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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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
4800 WEST GATES PASS ROAD

City or town, state or country, and ZIP + 4
TUCSON, AZ 85745

D Employer identification number
86-0292099

E Telephone number
(520) 620-1220

G Gross receipts $ 10,107,250

F Name and address of principal officer
ROBERT BENSON
4800 WEST GATES PASS ROAD
TUCSON, AZ 85745

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶ 4325

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website: ▶** WWW SAFARICLUBFOUNDATION ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1972

M State of legal domicile NV

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SCI FOUNDATION FUNDS AND DIRECTS WILDLIFE PROGRAMS DEDICATED TO WILDLIFE CONSERVATION AND OUTDOOR SCI FOUNDATION FUNDS AND DIRECTS WILDLIFE PROGRAMS DEDICATED TO WILDLIFE CONSERVATION AND OUTDOOR EDUCATION

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	48
6	Total number of volunteers (estimate if necessary)	6	100
7a	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	-50

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	5,015,326	5,477,699
	9	Program service revenue (Part VIII, line 2g)	952,340	918,554
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	161,884	409,308
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-425,500	675,236
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,704,050	7,480,797
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	584,993	759,540
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,889,066	1,723,218
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶264,792		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,647,264	2,667,334
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	5,121,323	5,150,092
	19	Revenue less expenses Subtract line 18 from line 12	582,727	2,330,705
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	16,732,748	19,625,532
	21	Total liabilities (Part X, line 26)	475,837	680,910
	22	Net assets or fund balances Subtract line 21 from line 20	16,256,911	18,944,622

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** | 2014-05-15
Signature of officer | Date

NATHAN BOLT DIRECTOR OF FINANCE
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
AMY A O'LOUGHLIN				P00869687
Firm's name ▶ CBIZ MHM LLC			Firm's EIN ▶ 34-1884125	
Firm's address ▶ 3101 N CENTRAL AVE STE 300 PHOENIX, AZ 85012			Phone no (602) 264-6835	

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III 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

SCI FOUNDATION FUNDS AND DIRECTS WILDLIFE PROGRAMS DEDICATED TO WILDLIFE CONSERVATION AND OUTDOOR EDUCATION SEE SCHEDULE O FOR CONTINUATION

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☑ Yes ☐ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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 $ 1,137,678 including grants of $ 194,824) (Revenue $ 403,571)

EDUCATION PROJECTS NUMEROUS PROJECTS CONDUCTED TO EDUCATE HUNTERSAND NON-HUNTERS ABOUT THE ENVIRONMENT, ECOSYSTEMS, OUTDOOR LIVINGSKILLS AND THE CRITICAL ROLE THE HUNTING SPORTSMAN PLAYS INSCIENTIFIC WILDLIFE MANAGEMENT AND ITS PRODUCTIVE IMPACT ONWILDLIFE POPULATIONS AMERICAN WILDERNESS LEADERSHIP SCHOOL FACILITIES AND PROGRAMS FOR CONSERVATION AND ENVIRONMENTALEDUCATION PROGRAMS

4b (Code) (Expenses $ 829,556 including grants of $) (Revenue $ 285,442)

INTERNATIONAL WILDLIFE MUSEUM CONSTRUCTED TO PRESERVE AND DISPLAYTHE PHYSICAL HISTORY OF WILDLIFE OF THE WORLD AND TO EDUCATE THEPUBLIC ON SCIENTIFIC CONSERVATION AND BIODIVERSITY ISSUES WHICHIMPACT CURRENT AND FUTURE WILDLIFE POPULATIONS APPROXIMATELY53,440 VISITORS

4c (Code) (Expenses $ 1,740,567 including grants of $ 466,140) (Revenue $ 228,353)

WILDLIFE CONSERVATION PROGRAM PROJECTS CONDUCTED WORLDWIDE TO ESTABLISH AND SUPPORT SCIENTIFIC AND BIOLOGICAL STUDIES OF WILDLIFE POPULATIONS IN ORDER TO ASSURE THE LONG-TERM SUSTAINABILITY OF THESE POPULATIONS PROJECTS INCLUDE WILDLIFE POPULATION SURVEYS, COLLARING AND MONITORING, DNA ANALYSES, DISEASE TESTING AND DEVELOPMENT OF SCIENTIFIC PUBLICATIONS, FIELD MANUALS, REPORTS, ETC GRANTS TOTALING $466,140 WERE MADE TO OTHER EXEMPT ENTITIES TO FURTHER THESE CONSERVATION EFFORTS

(Code) (Expenses $ 210,922 including grants of $ 98,576) (Revenue $ 107,498)

HUMANITARIAN SERVICES PROGRAM CONDUCT NUMEROUS HUMANITARIAN RELIEF AND ENRICHMENT PROJECTS SUCH AS "SPORTSMEN AGAINST HUNGER" SERVING MILLIONS OF MEALS THROUGH FOOD BANKS AND HOMELESS SHELTERS, "SENSORY SAFARI" ENABLING VISUALLY IMPAIRED CHILDREN AND ADULTS TO SEE WILDLIFE THROUGH THEIR SENSE OF TOUCH, "SAFARI CARE" PROVIDING FREE SUPPLIES AND CLOTHING TO IMPOVERISHED COMMUNITIES WORLDWIDE, AND FULFILLING LIFELONG HUNTING WISHES THROUGH THE "DISABLED HUNTER" PROGRAM HUMANITARIAN SERVICES PROGRAM

4d Other program services (Describe in Schedule O)

(Expenses $ 210,922 including grants of $ 98,576) (Revenue $ 107,498)

4e **Total program service expenses ▶** 3,918,723

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 I*	6	Yes	
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*	8	Yes	
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		No
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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	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		No
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		No
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	Yes	
e	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	
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	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		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		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		No
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	Yes	
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		

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	Yes	
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	Yes	
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	Yes	
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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	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? *If "Yes," complete Schedule L, Part IV*	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? *If "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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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*	35b		No
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	Yes	
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? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	28			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	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	2a	48			
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	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶SF 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
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		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		No
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		No
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **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 . . . ☑

Section 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	15		
	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 . . .	1b	15		
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	Yes	
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		No
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		8b	Yes	
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

Section 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		No
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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	12c	Yes	
13	Did the organization have a written whistleblower policy? . . .	13	Yes	
14	Did the organization have a written document retention and destruction policy? . . .	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official . . .	15a	Yes	
b	Other officers or key employees of the organization . . .	15b	Yes	
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . .	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶AZ

18 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)

19 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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶NATHAN BOLT 4800 WEST GATES PASS ROAD TUCSON, AZ (520) 620-1220

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, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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 and related organizations
(1) JOSEPH H HOSMER PRESIDENT	20 00	X		X				0	0	0
(2) ROMAN A DEVILLE VICE PRESIDENT	20 00	X		X				0	0	0
(3) J ALAIN SMITH CORPORATE SECRETARY	20 00	X		X				0	0	0
(4) WARREN ALAN SACKMAN CORPORATE TREASURER	20 00	X		X				0	0	0
(5) DENNIS ANDERSON DIRECTOR	20 00	X						0	0	0
(6) PAUL D BABAZ DIRECTOR	10 00	X						0	0	0
(7) RALPH S CUNNINGHAM DIRECTOR	20 00	X						0	0	0
(8) W LAIRD HAMBERLIN DIRECTOR	10 00	X						0	0	0
(9) LARRY HIGGINS DIRECTOR	10 00	X						0	0	0
(10) CRAIG L KAUFFMAN DIRECTOR	10 00	X						0	0	0
(11) RICARDO LONGORIA DIRECTOR	20 00	X						0	0	0
(12) BROOK F MINX DIRECTOR	20 00	X						0	0	0
(13) MERLE A SHEPARD DIRECTOR	20 00	X						0	0	0
(14) RICHARD WOODRUFF DIRECTOR	20 00	X						0	0	0
(15) EDWARD D YATES DIRECTOR	20 00	X						0	0	0
(16) ROBERT K BENSON EXECUTIVE DIRECTOR	40 00			X				35,285	0	3,288
(17) DONALD MILLS CHIEF FINANCIAL OFFICER	10 00 30 00			X				0	150,734	19,717

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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 and related organizations
(18) WILLIAM MORITZ EXECUTIVE DIRECTOR	20 00 20 00			X				0	80,624	4,108
(19) KEVIN SCOTT CHIEF OPERATING OFFICER	20 00 20 00			X				0	27,647	1,698
(20) MELISSA SIMPSON DIRECTOR OF CONSERVATION	20 00 20 00					X		0	170,901	9,678
(21) SUSAN HANKNER DIRECTOR OF EDU & HUMANITARIAN SVCS	40 00					X		107,193	0	8,133

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	142,478	429,906	46,622

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶1

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

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 ▶0

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . 1a					
	b	Membership dues 1b	29,563				
	c	Fundraising events 1c					
	d	Related organizations . . . 1d	3,068,483				
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	2,379,653				
	g	Noncash contributions included in lines 1a-1f $	1,821,878				
	h	**Total.** Add lines 1a-1f . . . . ▶		5,477,699			
Program Service Revenue			Business Code				
	2a	CONVENTION	900099	561,740	561,740		
	b	TUITION & ADMISSIONS	611600	356,814	356,814		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		918,554			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		272,600			272,600
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents	505,058 /				
	b	Less rental expenses	0 /				
	c	Rental income or (loss)	505,058 /				
	d	Net rental income or (loss) . . . . ▶		505,058			505,058
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	2,684,486 /				
	b	Less cost or other basis and sales expenses	2,546,502 / 1,276				
	c	Gain or (loss)	137,984 / -1,276				
	d	Net gain or (loss) . . . . ▶		136,708			136,708
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . . a	39,643				
	b	Less direct expenses . . . b	0				
	c	Net income or (loss) from gaming activities . . . ▶		39,643			39,643
	10a	Gross sales of inventory, less returns and allowances . a	184,985				
	b	Less cost of goods sold . . b	78,675				
	c	Net income or (loss) from sales of inventory . . ▶		106,310	106,310		
		Miscellaneous Revenue	Business Code				
	11a	OTHER INCOME	900099	24,225			24,225
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶		24,225			
	12	**Total revenue.** See Instructions . . . . . ▶		7,480,797	1,024,864	0	978,234

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response to any question in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 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	682,390	682,390		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	21,000	21,000		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	56,150	56,150		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	347,039	178,309	164,742	3,988
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	1,100,754	907,788	144,102	48,864
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,420	11,146	4,565	709
9 Other employee benefits	173,507	91,812	76,479	5,216
10 Payroll taxes	85,498	67,411	14,836	3,251
11 Fees for services (non-employees)				
a Management	77,947		77,947	
b Legal	178,237	64,686	107,271	6,280
c Accounting	39,403	1,050	38,353	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	46,611	503	660	45,448
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	124,731	114,588		10,143
12 Advertising and promotion	210,953	198,240	1,130	11,583
13 Office expenses	287,766	186,978	85,789	14,999
14 Information technology	32,476	1,062	31,254	160
15 Royalties . .				
16 Occupancy	183,410	177,733	5,677	
17 Travel	252,681	176,893	69,341	6,447
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	50,357	18,407	30,928	1,022
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	367,969	287,521	79,780	668
23 Insurance	70,597	67,241	3,356	
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)				
a PROGRAMS & PROJECTS	516,083	459,521	9,734	46,828
b MAINTENANCE & SECURITY	121,626	116,931	4,695	
c PRINTING	60,937	19,791	7,705	33,441
d POSTAGE & FREIGHT	45,550	11,572	8,233	25,745
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	5,150,092	3,918,723	966,577	264,792
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)				

Part 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
Assets	1	Cash—non-interest-bearing	731,656	1	2,175,602
	2	Savings and temporary cash investments	290,097	2	311,455
	3	Pledges and grants receivable, net	676,383	3	717,257
	4	Accounts receivable, net	151,018	4	535,321
	5	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 employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	39,996	8	63,736
	9	Prepaid expenses and deferred charges	37,006	9	76,130
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 11,909,224			
	b	Less accumulated depreciation — 10b: 7,934,485	4,119,862	10c	3,974,739
	11	Investments—publicly traded securities	9,331,056	11	10,412,428
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,355,674	15	1,358,864
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	16,732,748	16	19,625,532
Liabilities	17	Accounts payable and accrued expenses	357,361	17	601,706
	18	Grants payable		18	
	19	Deferred revenue	118,476	19	79,204
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	475,837	26	680,910
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	5,960,645	27	6,921,648
	28	Temporarily restricted net assets	712,267	28	1,765,507
	29	Permanently restricted net assets	9,583,999	29	10,257,467
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	16,256,911	33	18,944,622
	34	Total liabilities and net assets/fund balances	16,732,748	34	19,625,532

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,480,797
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,150,092
3	Revenue less expenses Subtract line 2 from line 1	3	2,330,705
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,256,911
5	Net unrealized gains (losses) on investments	5	487,006
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	-130,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	18,944,622

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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 reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	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 Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990EZ)

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

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ____________

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document?		**(v)** Did you notify the organization in col **(i)** of your support?		**(vi)** Is the organization in col **(i)** organized in the U S ?		**(vii)** Amount of monetary support
			Yes	**No**	**Yes**	**No**	**Yes**	**No**	
Total									

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.)

Section A. Public Support

Calendar 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 ")						
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						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (see instructions) | 12 |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

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.)

Section A. Public Support

Calendar 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")	5,416,823	3,601,615	4,786,537	5,013,870	5,477,699	24,296,544
2 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	1,064,354	949,455	1,170,535	1,565,854	1,648,240	6,398,438
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	6,481,177	4,551,070	5,957,072	6,579,724	7,125,939	30,694,982
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	4,477,588	2,989,985	3,671,771	3,722,220	3,152,283	18,013,847
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						0
c Add lines 7a and 7b	4,477,588	2,989,985	3,671,771	3,722,220	3,152,283	18,013,847
8 **Public support** (Subtract line 7c from line 6)						12,681,135

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	6,481,177	4,551,070	5,957,072	6,579,724	7,125,939	30,694,982
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	284,415	160,864	262,326	297,239	272,600	1,277,444
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	284,415	160,864	262,326	297,239	272,600	1,277,444
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)	66,802	98,983	27,348	47,274	24,225	264,632
13 **Total support.** (Add lines 9, 10c, 11, and 12)	6,832,394	4,810,917	6,246,746	6,924,237	7,422,764	32,237,058

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	39 340 %
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	38 270 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	3 960 %
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	4 050 %

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—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 ▶☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 12, EXPLANATION OF OTHER INCOME OTHER INCOME - 2008 AMOUNT $ 66,802 2009 AMOUNT $ 98,983 2010 AMOUNT $ 27,348 2011 AMOUNT $ 47,274 2012 AMOUNT $ 24,225

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
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate contributions to (during year)	100,000	
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	100,000	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☑ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $ 1,302,802

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $ 47,310

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☑ Public exhibition
b ☐ Scholarly research
c ☑ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☑ **No**

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c Beginning balance	**1c**	
d Additions during the year	**1d**	
e Distributions during the year	**1e**	
f Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	**(b)** Prior year	**(c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a Beginning of year balance	9,403,497	9,176,651	7,581,846	6,086,812	6,076,137
b Contributions	651,860	515,290	755,313	620,154	12,500
c Net investment earnings, gains, and losses	885,504	-52,366	958,905	940,283	33,947
d Grants or scholarships	590,664	196,000			
e Other expenditures for facilities and programs			100,177	26,336	
f Administrative expenses	45,361	40,078	19,236	39,067	35,772
g End of year balance	10,304,836	9,403,497	9,176,651	7,581,846	6,086,812

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 0 %

b Permanent endowment ▶ 92 580 %

c Temporarily restricted endowment ▶ 7 420 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	**No**
(i) unrelated organizations	**3a(i)**		No
(ii) related organizations	**3a(ii)**		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land		309,962		309,962
b Buildings		9,618,030	6,249,903	3,368,127
c Leasehold improvements				
d Equipment		1,743,000	1,672,953	70,047
e Other	47,310	190,922	11,629	226,603
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				3,974,739

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CSV OF OFF LIFE INSURANCE	56,062
(2) EXHIBITS	1,302,802
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	1,358,864

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
See Additional Data Table	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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 ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	8,046,478
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	487,006		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	78,675		
e	Add lines **2a** through **2d**			2e	565,681
3	Subtract line **2e** from line **1**			3	7,480,797
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	7,480,797

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	5,358,767
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	208,675		
e	Add lines **2a** through **2d**			2e	208,675
3	Subtract line **2e** from line **1**			3	5,150,092
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	5,150,092

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE INTERNATIONAL WILDLIFE MUSEUM IS DEDICATED TO INCREASING KNOWLEDGE AND APPRECIATION FOR WILDLIFE AND THE ROLE THAT HUNTING PLAYS IN CONSERVATION
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE EARNINGS OF THE ENDOWMENT FUNDS ARE TO BE USED FOR THE MISSION PROGRAMS SUCH AS WILDLIFE CONSERVATION, EDUCATION PROGRAMS, AND SCHOLARSHIPS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	SCIF IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE "CODE") ACCORDINGLY, NO PROVISION FOR FEDERAL OR STATE INCOME TAXES HAS BEEN REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS SCI EVALUATES ITS UNCERTAIN TAX POSITIONS, IF ANY, ON A CONTINUAL BASIS THROUGH REVIEW OF ITS POLICIES AND PROCEDURES, REVIEW OF ITS REGULAR TAX FILINGS, AND DISCUSSIONS WITH OUTSIDE EXPERTS AS OF JUNE 30, 2013 AND 2012, MANAGEMENT DOES NOT BELIEVE ANY UNCERTAIN TAX POSITIONS EXIST
PART XI, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 78,675
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 78,675 LOSS ON UNCOLLECTIBLE RECEIVABLE 130,000

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **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 the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	SUB-SAHARAN AFRICA - ANGOLA,	1	2	PROGRAM SERVICES	CONSERVATION	77,235
3a	Sub-total	1	2			77,235
b	Total from continuation sheets to Part I	0	0			0
c	**Totals** (add lines 3a and 3b)	1	2			77,235

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA - ANGOLA,	PROGRAM SUPPORT	32,400	WIRE			
		NORTH AMERICA - CANADA AND MEXICO, BUT NOT	YOUTH OUTDOOR CAMP PROGRAM	6,750	WIRE			
		NORTH AMERICA - CANADA AND MEXICO, BUT	PROGRAM SUPPORT	7,000	CHECK			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ► 2

3 Enter total number of other organizations or entities . . . . ► 1

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.

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

Part IV Foreign Forms

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

Part V **Supplemental Information**

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

Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 SAFARI CLUB INTERNATIONAL FOUNDATION REQUESTS PROGRESS REPORTS AND FINAL REPORTS AS WELL AS PICTURES, VIDEOS AND AN ARTICLE DETAILING THE COMPLETED PROJECT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493135036444

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

- a ☐ Mail solicitations
- b ☐ Internet and email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

2a 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? ☐ Yes ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Total . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II **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 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				( )
	11 Net income summary Combine line 3, column (d), and line 10 ▶				

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue			39,643	39,643
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ______ ☐ No	☐ Yes ______ ☐ No	☐ Yes ______ ☑ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				39,643

9 Enter the state(s) in which the organization operates gaming activities AZ

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☑ No

b If "No," explain

THE ORGANIZATION IS EXEMPT FROM LICENSING IN ARIZONA (ARS 13-3302)

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☑ No

b If "Yes," explain

Does the organization operate gaming activities with nonmembers? . . . . ☑ Yes ☐ No

12 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? . . . . ☐ Yes ☑ No

13 Indicate the percentage of gaming activity operated in

a	The organization's facility	**13a**	100 000 %
b	An outside facility	**13b**	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ DON MILLS

Address ▶ 4800 W GATES PASS ROAD
TUCSON, AZ 85745

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ Yes ☑ 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

Name ▶

Address ▶

16 Gaming manager information

Name ▶ DON MILLS

Gaming manager compensation ▶ $ 150,734

Description of services provided ▶ RESPONSIBLE FOR ORGANIZING THE RAFFLE AND DISTRIBUTING PRIZES

☑ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . ☐ Yes ☑ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I General Information on Grants and Assistance

1 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 the grants or assistance? ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 21

3 Enter total number of other organizations listed in the line 1 table ▶ 5

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) UNIVERSITY SCHOLARSHIPS	15	21,000			

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 SAFARI CLUB INTERNATIONAL FOUNDATION GIVES SEVERAL TYPES OF GRANTS (A) GRANTS MADE IN RESPONSE TO GENERAL GRANT REQUEST - THE ORGANIZATION REQUESTS PROGRESS REPORTS AND FINAL REPORTS AS WELL AS PICTURES, VIDEOS AND AN ARTICLE DETAILING THE COMPLETED PROJECT FOLLOW-UP IS DONE THROUGH THE SPAN OF THE PROJECT (B) SCHOLARSHIPS - THE ORGANIZATION MAKES THESE DONATIONS DIRECTLY TO THE COLLEGE OR UNIVERSITY FOR THE BENEFIT OF STUDENTS WHO ARE STUDYING IN FIELDS RELATED TO THE MISSION OF SAFARI CLUB INTERNATIONAL FOUNDATION, SUCH AS WILDLIFE CONSERVATION, IF THE STUDENT DROPS OUT, THE UNIVERSITY RETURNS THE FUNDS TO SAFARI CLUB INTERNATIONAL FOUNDATION (C) SPECIFIC PROJECT OR EVENT GRANTS - THE ORGANIZATION SOMETIMES MAKES GRANTS TO WELL-KNOWN CHARITABLE EVENTS AND THEN OFTEN ATTENDS THE EVENTS (D) CHAPTER MATCHING GRANTS - THESE GRANTS THAT SAFARI CLUB INTERNATIONAL FOUNDATION MAKES TO SAFARI CLUB INTERNATIONAL CHAPTERS TO MATCH DONATIONS MADE BY THE CHAPTERS FOR VARIOUS MISSION RELATED PROJECTS SAFARI CLUB INTERNATIONAL FOUNDATION DOES NOT MAKE THE GRANT UNTIL DOCUMENTATION IS OBTAINED THAT THE CHAPTER DONATED THEIR PORTION OF THE GRANT THE CHAPTER SENDS IN END-OF-THE-YEAR REPORTS AND PICTURES TO DOCUMENT PROGRESS ON THE PROJECT

Additional Data Return to Form

Software ID:
Software Version:
EIN: 86-0292099
Name: SAFARI CLUB INTERNATIONAL FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ACOMA GAME & FISHPO BOX 310 PUEBLO OF ACOMA,NM 87034	85-0448136	GOVERNMENT	16,200				PROGRAM SUPPORT
ALASKA DEPT OF FISH & GAMEPO BOX 115525 JUNEAU,AK 99811	92-6001185	GOVERNMENT	18,060				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AUGUST L HORMAY WILDLANDS INSTITUTE INCPO BOX 4712 BUTTE,MT 597024712	76-0828315	501(C)(3)	15,000				MONGOLIAN SHEEP POPULATION SURVEYS
BORDERLANDS RESEARCH INSTITUTE FOR NATURAL RESOURCE MANAGEMNT EAST HIGHWAY 90 ALPINE,TX 79832	74-6000027	501(C)(3)	39,000				BIG HORN SHEEP & TEXAS MULE DEER STUDIES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CALIFORNIA DEPT OF FISH & GAME1740 N MARKET BLVD SACRAMENTO,CA 95834	94-1697567	GOVERNMENT	45,000				PROGRAM SUPPORT
CHIREDZI RIVER CONSERVANCY7675 HERNDON AVE CLOVIS,CA 95619	26-4034862	501(C)(3)	10,000				BLACK RHINO PROTECTION IN ZIMBABWE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COMBAT MARINE OUTDOORS6610 MALIBU DR HOUSTON,TX 770924010	27-1469261	501(C)(3)	35,000				PROGRAM SUPPORT
SGT DANIEL D GURR FOUNDATION1827 N 1500 E VERNAL,UT 84078	45-5002853	501(C)(3)	15,000				ACTION TRACK CHAIRS FOR WOUNDED SOLDIERS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NORTHEAST INDIANA CHAPTER - SCI9009 COLDWATER RD FT WAYNE,IN 46825	26-4532730	501(C)(4)	7,000				PROGRAM SUPPORT
MICHIGAN INVOLVEMENT COMMITTEE2852 COLONIAL WAY BLOOMFIELD HILLS,MI 48304	36-4526107	501(C)(3)	12,000				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CENTRAL MINNESOTA CHAPTER - SCI3595 21ST AVE S SAINT CLOUD,MN 56301	38-3864201	501(C)(4)	6,000				PROGRAM SUPPORT
GATEWAY AREA CHAPTER - SCI4816 BANKFIELD CT SAINT LOUIS,MO 63128	35-2229486	501(C)(4)	7,000				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MONTANA FISH WILDLIFE AND PARKS FOUNDATION 1420 EAST 6TH AVE HELENA,MT 59620	81-0528922	501(C)(3)	50,000				ELK PREDATOR PREY PROJECT
NASP FOUNDATIONW4285 LAKE DRIVE WALDO,WI 53093	20-1112663	501(C)(3)	30,140				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL 4-H SHOOTING SPORTS FOUNDATION 20915 604TH STREET DODGE CENTER, MN 55927	36-2862206	501(C)(3)	10,000				PROGRAM SUPPORT
NAVAJO NATION DEPT OF FISH & WILDLIFEPO BOX 1480 WINDOW ROCK, AZ 86515	86-0092335	GOVERNMENT	35,100				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NORTHERN NEVADA CHAPTER - SCI4790 CAUGHLIN PKWY PMB 227 RENO,NV 89519	36-4553550	501(C)(3)	8,000				PROGRAM SUPPORT
KENTUCKIANA CHAPTER - SCI1019 SKYWAY VIEW DRIVE NEW ALBANY,IN 47150	35-1923044	501(C)(4)	6,400				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PRIMERO CONSERVATION PO BOX 16106 PORTAL,AZ 85632	27-4344761	501(C)(3)	10,000				PECCARY TRANSLOCATION PROJECT
SALVATION ARMY2445 PRIOR AVE ROSEVILLE,MN 55113	41-0698597	501(C)(3)	10,790				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NEW MEXICO STATE UNIVERSITYGERALD THOMAS HALL RM 238 LAS CRUCES, NM 88003	85-6000401	501(C)(3)	120,000				TAJIKISTAN SHEEP PROJECT
TENNESSEE VALLEY CHAPTER - SCI14801 MAY ROAD SALE CREEK, TN 37373	58-2551014	501(C)(4)	8,000				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNITY COLLEGE90 QUAKER HILL ROAD UNITY,ME 04988	01-0275130	501(C)(3)	15,697				ENDOWMENT SCHOLARSHIP
WHITE MOUNTAIN APACHE TRIBEPO BOX 220 WHITERIVER,AZ 85941	86-0092030	GOVERNMENT	24,500				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BADGERLAND CHAPTER - SCI1321 ARMAGH LN SUN PRAIRIE,WI 53590	39-1920142	501(C)(3)	8,000				PROGRAM SUPPORT
WYOMING GAME & FISH DEPT5400 BISHOP BLVD CHEYENNE,WY 82006	83-0208667	GOVERNMENT	14,400				PROGRAM SUPPORT

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)DONALD MILLS CHIEF FINANCIAL OFFICER	(i)	0	0	0	0	0	0	0
	(ii)	135,734	15,000	0	5,938	13,779	170,451	0
(2)MELISSA SIMPSON DIRECTOR OF CONSERVATION	(i)	0	0	0	0	0	0	0
	(ii)	159,381	11,520	0	1,561	8,117	180,579	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II
Also complete this part for any additional information

Identifier	Return Reference	Explanation
	PART I, LINE 4A	SEVERANCE PAYMENTS KEVIN SCOTT $3,173
	PART I, LINE 7	THESE BONUS PAYMENTS WERE MADE BASED ON MEETING ORGANIZATIONAL GOALS AND ARE AT THE DISCRETION OF THE BOARD OF DIRECTORS

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part 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 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 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				
8 Intellectual property . . .				
9 Securities—Publicly traded .				
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . . .				
15 Real estate—Residential .				
16 Real estate—Commercial . .				
17 Real estate—Other . . .				
18 Collectibles				
19 Food inventory . . .				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens . .				
24 Archeological artifacts . . .				
25 Other ▶ (PAYROLL/ADMIN)	X		1,821,878	COST
26 Other ▶(________)				
27 Other ▶(________)				
28 Other ▶ (________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 | 0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II **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

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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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Identifier	Return Reference	Explanation
MISSION STATMENT CONTINUATION	FORM 990, PART III, LINE 1	IN FULFILLING ITS MISSION AND VISION SCI FOUNDATION WILL OPERATE WITH THE FOLLOWING PURPOSES AND OBJECTIVES A) WILDLIFE CONSERVATION TO CONDUCT AND SUPPORT SCIENTIFIC AND TECHNICAL STUDIES IN THE FIELD OF WILDLIFE CONSERVATION, TO ASSIST IN DESIGN AND DEVELOPMENT OF SCIENTIFICALLY SOUND WILDLIFE PROGRAMS FOR THE MANAGEMENT OF WILDLIFE AND HUNTING, AND TO DEMONSTRATE THE CONSTRUCTIVE ROLE THAT HUNTING AND HUNTERS PLAY IN THE CONSERVATION OF WILDLIFE B) CONSERVATION EDUCATION TO CARRY OUT AND SUPPORT EDUCATION PROGRAMS ON WILDLIFE CONSERVATION, ECOLOGY AND NATURAL RESOURCE MANAGEMENT THAT INCLUDE A DEMONSTRATION OF THE CONSTRUCTIVE ROLE THAT HUNTING AND HUNTERS PLAY IN THE NATURAL RESOURCE CONSERVATION AND LAND MANAGEMENT C) HUMANITARIAN SERVICES TO DESIGN, CARRY OUT AND SUPPORT PROGRAMS TO ASSIST THE DISABLED IN ENJOYING SPORT HUNTING AND TO UTILIZE THE RESOURCES OF THE HUNTING COMMUNITY AND THE VARIOUS ASPECTS OF HUNTING TO AID THOSE LESS FORTUNATE BY PROVIDING HUMANITARIAN SERVICES D) PROVIDE CHARITABLE DONATIONS TO PROVIDE CHARITABLE DONATIONS TO OTHER ORGANIZATIONS OR TO INDIVIDUALS PURSUING THE SAME OR SIMILAR GOALS AS THOSE OF THE SAFARI CLUB INTERNATIONAL FOUNDATION

Identifier	Return Reference	Explanation
NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	DURING THE FISCAL YEAR ENDING JUNE 30, 2013, THE SAFARI CLUB INTERNATIONAL FOUNDATION STARTED THE FIGHTING FOR LIONS CAMPAIGN UNDER THE CONSERVATION PROGRAM THE CAMPAIGN IS FOCUSED ON THREE APPROACHES TO CONSERVE LIONS ACROSS THE ENTIRE AFRICAN CONTINENT 1) OUTREACH AND EDUCATION, 2)POPULATION RESEARCH WHERE NEEDED, AND 3) CONSERVATION, WHICH INCLUDES HUMAN-WILDLIFE CONFLICT AND ANTI-POACHING OUTREACH AND EDUCATION SCIF HAS COMPLETED PUBLIC OPINION SURVEYS TO HELP EXPLAIN THE IMPACTS OF AN ESA LISTING AND CITES UPLISTING TO DECISION MAKERS BOTH REGULATORY MECHANISMS CAN HAVE A GREAT INFLUENCE ON HUNTERS INVESTING IN THE CONSERVATION OF THE AFRICAN LION JUST LIKE IN THE US, HUNTING GENERATES CONSERVATION REVENUE IN AFRICA AN ENDANGERED STATUS OR UPLISTING FOR THE AFRICAN LION WILL RESULT IN MAJOR REVENUE LOSSES FOR CONSERVATION AND LESS PROTECTION FOR LIONS IN ZAMBIA, TANZANIA, AND SOUTH AFRICA, AMONG OTHERS POPULATION RESEARCH CENSUS SURVEYS AND ORGANIZED RESEARCH ARE OF UTMOST IMPORTANCE TO ENSURE THE FISH AND WILDLIFE SERVICE (FWS) AND CONVENTION ON INTERNATIONAL TRADE IN ENDANGERED SPECIES (CITES) HAVE THE CORRECT INFORMATION SCIF HAS INVESTED FUNDS FOR LION RESEARCHERS TO INITIATE A LION AND LEOPARD POPULATION CENSUS IN ZAMBIA, IN ADDITION TO THE COLLECTION OF DATA FOR THE AFRICAN LION DATABASE CONSERVATION (HUMAN-WILDLIFE CONFLICT AND ANTI-POACHING) AFRICAN LIONS FACE HUMAN-WILDLIFE CONFLICT EVERY DAY THAT RESULTS IN THE KILLING OF A LION POACHING AND REVENGE KILLINGS ARE A GREAT THREAT BECAUSE OF DECREASING HABITAT AND INCREASED AGRICULTURE PRODUCTION LANDOWNERS HAVE NO INCENTIVE TO PROTECT LIONS IF THEIR ECONOMIC VALUE IS DIMINISHED TO AN ENDANGERED STATUS OR UPLISTING AT CITES SCIF IS WORKING WITH PARTNERS ON ANTI-POACHING PROJECTS SCIF RAISED APPROXIMATELY $882,000 FOR ITS FIGHTING FOR LIONS CAMPAIGN IN ABOUT 30 MINUTES FROM HUNTER CONSERVATIONISTS DURING THE SATURDAY NIGHT BANQUET AT THE 2013 SCI CONVENTION THIS MONEY WAS DEPOSITED INTO A DEDICATED FUND TO COMBAT THE ESA PETITION AND POTENTIAL UPLISTING OF LIONS AT CITES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 4	SIGNIFICANT CHANGES TO THE GOVERNING DOCUMENTS ARTICLE II MISSION, VISION, PURPOSES, AND OBJECTIVES SECTION 1 MISSION AND VISION A THE FOLLOWING IS THE MISSION STATEMENT OF SC I FOUNDATION SCI FOUNDATION FUNDS AND DIRECTS WILDLIFE PROGRAMS DEDICATED TO WILDLIFE CON SERVATION AND OUTDOOR EDUCATION B THE FOLLOWING IS THE VISION STATEMENT OF SCI FOUNDATIO N SCI FOUNDATION WILL BE ACKNOWLEDGED AS THE LEADER OF THE HUNTING COMMUNITY FOR SUSTAINA BLE WILDLIFE CONSERVATION AND EDUCATION WORLDWIDE. ARTICLE IV BOARD OF DIRECTORS SECTION 4 TERMS A THE TERM OF EACH MEMBER OF THE BOARD WHO IS SELECTED PURSUANT TO A PROVISION IN SECTION 3(B)(1) THROUGH 3(B)(5), ABOVE, SHALL BEGIN ON JULY 1 AND SHALL END ON THE FOLL OWING JUNE 30 OR THEREAFTER ON THE SELECTION OF HIS SUCCESSOR THE TERM OF OFFICE SHALL NO T BE EXTENDED IF THE SELECTION OF A SUCCESSOR DOES NOT OCCUR UNTIL AFTER JUNE 30 EVEN THOU GH THE PERSON HOLDING THAT OFFICE RETAINS THE OFFICE UNTIL THE SELECTION OF HIS SUCCESSOR B THE TERMS OF THE SEVEN (7) MEMBERS OF THE BOARD ELECTED BY THE BOARD PURSUANT TO SUBSE CTION 3(B)(6), SHALL BE TWO YEARS EACH ANY MEMBER ELECTED PURSUANT TO THIS SUBSECTION MAY SERVE ADDITIONAL TERMS WITHOUT LIMITATION THE TERM OF EACH MEMBER SELECTED UNDER THIS SU BSECTION BEGINS ON JULY 1 FOLLOWING HIS ELECTION AND ENDS ON THE JUNE 30 IMMEDIATELY FOLLO WING THE SELECTION OF HIS SUCCESSOR OR ON SUCH DATE THEREAFTER AS HIS SUCCESSOR IS ELECTED THE TERM OF OFFICE SHALL NOT BE EXTENDED IF THE SELECTION OF A SUCCESSOR DOES NOT OCCUR UNTIL AFTER JUNE 30 EVEN THOUGH THE PERSON HOLDING THAT OFFICE RETAINS THE OFFICE UNTIL TH E SELECTION OF HIS SUCCESSOR ARTICLE V CONDUCT OF OFFICERS, DIRECTORS, COMMITTEE MEMBERS , MANAGEMENT STAFF AND KEY PERSONNEL SECTION 4 COMPENSATION PROHIBITED AND REIMBURSEMENT NO ELECTED OFFICER OR DIRECTOR OF SCI FOUNDATION SHALL BE ENTITLED TO RECEIVE ANY COMPENS ATION FOR HIS OR HER SERVICES TO SCI FOUNDATION IN SUCH CAPACITY, BUT SHALL BE ENTITLED TO REASONABLE REIMBURSEMENTS OF EXPENSES INCURRED IN CONNECTION WITH SCI FOUNDATION BUSINESS AS AUTHORIZED BY THE BOARD NOTHING HEREIN SHALL PREVENT ANY OFFICER OR DIRECTOR FROM REC EIVING COMPENSATION FOR PERSONAL SERVICES RENDERED TO SCI FOUNDATION FOR SERVICES OTHER TH AN AS AN OFFICER AND DIRECTOR, BUT SUCH COMPENSATION MAY BE PAID ONLY AFTER BOARD APPROVAL AND COMPLIANCE WITH SCI FOUNDATION'S POLICY GOVERNING CONFLICTS OF INTEREST ANY PAYMENTS MADE TO AN OFFICER OR DIRECTOR, INCLUDING THOSE FOR REIMBURSEMENTS OF EXPENSES, WHICH SHA LL BE DISALLOWED IN WHOLE OR IN PART AS A PROPER OR DEDUCTIBLE EXPENSE BY THE INTERNAL REV ENUE SERVICE, SHALL BE REIMBURSED BY SUCH OFFICER OR DIRECTOR TO SCI FOUNDATION TO THE FUL L EXTENT OF SUCH DISALLOWANCE. IN LIEU OF PAYMENT BY THE OFFICER OR DIRECTOR FROM WHOM REI MBURSEMENT IS SOUGHT, SUBJECT TO A DETERMINATION MADE BY THE REMAINDER OF THE BOARD, AMOUN TS MAY BE WITHHELD FROM FUTURE REIMBURSEMENT PAYMENTS UNTIL THE AMOUNT OWED TO SCI FOUNDAT ION HAS BEEN RECOVERED ARTICLE VI OFFICERS SECTION 1 OFFICERS B QUALIFICATIONS (1) T O SERVE AS AN OFFICER, AN INDIVIDUAL MUST (A) NOT BE SIMULTANEOUSLY SERVING AS AN OFFICER , INCLUDING AN ALTERNATE VICE PRESIDENT OF SCI OR AS THE PRESIDENT OF SABLES (B) NOT, DURI NG THE OFFICER'S TERM, BEGIN SERVING AS AN OFFICER OF SCI OR AS THE PRESIDENT OF SABLES, A ND (C) NOT BE A PAST PRESIDENT OF SCI OR THE SCICF (2) IF, FOR ANY REASON, A PERSON SERVIN G AS PRESIDENT OR VICE PRESIDENT HAS HIS TERM AS A DIRECTOR TERMINATE PRIOR TO THE END OF HIS TERM AS PRESIDENT OR VICE PRESIDENT THE TERMINATION OF HIS TERM AS A DIRECTOR SHALL SE RVE AS AN AUTOMATIC AND SIMULTANEOUS RESIGNATION OF HIS SERVICE AS AN OFFICER, THEREBY CRE ATING A VACANCY IN THE OFFICER POSITION ARTICLE X AMENDMENT AND REPEAL OF BYLAWS AND POL ICIES SECTION 1 AMENDMENT BY THE BOARD THE BOARD IS AUTHORIZED TO AMEND, ALTER, MODIFY, S UBSTITUTE OR OTHERWISE REVISE OR CHANGE THE ARTICLES OF INCORPORATION AND BYLAWS OF SCI FO UNDATION BY A TWO-THIRDS (2/3) VOTE OF DIRECTORS PRESENT AT A REGULAR MEETING OR SPECIAL M EETING CALLED FOR SUCH PURPOSE. SECTION 2 CONDITIONS FOR CONSIDERATION A THE BOARD SHALL CONSIDER FOR ADOPTION ANY PROPOSED AMENDMENT, ALTERATION, MODIFICATION, SUBSTITUTION OR O THER REVISION OR CHANGE TO THE ARTICLES OF INCORPORATION OR BYLAWS THAT HAS BEEN PROPOSED IN A WRITING SIGNED BY AT LEAST THREE (3) MEMBERS OF THE BOARD OF DIRECTORS B EXCEPT AS SET FORTH IN SECTION A ABOVE, PRIOR TO CONSIDERATION BY THE BOARD FOR ADOPTION, ANY PROPOS ED AMENDMENT, ALTERATION, MODIFICATION, SUBSTITUTION OR OTHER REVISION OR CHANGE TO THE AR TICLES OF INCORPORATION OR BYLAWS MUST HAVE BEEN APPROVED BY THE BYLAWS COMMITTEE IN ACCOR DANCE WITH THE PROCEDURES SET FORTH SECTION 3 BELOW SECTION 3 BYLAWS COMMITTEE APPROVAL A THE BYLAWS COMMITTEE MAY INITIATE ANY PROPOSED AMENDMENT, ALTERATION, MODIFICATION, SU BSTITUTION OR OTHER REVISION OR CHANGE TO THE ARTICLES OF INCORPORATION OR BYLAWS BY SUBMI TTING SUCH PROPOSAL TO THE BOARD FOR CONSIDERATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 4	B ANY PROPOSED AMENDMENT, ALTERATION, MODIFICATION, SUBSTITUTION OR OTHER REVISION OR C HANGE TO THE ARTICLES OF INCORPORATION OR BYLAWS MAY BE INITIATED BY A REQUEST FOR CONSIDE RATION DELIVERED TO THE BYLAWS COMMITTEE IN WRITING AND SIGNED BY (A) THREE (3) MEMBERS OF THE BOARD, OR (B) ANY COMMITTEE SUCH REQUEST SHALL INCLUDE A BRIEF EXPLANATION OF THE RE ASON FOR THE REQUESTED AMENDMENT THE BYLAWS COMMITTEE SHALL INCLUDE THE NAME(S) OF THE RE QUESTER(S) AND THE REASON FOR THE AMENDMENT WITH THE PUBLICATION OF THE PROPOSED AMENDMENT IN THE OFFICIAL JOURNAL AND WILL PROVIDE THIS INFORMATION WITH THE TEXT OF THE PROPOSED A MENDMENT WHEN IT IS PRESENTED TO THE BOARD WITHIN SIXTY (60) DAYS OF RECEIPT OF SUCH REQU EST FOR CONSIDERATION, THE BYLAWS COMMITTEE SHALL MEET AND REVIEW THE PROPOSAL THE BYLAWS COMMITTEE MAY REVISE SUCH PROPOSAL ONLY TO THE EXTENT NECESSARY TO CORRECT IT AS TO FORM, GRAMMAR, LANGUAGE AND COMPATIBILITY WITH THE EXISTING ARTICLES OF INCORPORATION, BYLAWS, AND PURPOSES, OBJECTIVES, PRACTICES AND PROCEDURES OF SCI FOUNDATION WITHIN SIXTY (60) DA YS AFTER THE BYLAWS COMMITTEE MEETING, THE BYLAWS COMMITTEE MUST SUBMIT TO THE BOARD OF DI RECTORS THE TEXT AND VERSION OF THE PROPOSAL ORIGINALLY SUBMITTED TO IT, THE REVISED VERSI ON OF THE PROPOSAL AND ITS RECOMMENDATIONS AS TO WHETHER OR NOT SUCH PROPOSAL SHOULD BE AP PROVED OR REJECTED SECTION 4 NOTICE TO BOARD OF DIRECTORS A NOTICE OF A PROPOSED AMEND MENT, ALTERATION, MODIFICATION, SUBSTITUTION OR OTHER REVISION OR CHANGE TO THE ARTICLES O F INCORPORATION OR BYLAWS MUST BE GIVEN TO THE BOARD AT THE SAME TIME AS NOTICE IS GIVEN F OR A MEETING OF THE BOARD, OR IN THE CASE OF A MEETING PREVIOUSLY FIXED BY THE BOARD FOR W HICH NO NOTICE IS REQUIRED, THEN AT A MINIMUM OF TEN (10) DAYS IN ADVANCE OF THE DATE OF S UCH MEETING SECTION 3 PROPOSALS BY THE BOARD OF DIRECTORS B NOTWITHSTANDING THE NOTICE TO BE PROVIDED HEREIN, PROPOSALS FOR REVISIONS OR CHANGES THAT ARE GERMANE TO ANY PROPOSE D AMENDMENT, ALTERATION, MODIFICATION, SUBSTITUTION OR OTHER REVISION OR CHANGE TO THE ART ICLES OF INCORPORATION OR BYLAWS OF SCI FOUNDATION MAY BE MADE FROM FLOOR AT THE BOARD MEE TING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF DIRECTORS OF THE SAFARI CLUB FOUNDATION SHALL CONSIST OF (1) FOUR MEMBERS OF THE SCI EXECUTIVE COMMITTEE, NOT INCLUDING THE ALTERNATE MEMBER OR THE PRESIDENT, SELECTED BY VOTE OF THE SCI EXECUTIVE COMMITTEE, (2) THE CHAIRMAN OF THE AUDIT COMMITTEE, (3) THE CHAIRMAN OF THE PAST PRESIDENT'S COUNCIL OF SCI, (4) ONE PAST PRESIDENT OF SCI OR SCICF (SAFARI CLUB INTERNATIONAL CONSERVATION FUND), SELECTED BY VOTE OF THE PAST PRESIDENT'S COUNCIL, (5) THE CHAIRMAN OF THE SCIF 100 HUNTER LEGACY FUND ADVISORY BOARD, AND (6) SEVEN DIRECTORS SELECTED BY THE SCI FOUNDATION BOARD OF DIRECTORS FROM AMONG SCI MEMBERS IN GOOD STANDING NOT CURRENTLY SERVING ON THE SCI BOARD OF DIRECTORS, PROVIDED THAT (I) THE FIRST SELECTION PURSUANT TO THIS PARAGRAPH 6 FOLLOWING ITS ADOPTION SHALL BE MADE BY THE DIRECTORS SERVING PURSUANT TO PARAGRAPHS 1 THROUGH 5 OF THIS SUBSECTION FROM PERSONS NOMINATED BY THE NOMINATING COMMITTEE, AND (II) ANY DIRECTOR SELECTED PURSUANT TO THIS PARAGRAPH 6 MAY NOT SERVE ON THE BOARD OF DIRECTORS OF SCI DURING HIS TERM OF OFFICE ON THE BOARD OF DIRECTORS OF THE SCI FOUNDATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	LINE 7B THE AFFIRMATIVE VOTE OF THE BOARD OF DIRECTORS OF SCI OR ITS EXECUTIVE COMMITTEE AS REQUIRED BY THE SCI BYLAWS, AND THE AFFIRMATIVE VOTE OF THE SCI FOUNDATION BOARD OF DIRECTORS AT ANY REGULAR OR SPECIAL MEETING SHALL BE REQUIRED TO APPROVE THE FOLLOWING ACTIONS (1) LIQUIDATION OR DISSOLUTION OF SCI FOUNDATION, (2) ANY SALE, LEASE, OR OTHER TRANSFER, MORTGAGE, RENOVATION OF OR CONSTRUCTION ON ANY REAL PROPERTY OWNED OR HELD BY SCI FOUNDATION, (3) MERGER, CONSOLIDATION OR OTHER TRANSFER OF SUBSTANTIALLY ALL OF THE ASSETS OF SCI FOUNDATION, (4) REPEAL, MODIFICATION, AMENDMENT, IN WHOLE OR IN PART, OR ADDITION TO ANY PROVISION IN SCI FOUNDATION'S ARTICLES OF INCORPORATION OR BYLAWS AS SUCH RELATE TO (I) THE MISSION AND/OR PURPOSES OF SCI FOUNDATION, (II) THE APPROVAL RIGHTS OF SCI, AND/OR (III) THE RIGHTS OF SCI TO APPOINT DIRECTORS TO THE SCI FOUNDATION BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND REVIEWED BY THE CONTROLLER AND CFO ONCE THE FORM 990 HAS BEEN REVIEWED, NOTICE IS SENT TO EACH MEMBER OF THE ORGANIZATION'S BOARD OF DIRECTORS INVITING THEM TO REVIEW THE FORM 990 PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	IN ADDITION TO SENDING OUT AN ANNUAL QUESTIONNAIRE TO OFFICERS AND DIRECTORS TO DETERMINE CONFLICTS OF INTEREST, SAFARI CLUB INTERNATIONAL FOUNDATION PERIODICALLY REVIEWS COMPENSATION ARRANGEMENTS AND BENEFITS FOR REASONABLENESS AND ARE THE RESULT OF ARMS-LENGTH BARGAINING, AND TO DETERMINE IF ANY TRANSACTIONS, PARTNERSHIPS AND AGREEMENTS WITH OTHER ORGANIZATIONS OR INDIVIDUALS CONFORM TO WRITTEN POLICIES, ARE PROPERLY DOCUMENTED, REFLECT REASONABLE PAYMENTS FOR GOODS AND SERVICES, FURTHER SAFARI CLUB INTERNATIONAL FOUNDATION'S PURPOSES, AND DO NOT RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	GENERALLY, SAFARI CLUB INTERNATIONAL FOUNDATION WILL BASE COMPENSATION AS CLOSE AS POSSIBLE TO THE APPROPRIATE EXTERNAL MARKETPLACE TO DO THIS SAFARI CLUB INTERNATIONAL FOUNDATION RELIES ON RELEVANT COMPARABILITY DATA INCLUDING, BUT NOT LIMITED TO, COMPENSATION LEVELS PAID BY SIMILAR SITUATED ORGANIZATIONS FOR FUNCTIONALLY COMPARABLE POSITIONS, THE AVAILABILITY OF SIMILAR SERVICES IN THE GEOGRAPHIC AREA, CURRENT COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS AND ACTUAL WRITTEN OFFERS FROM SIMILAR INSTITUTIONS COMPETING FOR THE SERVICES OF THE INDIVIDUAL WHOSE COMPENSATION IS BEING CONSIDERED THE BOARD OF DIRECTORS, THE COMPENSATION COMMITTEE, OR A SIMILAR COMMITTEE COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS WILL REVIEW AND APPROVE THE COMPENSATION ARRANGEMENTS COMPENSATION DECISIONS ARE CONTEMPORANEOUSLY DOCUMENTED IN THE COMMITTEE MINUTES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	LINE 19 FINANCIAL STATEMENTS, THE FORM 990, GOVERNING DOCUMENTS AND A COMPILATION OF SAFARI CLUB INTERNATIONAL FOUNDATION POLICIES ARE POSTED ON SAFARI CLUB INTERNATIONAL FOUNDATION'S WEBSITE.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	LOSS ON UNCOLLECTIBLE RECEIVABLE -130,000

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) SAFARI CLUB INTERNATIONAL 4800 WEST GATES PASS ROAD TUCSON, AZ 85745 86-0974183	HUNTING ADVOCACY	AZ	501(C)(4)				No
(2) SAFARI INTERNATIONAL CONSERVATION FUND 4800 WEST GATES PASS ROAD TUCSON, AZ 85745 23-7222137	INACTIVE	AZ	501(C)(3)				No
(3) SAFARI CLUB INTERNATIONAL OF CANADA SUITE 200 440 LAURIER AVE W OTTAWA, ONTARIO K1R 7X6 CA	WILDLIFE CONSERVATION	CA			SCI	Yes	
(4) SAFARI CLUB INTERNATIONAL AFRICA TRUST PO BOX 10362 CENTURION 0046 SF	WILDLIFE CONSERVATION	SF				Yes	

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	**1a**		**No**
b	Gift, grant, or capital contribution to related organization(s)	**1b**		**No**
c	Gift, grant, or capital contribution from related organization(s)	**1c**	**Yes**	
d	Loans or loan guarantees to or for related organization(s)	**1d**	**Yes**	
e	Loans or loan guarantees by related organization(s)	**1e**		**No**
f	Dividends from related organization(s)	**1f**		**No**
g	Sale of assets to related organization(s)	**1g**		**No**
h	Purchase of assets from related organization(s)	**1h**		**No**
i	Exchange of assets with related organization(s)	**1i**		**No**
j	Lease of facilities, equipment, or other assets to related organization(s)	**1j**	**Yes**	
k	Lease of facilities, equipment, or other assets from related organization(s)	**1k**		**No**
l	Performance of services or membership or fundraising solicitations for related organization(s)	**1l**		**No**
m	Performance of services or membership or fundraising solicitations by related organization(s)	**1m**		**No**
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**	**Yes**	
o	Sharing of paid employees with related organization(s)	**1o**		**No**
p	Reimbursement paid to related organization(s) for expenses	**1p**	**Yes**	
q	Reimbursement paid by related organization(s) for expenses	**1q**		**No**
r	Other transfer of cash or property to related organization(s)	**1r**		**No**
s	Other transfer of cash or property from related organization(s)	**1s**		**No**

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) SAFARI CLUB INTERNATIONAL	C	3,068,483	COST
(2) SAFARI CLUB INTERNATIONAL	D	422,665	FAIR VALUE
(3) SAFARI CLUB INTERNATIONAL	J	462,094	COST
(4) SAFARI CLUB INTERNATIONAL AFRICA TRUST	P	77,235	COST

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 86-0292099
Name: SAFARI CLUB INTERNATIONAL FOUNDATION

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

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