency letter.
r recognized as charities by the foreign country, recognized as tax exempt by
•

26

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Schedule F (Form 990) 2012

AFRICAN PEOPLE & WILDLIFE FUND INC.

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

	•				
(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of cash grant cerpients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2012

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

Schedule F (Form 990) 2012

Yes X No

for Form 5713)

SCHEDULE G (Form 990 or 990-EZ)

Phone solicitations

J In-person solicitations

Department of the Treasury

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.

OMB No 1545-0047

2012

Open To Public Inspection

☐ No

Yes

Name of the organization

African PEOPLE & WILDLIFE FUND INC.

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part.

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations

b Inspection

Inspection

Employer identification number 20 – 31 5 3 8 5 5

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part.

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations

b Inspection

Employer identification number 20 – 31 5 3 8 5 5

Employer identification number 20 – 31 5 3 8 5 5

Employer identification number 20 – 31 5 3 8 5 5

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or

key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Special fundraising events

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid (iii) Did (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration

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

Schedule G (Form 990 or 990-EZ) 2012

20-3153855 Page 2 Schedule G (Form 990 or 990-EZ) 2012 AFRICAN PEOPLE & WILDLIFE FUND INC. Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE SPRING (add col (a) through BENEFIT col (c)) (event type) (total number) (event type) Revenue 40,875 40,875. 1 Gross receipts 2 Less: Contributions 40,875 40,875. 3 Gross income (line 1 minus line 2) Cash prizes 4,165 4,165. Noncash prizes Direct Expenses 5,575 5,575. Rent/facility costs Food and beverages Entertainment 1,661. 1,661 9 Other direct expenses 11,401, 10 Direct expense summary. Add lines 4 through 9 in column (d) 29,474. 11 Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes % Yes % % Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7

2 Enter the state(s) in which the organization operates gaming activities: 2 a Is the organization licensed to operate gaming activities in each of these states? 3 b If "No," explain:	Yes No
Oa Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year b If "Yes," explain:	? Yes No

Schedule G (Form 990 or 990-EZ) 2012

232082 01-07-13

Sch	edule G (Form 990 or 990-EZ) 2012 AFRICAN PEOPLE & WILDLIFE FUND INC. 20-3			Page 3
11	Does the organization operate gaming activities with nonmembers?	Y	es	U No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	\	es	☐ No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		%
	An outside facility	13b		—— <u> </u>
	•	[100]	_	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address		_	 -
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	□ Y	es/	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
c	If "Yes," enter name and address of the third party:			
Ĭ	Too, onto hamb and address of the time party.			
	Name			
	Address			
16	Garning manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	□ Y	es	☐ No
ь	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
-	organization's own exempt activities during the tax year > \$			
Da	rt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)	and (v)	and	Dart III
ra				
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	(See III	Struc	uoris).
				
		<u>.</u>		

SCHEDULE 0

(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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

PEOPLE AND WILDLIFE.

AFRICAN PEOPLE & WILDLIFE FUND INC.

Employer identification number 20-3153855

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THROUGH INNOVATIVE, MULTIDISCIPLINARY STRATEGIES THAT EMPHASIZE

COEXISTENCE WITH THE NATURAL WORLD.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

IMPORTANCE OF PLACE-BASED COMMUNITY-LED INITIATIVES THAT SUPPORT THE

FORM 990, PART VI, SECTION A, LINE 2: LALY LICHTENFELD AND MARK

LICHTENFELD ARE THE DAUGHTER AND SON OF ROSALIE BALLANTINE, RESPECTIVELY.

CHARLES TROUT IS MARRIED TO LALY LICHTENFELD.

FORM 990, PART VI, SECTION B, LINE 11: MEMBERS OF THE ORGANIZATION'S GOVERNING BODY REVIEW THE RETURN BEFORE IT IS FILED.

COLLECTIVE MANAGEMENT OF NATURAL RESOURCES FOR THE MUTUAL BENEFIT OF

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS ARE REMINDED TO

DIVULGE CONFLICT OF INTERESTS FOR NEW EMPLOYEES/BUSINESS

RELATIONSHIPS/PARTNERSHIPS AT BOARD MEETINGS. IF A CONFLICT OF INTEREST

EXISTS FOR AN INDIVIDUAL, THEY ARE EXCLUDED FROM VOTING ON ANY ISSUE

PERTAINING TO THE PARTY FOR WHICH THEY HAVE DISCLOSED SAID CONFLICT OF

INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: INDEPENDENT PERSONS FROM THE

NON-PROFIT WORLD FOCUSING ON WILDLIFE CONSERVATION ARE QUESTIONED REGARDING

SALARY LEVELS WITHIN THEIR ORGANIZATIONS. THIS IS ALSO COMPARED TO

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

232211
01-04-13

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Asset No	Description	Date 1	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
100	BUILDINGS ENVIRONMENTAL CENTER	0.20109SL		39.0017	7	150,000.		in the second se	150,000.	12,980.	1 1 1 2	3,846
17	-	TS6060L0	1	39.001	[7	10,000.	1		10,000.	758.		256
18	LNVIKONMENTAL 18CENTER	123009SL		39.0017	* 1	*16,937.		,	16,937.	1,103.	r	434
24	24SOLAR PROJECT	080510SL	1	39.0017	7	95,500.	1	! 	95,500.	4,592.	1	2,449
25	ENVIRONMENTAL CENTER	042811SL	:	39.0017		48,827.		:	48,827.	1,513.		1,252
7	ENVIRONMENTAL CENTER	1,20	1	39.001	17	45,679.		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	45,679.	634.	,	1,171
			*	· unuan s see		366,943.	,)	0.	366,943.	21,580.	0	9,408
1 2 3 1 3	FURNITURE & FIXTURES	5 5	; ; ;	i series		######################################	of the state of th	a design of the second of the	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2 T	3	;
5	CHAIRS	040106200DB7.0	0 0 DB	0	17	636	25		636.	603.		33
	고	amprop	1	1		636.	-	0	636.	603.	0;	33
-	MACHINERY & EQUIPMENT	:	*	; 1 5	:				,	,		
1	1COMPUTER EQUIPMENT	070405200DB5.0	00DB	0	17	2,360.	***************************************	The state of the s	2,360.	2,360.	1	0
7	2LCD PROJECTOR	120405200DB5.0	00DB	0	1.7	2,000.	And other statements where the first	A bushesis of many security	2,000.	2,000.	L L	0
3	DELL MONITORS	040106200DB5.0	00DB	0	17	1,100.	the same of deads	report emperors of A strong period extensive reason	1,100.	1,100.	an benten geleinberteiten	0
7	4COMPUTER EQUIPMENT	051306200DB5.0	00DB	0	1,7	5,281.	ţ	1	5,281.	5,281.	+	0
9		041307200DB5.0	00DB	0	17	250.			250.	250.		0
7		042607200DB5.0	00DB	ŏ	1.7	3,060.			3,060.	3,060.		0.

228102 05-01-12

(D) - Asset disposed

*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Asset	Description	Date Acquired	Method	Life	S C I	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
			1		\dagger							
8	8HP PRINTER	050107200DB5.	200DB	00	17	128.	3 000	and an engage demonstrating specialists	128.	128.		0
9	PROJECTION SCREEN	070907200DB5	200DB	» 0 0	17	485.	1	:	485.	457.	ı	28.
11	11LAPTOP COMPUTER	102908	08200DB5	00.	1.7	1,495.	,	748.	747.	618.	3	86.
12	12MY BOOK ESSENTIALS	053009200DB5	200DB	00	17_	363.	continue to one there		363.	284.	ı	53.
13	13COMPUTER EQUIPMENT	122809200DB5	200DB	00.	17	888	on (becommon from	444.	444.	316.		51.
14	14TRUCK	031710200DB5.	200DB	00	1.7	20,000.		1 1 2 2 4	20,000.	14,240.	ı	2,304.
15]	5B INOCULARS	051910	51910200DB5.	00	17	396.	3 1	STREET, STREET, STREET, STREET, ST. ST. ST. ST. ST. ST. ST. ST. ST. ST.	396.	282.	and the property of the force	46.
16	16DIGITAL CAMERA	052610	52610200DB5	00.	17.	812.			812.	578.	*	94.
19	19EQUIPMENT	112310200DB5	200DB	00.	17.	375.	whoma e denna	*	375.	206.	7	68.
20	20COMPUTER EQUIPMENT	112910200DB5.	200DB	00	17	1,494.	*	and a common frame and a suppose	1,494.	822.		269.
21	21PROJECTOR	120110	20110200DB5	00.	17	1,025.	ubuddoum a dddo'r u	erich westerdadenserant had vandenden	1,025.	564.	***************************************	184.
22	22GARMIN GPS	041911200DB5.	200DB	0.0	17	939.		the part of company positions of the company of the	939.	404		214.
232	CAMERA TRAPS	042511200DB5.	200DB	0.0	17	1,785.	3 * * * * * * * * * * * * * * * * * * *	s s s s s s s s s s s s s s s s s s s	1,785.	767.	*****	407
27	AS	100111200DB5.00	200DB	1	17.	394.			394.	99.		118.
28	r PRO BR	100111200DB5	200DB	2.00	17	1,850.	; i		1,850.	463.	A PERSONNEL SERVICE SPEED AND SPEED	555.
29	CAMERA TRAPS, SECURITY BOXES	100111	00111200DB5	00.	17.	4,001.	-	:	4,001.	1,000.		1,200.
30	rs AND	102511200DBS	200DB	00.	17	530.	1	acce at a second of an anticonfine and an an analysis of the second of t	530.	133.	and registration of the second	159.
31	BATTERIES AND 31CHARGER	102511200DB5	200DB	00.	17	267.		,	267.	67.		80.
28 102												

228102 05-01-12

(D) - Asset disposed

Asset	Description	Date Acquired	Method	Lrfe	No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
3.2	2CAMERA TRAP CARDS	102811	200DB5	.00	17	287.		3	287.	72.		.86.
33		102811200DB5	200DB	5.00	17	864.	* :		864.	216.	t	259.
34	CAMERA TRAP 4BATTERIES	111011200DB5	ZOODB	00.	17_	575.	an obtained an anna	en en e e e e e e e e e e e e e e e e e	575.	144.	:	172.
35	CAMERA TRAP SBATTERIES	121111200DB5	200DB	00.	17	400.	, i		400.	100.	" "Manage" & the table	120.
36	GACCESSORIES	041812200DB5	200DB	5.00	17	382.			382.	19.	1	145.
37	37TOOLS	041812200DB5.	200DB	00	17	792.	:	:	792.	40.		301.
3.8	38TENTS	042412200DB5.	200DB	00	17	1,018.	, man a contrast and a contrast	The state of the s	1,018.	51.	3 3 3 3 3 3 3 3 3 3	387.
39	39TOYOTA LANDCRUISER	051412200DB5	200DB	00.	1,7	32,750.			32,750.	1,638.	i t	12,445.
40	40FORD TRUCK	081012200DB5	200DB	00	19B	38,318.	1		38,318.	1	a s si i Arssanin	7,664.
41	41CAMERA TRAP	101212200DB5	200DB	5.00	19B	* 660.	<. !		.099	,	1	132.
42	N GPS	101212200DB5	200DB	5.00	19B	235.	***************************************		235.	20.00	1	47.
43	VIDEO FLASH CAMERA	101212200DB5	200DB	00.	19B	4,849.	; 	a decimal of the last name of the	4,849.		,	970.
44	44CAMERA TRAPS	111012200DB5	200DB	00.	19B	3,784.	esertativatereen num anis.	a is characteristic as is characteristic assistance.	3,784.	1	1	757.
4.5	45CAMERA	111012200DB5	ZOODB	00.	19B	. 622.	i.	1	622.		1	124.
46	CAMERA	111012200DB5.	200DB	00	19B	521.	Alberto Samuel Additional		521.	j		104.
47	47CAMERA	111012	11012200DB5	00.	1.9B	171.		!	171.	e c	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	34.
48	48IPAD	042313200DB	200DB	5.00	19B	566.	1	3	566.		PROPERTY OF THE PROPERTY OF TH	113.
49	49GARMIN GPS	101212200DB5	200DB	.00	19B	. 683.			683.			137.

228102 05-01-12

(D) - Asset disposed

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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Asset	Description	Date Acquired	Method	Life	No S	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM * GRAND TOTAL 990 PAGE 10 DEPR		,	, , ,	,	138,755.	,	1,192.	137,563.	37,759.	0 0	29,913.
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228102 05-01-12					'- (Q)	(D) - Asset disposed		* ITC	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction	age, Bonus, Comr	mercial Revital	zation Deduction

38

Department of the Treasury internal Revenue Service (99)
Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Business or activity to which this form relates

990

Attachment Sequence No 179

OMB No 1545-0172

Identifying number

<u>AF</u>	RICAN PEOPLE & WILD						AGE 10			20-3153855
Pa	rt Election To Expense Certain Prope	rty Under Section 1	79 Note: If you	have any lis	ted pro	perty, co	omplete Par	t V bei	fore y	
1	Maximum amount (see instructions)							l	1	500,000.
2	Total cost of section 179 property plac	ed in service (see	instructions)					Γ	2	
3	Threshold cost of section 179 property	before reduction	in limitation					ſ	3	2,000,000.
4	Reduction in limitation Subtract line 3	from line 2. If zero	or less, enter	·0·				ſ	4	
	Dollar limitation for tax year Subtract line 4 from line				instructio	ıns		Ī	5	
6	(a) Description of pro-		Ī	(b) Cost (busin			(c) Elect	ed cost		
	Listed property. Enter the amount from	line 29				7				
	Total elected cost of section 179 prope		s in column (c)	lines 6 and	7				8	
	Tentative deduction Enter the smaller	-	, ii i colai ii i (o),		•			ı	9	
	Carryover of disallowed deduction from		011 Form 456	,				ľ	10	-
	Business income limitation. Enter the s				n) or lin	e 5		- 1	11	
	Section 179 expense deduction Add li		•		•	00		Ì	12	
	Carryover of disallowed deduction to 2	· ·			"Γ	13			<u> </u>	
	e: Do not use Part II or Part III below for									
-	rt II Special Depreciation Allowa				de listed	proper	tv.)			
	Special depreciation allowance for qua									
	the tax year	illica property (oti	ici tilaii lioted	property) pr	2000 111	50, 1,00	aaning		14	
	Property subject to section 168(f)(1) ele	ection						ŀ	15	
	Other depreciation (including ACRS)	ction						ŀ	16	
	ort III MACRS Depreciation (Do no	t include listed no	roperty) (See i	nstructions."					10 1	
	MACIO Deprediation (Do no	t inolade listed pr			/					
			Sec	tion A						
17	MACRS doductions for assets placed i	n service in tay ve		before 2013	<u> </u>			-	17	29.272.
	MACRS deductions for assets placed in		ears beginning	before 2012		ck here	▶ [<u> </u>	17	29,272.
	ff you are electing to group any assets placed in sen	vice during the tax year	ears beginning into one or more ge	before 2012 neral asset acco	ounts, che		▶ [iation		**
	flyou are electing to group any assets placed in sen Section B - Assets	Placed in Service (b) Month and	ears beginning into one or more ge e During 2012 (c) Basis for d	before 2012 eneral asset accorded to the control of	ounts, che Jsing tl	ne Gene	T	Τ	Syste	em
	ff you are electing to group any assets placed in sen	Placed in Service	ears beginning into one or more ge e During 2012	before 2012 meral asset according to the control of	Jsing tl		eral Depred	Τ	Syste	**
18	If you are electing to group any assets placed in sensets Section B - Assets (a) Classification of property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge e During 2012 (c) Basis for d (business/inve	before 2012 meral asset according to the control of	Jsing tl	ne Gene	T	Τ	Syste	em
18 19a	Section B - Assets (a) Classification of property 3-year property	Placed in Servic (b) Month and year placed	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing to Jsing to (d) Re	ne Gene ecovery eriod	T	n (f) Me	Syste	em (g) Depreciation deduction
18 19a b	Section B - Assets (a) Classification of property 3-year property 5-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 meral asset according to the control of	Jsing to Jsing to (d) Re	ne Gene	(e) Conventio	n (f) Me	Syste	em (g) Depreciation deduction
18 19a b c	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing to Jsing to (d) Re	ne Gene ecovery eriod	(e) Conventio	n (f) Me	Syste	em (g) Depreciation deduction
18 19a b c	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing to Jsing to (d) Re	ne Gene ecovery eriod	(e) Conventio	n (f) Me	Syste	em (g) Depreciation deduction
19a b c d e	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing to Jsing to (d) Re	ne Gene ecovery eriod	(e) Conventio	n (f) Me	Syste	em (g) Depreciation deduction
19a b c d e	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing tl (d) Repe	ne Gene ecovery griod	(e) Conventio	n (f) Me	Systemethod DDB	em (g) Depreciation deduction
19a b c d e	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing tl (d) Repe	RS.	(e) Convention	200	Systemethod DDB	em (g) Depreciation deduction
19a b c d e	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Jsing tl (d) Repe	RS.	(e) Convention HY	200 S	Systemethod ODB /L /L	em (g) Depreciation deduction
19a b c d e f	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Sunts, che Jsing the distribution of the sunt of the s	re General Second Property Pro	HY MM MM	200 S S	Systemethod DB /L /L /L	em (g) Depreciation deduction
19a b c d e f	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property	Placed in Servic (b) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in	before 2012 peral asset acce 2 Tax Year to epreciation estment use structions)	Sunts, che Jsing the distribution of the sunt of the s	RS.	HY MM MM MM	200 S S S	Syste ODB /L /L /L	em (g) Depreciation deduction
19a b c d e f g h	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property Residential rental property Nonresidential real property	Placed in Servic (b) Month and year placed in service (c) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/index only - see in	before 2012 meral asset acce 2 Tax Year to epreciation styment use structions) 0 , 409 .	25 27 5 27 5 39	yrs. 5 yrs. yrs.	HY MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Syste othod ODB /L /L /L /L /L /L /L	em (g) Depreciation deduction 10,082.
19a b c d e f g h	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F	Placed in Servic (b) Month and year placed in service (c) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/index only - see in	before 2012 meral asset acce 2 Tax Year to epreciation styment use structions) 0 , 409 .	25 27 5 27 5 39	yrs. 5 yrs. yrs.	HY MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Systematic Systematic	em (g) Depreciation deduction 10,082.
19a b c d e f g h i 20a	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F	Placed in Servic (b) Month and year placed in service (c) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/index only - see in	before 2012 meral asset acce 2 Tax Year to epreciation styment use structions) 0 , 409 .	5 Y 25 27 5 39 sing the	yrs. 5 yrs. yrs. c Alterna	HY MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Systemethod DDB //L //L //L //L n Sys	em (g) Depreciation deduction 10,082.
19a b c d e f g h i 20a b	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year	Placed in Servic (b) Month and year placed in service (c) Month and year placed in service	ears beginning into one or more ge te During 2012 (c) Basis for d (business/index only - see in	before 2012 meral asset acce 2 Tax Year to epreciation styment use structions) 0 , 409 .	25 27 5 39 sing the	yrs. 5 yrs. yrs. yrs. yrs. yrs.	HY MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Systematic Systematic	em (g) Depreciation deduction 10,082.
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19a b c d e f g h i 20a b c Pa 21	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year Summary (See instructions) Listed property Enter amount from line	Placed in Service (b) Month and year placed in service (c) Month and year placed in service / / / / / / / / 228	ears beginning into one or more ge to During 2012 (c) Basis for d (b) Usiness/inve only - see in	before 2012 Ineral asset acce 2 Tax Year I epreciation structions) 0 , 409 . Tax Year Use	25 27 5 27 5 39 sing the	yrs. 5 yrs. yrs. yrs. yrs. yrs. yrs. yrs.	MM MM MM MM ative Depre	S S S S S S S S S S S S S S S S S S S	Systemathod //L //L //L //L //L //L //L //L //L /	em (g) Depreciation deduction 10,082.
19a b c d e f g h i 20a b c P 21 22	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year IT IV Summary (See instructions) Listed property Enter amount from line Total. Add amounts from line 12, lines	Placed in Service (b) Month and year placed in service (c) Month and year placed in service / / / / / Placed in Service	ears beginning into one or more ge the During 2012 (c) Basis for d (business/inve only - see in During 2012	before 2012 Ineral asset according to the perceivation of the perc	25 27 5 27 5 39 sing the	yrs. 5 yrs. yrs. yrs. yrs. yrs. yrs.	MM MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Systemethod DDB //L //L //L //L //L //L //L //L //L /	(g) Depreciation deduction 10,082.
19a b c d e f g h i 20a b c P 21 22	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year 11- Summary (See instructions) Listed property Enter amount from line Total. Add amounts from line 12, lines Enter here and on the appropriate lines	Placed in Service (b) Month and year placed in service (c) Month and year placed in service / / / / / / / / / 28 14 through 17, line of your return Page 19 19 19 19 19 19 19 19 19 19 19 19 19	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in During 2012	before 2012 Ineral asset according to the preciation of the precia	25 27 5 27 5 39 sing the	yrs. 5 yrs. yrs. yrs. yrs. yrs. yrs.	MM MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Systemathod //L //L //L //L //L //L //L //L //L /	em (g) Depreciation deduction 10,082.
18	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year IT IV Summary (See instructions) Listed property Enter amount from line Total. Add amounts from line 12, lines	Placed in Service (b) Month and year placed in service (c) Month and year placed in service // // // // // // // // // // 288 14 through 17, line of your return Paservice during the	ears beginning into one or more ge te During 2012 (c) Basis for d (business/inve only - see in During 2012	before 2012 Ineral asset according to the preciation of the precia	25 27 5 27 5 39 sing the	yrs. 5 yrs. yrs. yrs. yrs. yrs. yrs.	MM MM MM MM MM	S S S S S S S S S S S S S S S S S S S	Systemethod DDB //L //L //L //L //L //L //L //L //L /	(g) Depreciation deduction 10,082.

Part VI Amortization

(a)
Description of costs

(b)
Description of costs

(c)
Amortizable amount
Amortization
begins

(d)
Code Amortization
penod or percentage
Amortization
for this year

42 Amortization of costs that begins during your 2012 tax year

43 Amortization of costs that began before your 2012 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

45 Amortization of costs that began before your 2012 tax year

46 Total. Add amounts in column (f). See the instructions for where to report

Form 4562 (2012)