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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u> </u>	For the	2013 cale	endar year, or tax ye	ar beginning	January 1	, 2013, a	nd ending		ber 31	, 20 13
В	Check if a	applicable	C Name of organization	n Yellowstone to	Yukon Conserva	ation Initiative			D Employ	er identification number
	Address of	change	Doing Business As			-				810535303
$\overline{}$	Name cha	-	Number and street (or P.O. box if mail is	not delivered to stre	et address)	Room/surte		E Telepho	ne number
Η		-	.							
=	Initial retu	ım	PO Box 157				L			403-678-7097
ш	Terminate	ed	City or town, state o	r province, country,	and ZIP or foreign po	ostal code				
	Amended	d return	Bozeman, MT 5977	1-0157					G Gross re	eceipts \$
	Application	on pending	F Name and address of	of principal officer	Karsten Heuer			H(a) is this a gro	oup return for	subordinates? Yes Vo
	• • •		1240 Railway Ave,			anada				es included? Yes No
_	Toy ever	npt status	✓ 501(c)(3)	501(c) () ◀ (insert no) [527			a list. (see instructions)
÷) ~ (Insertino) L	1 4947 (a)(1) (ii	<u> </u>	┥		
<u>J</u>	Website:		w.y2y.net					H(c) Group	- T	
			Corporation Trus	st Association	Other ►	L Yea	r of formation	<u> </u>	M State	of legal domicile
Р	art I 🔃	Summ	nary							
	1	Briefly de	escribe the organiz	ation's mission	or most signification	ant activities:	Yellowst	one to Yuko	on Cons	ervation Initiative
ø	1	programs	s focus on connecti	ng and protecting	n habitat from Ye	ilowstone to Y	/ukon so th	at together	people	and nature can thrive.
Ĕ	'	P.L. B. S. S.		io.rur.eisiisiiii	<u> </u>					
Activities & Governance	ا ما	Chaple Ab	nis box ▶ ☐ if the c		antinuad ita an			more then	250/ of	ito not conoto
Š				-					I .	its fiet assets.
ĕ	1		of voting members	-					3	9
త	4	Number	of independent vo	ting members o	f the governing l	body (Part VI,	line 1b)		4	9
ĕ	5	Total nur	mber of individuals	employed in ca	lendar year 201	3 (Part V, line	2a) .		5	1
Ξ	6	Total nur	mber of volunteers	(estimate if nec	essarv)				6	0
তু			elated business re						7a	0
_			lated business tax						7b	<u> </u>
	<u> </u>	Net unre	lated business tax	able income iroi	11 FORTH 990-1, I	1110 34		Prior Ye		Current Year
	l .	_	_							
0	8	Contribu	tions and grants (F	1	<u>,909,635</u>	1,269,013				
Revenue	9	Program	service revenue (F	Part VIII, line 2g)					17,550	0
Š	10	Investme	ent income (Part VI	II, column (A), lir	nes 3, 4, and 7d)	[207	112
č			venue (Part VIII, co			-			0	
	L .		enue—add lines 8 t				_		<u>-</u>	
	+								,927,392	
			nd similar amounts						0	0
	14	Benefits	paid to or for mem	nbers (Part IX, co	olumn (A), line 4))	· · _		0	0
Ś	15	Salanes,	other compensation	n, employee ben	efits (Part IX, colu	umn (A), lines (5–10)		84,663	73,701
Expenses	16a	Profession	onal fundraising fe	9 Part IX colu	mn-(A). line 11e)			0	0
ĕ	b	Total fun	draising expenses	下門へ行門	n (D). Ime 25). ▶	•				1
꿃			penses (Bart IX, co			~\			00E C10	1 110 107
	110	Outer ex	penses (Dantin, Co	D 17 A		le)	∵ : ⊢		<u>,295,619</u>	
	18	l otal exp	penses Add lines	jy−ji ((muzej egi	iai ean ix, colun	nn (A), iine 25	" ·		,380,282	
	19	Revenue	less expenses. Su	ıbtract line 18'fr	oppune 12				-452,890	
ъ					Jœl		Be	ginning of Cu	ment Year	End of Year
Net Assets	20	Total ass	sets (Part-X, Ine Co	DEN IIT			$ abla$		545,951	644,361
<u> </u>	21		oilities (Part X, line						23,718	
<u>\$</u> .5	22		ets or fund balance	•	21 from line 20		· · ·		522.233	
_				S. Subtract line	21 110111 11110 20		• •		322,233	005,400
-	art II		ture Block					_		
										my knowledge and belief, it is
tru	e, correct,	, and comp	lete Declaration of prep	parer (other than one	cer) is based on all in	normation of which	cn preparer n	as any knowie	auge.	
			Maler K	n/h						
Sig	n ng	Sign	nature of officer	`	7			Dat	e	
He	-	l i	4):11. am	KENT N	1ELSON	TREA	SURET	72	つ/	14/14
•••		Tyro	e or print name and title	12111	2000	/ / / / / / / / / / / / / / / / / / / 	-0100		- '/-	
				In	oprorio signet		- I Data			DTIN
Pa	ıid	PONTIS	/pe preparer's name	Pre	parer's signature		Date	;	Check	
_	epare	r	. <u></u>						self-em	ployed
	se Only	1 =	name ►					Firm	's EIN ▶	
U		y <u> </u>	address ▶						ne no	
Ma	v the IR		s this return with the	he preparer sho	wn above? (see	instructions)		1		Yes No
	<u> </u>							4400000		Form 990 (2013)
FO	· Paperw	rork Redu	ıction Act Notice, se	e the separate i	nstructions.		Cat No	11282Y		rom 330 (2013)

2 D	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
2 D	Connecting and protecting habitat from Yellowstone to Yukon so people and nature can thrive. Did the organization undertake any significant program services during the year which were not listed on the
2 C	Old the organization undertake any significant program services during the year which were not listed on the
p If	
p If	
p If	
s	f "Yes," describe these new services on Schedule O. Old the organization cease conducting, or make significant changes in how it conducts, any program services?
If	f "Yes," describe these changes on Schedule O.
е	Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe the total expenses, and revenue, if any, for each program service reported.
4a (Code) (Expenses \$ 850,066 including grants of \$) (Revenue \$)
	n its Conservation program, Y2Y studies habitat needs of wildlife in the Rocky, Purcell & Mackenzie mountains to determine which
	onfiguration of habitats & linkages between them are needed for wildlife populations to survive over time. Y2Y has researched and
<u> </u>	lesigned for publication conservation strategies for specific species, such as grizzly bears and specific priority landscapes such as Cabinet Purcells Mountain Corridor. The organization collaborates with other organizations to address land use, transportation and vildlife conflict issues through education, community engagement and research. Y2Y is also collaborating on the issue of Himate change and the role of landscape connectivity in climate change adaptation. Y2Y produces & disseminates maps &
	arratives on an ongoing basis describing wildlife & human needs. The organization makes Y2Y science products available for land
	nanagement decisions and conservation work of partners. It provides networking services (website, listserve, electronic news, vorkshops), organizes meetings and science workshops.
<u>ii</u> 9 1	Code: (Code: (Code) (Co
4c ((Code:) (Expenses \$including grants of \$) (Revenue \$)
	Other program services (Describe in Schedule O.) Expenses \$ including grants of \$) (Revenue \$)

Part	V 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u> </u>		-
	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	1	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			1
	Part III	5		<u> </u>
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			,
7	"Yes," complete Schedule D, Part I	6		✓
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	l _		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		✓
U	complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	-		•
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
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		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			Mr.
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			_
_	complete Schedule D, Part VI	11a		✓
D	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		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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		✓
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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			,
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		✓
12 0	Schedule D, Parts XI and XII	420	✓	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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		_	
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	<u> </u>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	ا _ ا		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		<u>✓</u>
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	ļ	✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	'	\dashv	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	}	✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
20 -	If "Yes," complete Schedule G, Part III	19		<u> </u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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 25a	24a	:	1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√ √
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d		✓
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
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		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	21	yĄ	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	·	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
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		√
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			
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	33		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	V	√
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		√
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? <i>If "Yes," complete Schedule R,</i>	30		
	Part VI	37		✓
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	1	
		For	n 990	(2013)

Part				
	Check if Schedule O contains a response or note to any line in this Part V		1 1/	. 🗀
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	1835	Yes	No
ь)))	*	,
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		- ' '	
•	reportable gaming (gambling) winnings to prize winners?	1c	stir s	أهاما
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-	-	1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	1 5. E. T.	,	£ 1-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	i santitii I	F
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	**************************************	:	a, t
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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		✓
b	If "Yes," enter the name of the foreign country: ▶	*	- 53	, ;
	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		✓
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
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			
ь	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b	,	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	200	, t , t	~ L3
_	and services provided to the payor?	70		7
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	*	17,3%	2
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	الدينسان	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f	-	1
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	. 1	,	8.1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Signal .	200	
a	Did the organization make any taxable distributions under section 4966?	9a		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	n (a. `àssa	
а		14.3		. 1
b	Initiation fees and capital contributions included on Part VIII, line 12	145		ا رسيد
11	Section 501(c)(12) organizations. Enter		75	
а	Gross income from members or shareholders	2r	,,*	
b	Gross income from other sources (Do not net amounts due or paid to other sources		. ' - '#	
	against amounts due or received from them.)		14 0000 AT 13-	
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	: 387	25.3	' प्रिन
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		,;	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O	1	 	
Ь	Enter the amount of reserves the organization is required to maintain by the states in which	13 1	inci.	
	the organization is licensed to issue qualified health plans] ***	3.4	
C	Enter the amount of reserves on hand	<u>.</u>	·	, <u>b</u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h	Ţ	_

Part		and		"No"
`	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
Secti	on A. Governing Body and Management		Yes	No
40	Enter the number of voting members of the governing body at the end of the tax year 1a	7 7 3 X	163	822.4
1a	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	* ×	7 13	3 % ~
	committee, explain in Schedule O.	1	, , ,	16 2
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9	<u>년</u> 경.		
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	franco. ku	
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	6		1
6 7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint	-		-
-	one or more members of the governing body?	7a		1
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		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	5		13. O.
	the year by the following:	ئِد	1	
a	The governing body?	8a	1	ļ
9	Each committee with authority to act on behalf of the governing body?	8b	/	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever		ode.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
Ь	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?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	_	-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, IIa	1,5,	12.2
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		n kihámisak
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
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	1	
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	1	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		,	
_	The organization's CEO, Executive Director, or top management official	150		
a b	Other officers or key employees of the organization	15a 15b	-	1
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		() () () () () () () ()	178 7
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	1	1
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	* - 3	, vp	v^ 3
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	ر. شاهداد س مشاهدا	أد كند أ	413343111101
Saati	organization's exempt status with respect to such arrangements?	16b		1
<u>Secti</u>	List the states with which a copy of this Form 990 is required to be filed Montana			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501/	(c)(3)<	only
	available for public inspection. Indicate how you made these available. Check all that apply.	551(درد)رد.	. Ciny)
	☑ 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 in	terest	polic	y, 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: > tano Rowick 200, 1240 Boilway Ave Commerc AR 402 CZR 7007			

	(2013)	

Page 7

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

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

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

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

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ated any currer	nt officer, directo	r, or trustee.
				•	C)					,
(A)	(B)	Posi					ane	(D)	(E)	(F)
Name and Title	Average	(do not check more than one box, unless person is both an					n an	Reportable	Reportable	Estimated
	hours per week (list any	officer and a director/trustee)						compensation from	compensation from related	amount of other
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations	compensation
	organizations	recti	utio	ğ	emp	est c	₫	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted line)	عَ ا	nalt		łoye	T OM				and related
	iii ie,	stee	rust		ã) bens				organizations
			ee		L.	ated				
(1) Peter Aengst										
Director	ļ	1					}	0	0	
(2) Peter Bachman		- `	 					<u>v</u>		0
Director	ļ	1						0	0	0
(3) Deborah Carlson	<u> </u>									•
Secretary	†	1		1				0	0	o
(4) Charles Chester										
Director		1						0	o	o
(5) Daphne Chester										
Director		✓						0	0	0
(6) Jeremy Guth										
Director		✓						0	0	0
(7) Kent Nelson										
Treasurer		✓		✓				0	0	0
(8) Bill Weber	ļ				ļ					_
Chairperson		✓		✓	ļ			0	. 0	0
(9) Josh Whetzel	ļ									_
Director		\						0	0	0
(10) Karsten Heuer										
President					✓		<u> </u>	0	0	105,200
(11) Jane Bewick										
Business Director					1		<u> </u>	0	0	74,500
(12)	ļ									
(42)										
(13)	 							İ		
(14)			\vdash	\vdash			-	 		
117	 									

·	(A) Name and title		(C) Position (do not check mo box, unless perso officer and a direct				is both or/trus	n an tee)	Reportable compensation from	(E) Reportable compensation from the related			
		hours for related organizations below dotted line)		institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatic (W-2/1099-N		fro orga and	ensation m the nization related nizations
(15)													
(16)									1				
(17)													
(18)				_									
(19)													
(20)								<u> </u>				-	
							<u> </u>						
(22)		-								_			
								_					
(24)													
(25)													
1b c	Sub-total		 n A	•			•	>	0	·	0		179,700
<u>d</u>	Total (add lines 1b and 1c)	-		<u>.</u>	· 	· ·	<u>.</u>	<u> </u>	0		0		<u>0</u> 179,700
2	Total number of individuals (including but reportable compensation from the organic		to th	ose	list	ed :	above	e) w	vho received mo	ore than \$1	00,00	00 of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete s									est compe	nsate	ed 3	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual												
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or inc	dıvıdu 		
Section	n B. Independent Contractors									•			
1	Complete this table for your five highest compensation from the organization. Repyear.												
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compens	ation
	stone to Yukon Conservation Initiative Socie							$\overline{}$	search, educatio	n,			913,500
	40 Railway Ave, Canmore AB T1W 1P4 Cana	iua .							ommunications, Iministration, fur	draising			
								\vdash					
2	Total number of independent contractor received more than \$100,000 of compens							th	hose listed abo	ove) who			

Par	t VIII						-	
`		Check if Schedule O c	ontains a resp	oonse or note t			<u></u>	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns .		0	1	1		1
Grants	b	Membership dues	1b	0		** * *		
s, C	C	Fundraising events	1c	O]	*,	44 1	3 * * * * * * * * * * * * * * * * * * *
ons, Gifts, Grants Similar Amounts	d	Related organizations .	1d	0		1 (T	* ************************************	The state of the s
S, C	e	Government grants (contrib	butions) 1e	61,332			, s	
ö	f	All other contributions, gifts,			* **	June.		
Pe Pe		and similar amounts not include		1,207,681	Market Control	7		
풀	g	Noncash contributions included		33,985		1.4		
Contributions, and Other Sim	h	Total. Add lines 1a-1f.	•	33,900	1 200 012			, " , r s
		Total / Ida Ilico 1a-11 .	· · · ·	Business Code	1,269,013		(A)	1 Y 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Program Service Revenue	2a			Datimetr Code			<u> </u>	
ě	b			· -	 			
ě	5				-			
Ĕ	°.		••		ļ			
လို	d							
Гащ	e							
ğ	f	All other program service						
	g	Total. Add lines 2a-2f .				, * , , , , , , , , , , , , , , , , ,		
	3	Investment income (inc						
	i	and other similar amoun			112	0	0	112
	4	Income from investment of		nd proceeds ►	0	0	0	0
	5	Royalties	<u> </u>	<u></u> ▶	o	0	0	0
			(ı) Real	(II) Personal	17 YEAR		· • · · · · · · · · · · · · · · · · · ·	
	6a	Gross rents	0	0				
	Ь	Less rental expenses	0	0			· · · · · · · · · · · · · · · · · · ·	
	С	Rental income or (loss)	0	0		. 4	, k	K
	d	Net rental income or (los	ss)	>	0	0		0
	7a	Gross amount from sales of	(i) Securities	(II) Other	+ + + · · · · · · · · · · · ·		. *	
		assets other than inventory	0	0		<i>#</i> []		
	ь	Less cost or other basis						
		and sales expenses .	o	0				
	С	Gain or (loss)	0					
	d	Net gain or (loss)						
	u	ivet gain or (loss)		· · · · · ·	0	0	0	0
unue	8a	Gross income from fund	Iraieina					
ns i		events (not including \$	"alsing					
Other Rev		of contributions reported	<u>0</u>					
E.			on line ic).		\			
멽		•	a	0				
ŏ		Less: direct expenses .		0	AZ IZ			PSL LAS.
	C	Net income or (loss) from		events . ►	0		0	0
	9a	Gross income from gamir	-					
	:		$\cdot \cdot \cdot \cdot \cdot a$	0				
	ь	Less: direct expenses .		0			`A' . A	
	С	Net income or (loss) from		rities	0	0	0	0
	10a	Gross sales of inver	ntory, less				· · · · · · · · · · · · · · · · · · ·	·\$ 2/4° -1/#
		returns and allowances	· · · a[0				
	b	Less. cost of goods sold		0	1441A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			tayy in Ma
ı	С	Net income or (loss) from		ntory ►		0	0	0
[_	Miscellaneous Rever	nue	Business Code	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· 25.0 28.5.1. * * 5.
İ	11a					more an experiment of the	man da sensita 1900 sed	om Tandalliki telah
]	b							
	С							-
	d	All other revenue		0	0	0	0	
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instr			1 260 125		<u> </u>	1 C 428

Part IX Statement of Functional Expenses

Şectio	n 501(c)(3) and 501(c)(4) organizations must cor	nplete all columns. /	All other organization	ns must complete co	olumn (A).
<u>-</u>	Check if Schedule O contains a respor				
	t include amounts reported on lines 6b, 7b, , 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	0	0		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	o		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0		0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 8	Other salaries and wages	63,654			
9	Other employee benefits	4,500			
10	Payroll taxes	5,547			
11 a	Fees for services (non-employees). Management	84,279			38,317
b	Legal ,	0	0	. 0	0
C	Accounting	5,700	0	5,700	0
d	Lobbying	0			0
е	Professional fundraising services. See Part IV, line 17	0			0
f 9	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	87,640			
12	Advertising and promotion	07,040	00,010		1030
13	Office expenses	7,968	2,417	0	5,551
14	Information technology				
15	Royalties				
16	Occupancy				<u> </u>
17	Travel	8,890	6,797	2,093	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				ļ
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization . Insurance	1 705		4 705	
	Other expenses. Itemize expenses not covered	1,705	0	1,705	0
24	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	bank charges	2,515	0	2,515	0
b	contract services	913,500			
c			233,330	35,500	33,300
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,185,898	1,018,083	67,317	100,498
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 following SOP 98-2 (ASC 958-720)				

Balance Sheet ∝ Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash-non-interest-bearing 1 1 493,081 397,129 2 Savings and temporary cash investments 2 0 0 3 <u>52,</u>870 3 247,232 4 4 0 5 Loans and other receivables from current and former officers, directors, ~~ trustees, key employees, and highest compensated employees. 5 0 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 0 0 Notes and loans receivable, net 7 7 0 0 8 Inventories for sale or use 8 0 0 9 Prepaid expenses and deferred charges 9 0 10a Land, buildings, and equipment: cost or × other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation o 0 10c 0 11 Investments—publicly traded securities 0 11 0 12 12 Investments—other securities. See Part IV, line 11 . 0 0 13 Investments—program-related. See Part IV, line 11. 13 0 0 14 14 0 0 15 Other assets. See Part IV, line 11 15 ol 0 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 545,951 16 644,3<u>61</u> 17 Accounts payable and accrued expenses 23,718 17 38,901 18 18 ol 0 19 19 0 0 20 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 0 0 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 0 0 23 Secured mortgages and notes payable to unrelated third parties 23 0 0 Unsecured notes and loans payable to unrelated third parties . . . 24 24 0 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 0 25 0 Total liabilities. Add lines 17 through 25 23,718 26 38,901 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 27 27 313,665 448,392 28 Temporarily restricted net assets . . . 28 157,068 208,568 or Fund 29 29 0 0 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds 0 30 0 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 0 0 32 Retained earnings, endowment, accumulated income, or other funds. 32 0 0 33 33 605,460 522,233 34 Total liabilities and net assets/fund balances 545,951 34 644.361 Form **990** (2013)

Form 9	90 (2013)			Page 12
, Par	t XI Reconciliation of Net Assets			
<u>. </u>	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u>.</u>	. 🖸
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	,269,125
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,185,898
3	Revenue less expenses. Subtract line 2 from line 1	3		83,227
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		522,233
5	Net unrealized gains (losses) on investments	5		0
6	Donated services and use of facilities	6		0
7	Investment expenses	7		0
8	Prior period adjustments	8		0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1		
	33, column (B))	10		605,460
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>	_;
			Ye	s No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	plaın ın		
_			سلسطا أس شط	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	or ded		
	reviewed on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
D	Were the organization's financial statements audited by an independent accountant?		2b ✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	a on a		. her. 3
	·			
_	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	oro, abt	i. Li	
C	of the audit, review, or compilation of its financial statements and selection of an independent account		1 1	
	If the organization changed either its oversight process or selection process during the tax year, ex		2c √	# x40 -
	Schedule O.	piain in		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth :=	لَّمُنَا مِن فَا	
Jd	the Single Audit Act and OMB Circular A-133?	iorui in		
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao tha	3a	- •
U	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at		3ь	
	- 104 and a death of a death, oxplain why in confedence and describe any steps taken to differ 90 Such at	Julio.	וטט	- 1

Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

vame	ot ti	ie organization						"	inployer id	lenuncanor	Humber		
/ellov	vste		onservation Initia								35303		
Par				rity Status (All orga						nstructio	ns.		
				ation because it is. (Fo									
		-		hes, or association of			ed in sec	tion 170(b)(1)(A)(i).			
2				170(b)(1)(A)(ii). (Attac					- 1				
				spital service organiza						VEV/41/A1	(III)		
4		hospital's nam	ne, city, and state			-			_				
5			on operated for)(1)(A)(iv). (Com	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or (operated	by a go	vernment	tal unit d	escrib	ed in
6 7		 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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 t	trust described i	n section 170(b)(1)(A)	(vi). (Con	nplete Pa	ert II.)						
9		receipts from support from	activities related gross investme	receives: (1) more that d to its exempt function ont income and unrelater June 30, 1975. Se	ions—sub lated bus	oject to d siness ta:	certain ex xable inc	ceptions ome (les	s, and (2) ss section	no more	e than 33	31/3%	of its
10		An organizatio	n organized and	l operated exclusively	to test fo	r public s	safety. Se	e sectio	n 509(a)(4).			
11 e		purposes of o 509(a)(3). Che a Type I By checking til	b Type this box, I certify	that the organization	nizations supportin I–Function is not coi	described g organiz nally integ ntrolled d	d in secti zation and grated lirectly or	on 509(a d comple d	i)(1) or se te lines 1 Type III–N y by one	ection 509 1e throug Ion-funct or more	9(a)(2). S gh 11h. tionally in disqualifi	ee se tegrat ed pe	ction ed rsons
			_	ers and other than one	e or more	publicly	Supporte	eu organi	izations c	iescribed	ım secuc	ni ous	ı(a)(1)
		or section 509		writton dotorminatio	on from t	ho IDC 1	that it is	a Tupo	I Type I	l or Tue	o III sus	nortin	.~
f		organization, o	check this box .								· · ·	· ·	
g		following pers	ons?	he organization accep									
				ndirectly controls, eithody of the supported of						dın (ıı) ar 	nd 11g(i)	Yes	No
		(ii) A family m	ember of a perso	on described in (i) abo	ve?						11g(u)		
				a person described in							11g(in)		
h				ion about the supporte									
(ı)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o in col. (i) lis governing o		the organ	ou notify lization in of your port?	organizat (i) organi	s the tion in col zed in the S.?	(vii) Amour su	nt of mo	netary
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													-
(C)							-						-
(D)								- ··-	-	_			
(E)													
						ionakai			1.333 23	(E) 1 1995 V			
Total										* ,			

Total

Part		ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	<u>, </u>
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatıo	n failed to qu	alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support	r					
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						!
	include any "unusual grants.")						
0		1,434,038	1,380,028	2,103,817	1,909,635	1,269,013	8,096,531
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	0	0	0	0	0	0
•	furnished by a governmental unit to the		•				
	organization without charge	0	_ ا	۰ ا	n	0	n
4	Total. Add lines 1 through 3	1,434,038	1,380,028	2,103,817	1,909,635		8,096,531
5	The portion of total contributions by		3				
•	each person (other than a						ı
	governmental unit or publicly						
	supported organization) included on		\$ P.				
	line 1 that exceeds 2% of the amount		19 11 11 11	3.0			
_	shown on line 11, column (f)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4	86 A A A A A A A A A A A A A A A A A A A		2-7 20 10 10 10 10 10 10 10 10 10 10 10 10 10	3,784,186
6 Sooti	Public support. Subtract line 5 from line 4. on B. Total Support	<u>*** *********************************</u>	1/2 C 1/2 - 1)			M. T. 155	4,312,345
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1,434,038	1,380,028			 	
8	Gross income from interest, dividends,	1,434,036	1,300,028	2,103,817	1,909,635	1,269,013	8,096,531
0	payments received on securities loans,						
	rents, royalties and income from similar]	
	sources	1,428	190	122	207	112	2,059
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets	{					1
44	(Explain in Part IV.)	0	0	0	<u> </u>	0	0
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$, \$ 'AS	12	8,098,590
13	First five years. If the Form 990 is for the	•	•		or fifth tax v	<u> </u>	163,165 in 501(c)(3)
	organization, check this box and stop he	-			-		▶ 🗆
Secti	on C. Computation of Public Support						
14	Public support percentage for 2013 (line			1, column (f))		14	53.2 %
15	Public support percentage from 2012 Sc					15	54.8 %
16a	331/3% support test-2013. If the organi						
	box and stop here. The organization qua			-			لنتنا
Ь	331/3% support test—2012. If the organ					e 15 is 331/3%	
	check this box and stop here. The organ	•			•		. ▶ 🗆
17a	10%-facts-and-circumstances test—2						
	10% or more, and if the organization me Part IV how the organization meets the "i						
	_			-	ation qualifies	as a publicly s	. ► 🗆
L	10%-facts-and-circumstances test—2				on line 12 14		
b	15 is 10% or more, and if the organiza						
	Explain in Part IV how the organization in						
	supported organization				_		`. ▶ □
18	Private foundation. If the organization d	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
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						
3	Gross receipts from activities that are not an	1					
	unrelated trade or business under section 513						
4	Tax revenues levied for the	İ					
	organization's benefit and either paid	l'				1	
	to or expended on its behalf						
5	The value of services or facilities		1	_		į į	
	furnished by a governmental unit to the						
_	organization without charge	ļ <u> </u>					
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	l					
	, ,			 	-		
р	Amounts included on lines 2 and 3	1					
	received from other than disqualified persons that exceed the greater of \$5,000	1	}				
	or 1% of the amount on line 13 for the year]	1				
С	Add lines 7a and 7b	 		 			
8	Public support (Subtract line 7c from	TO BE SEED OF		(1) * * * * (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		e di ta	
	line 6.)		10 min 19				
Secti	on B. Total Support				<u> </u>		
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		1				
	royalties and income from similar sources .						
ь	Unrelated business taxable income (less	l	ļ	ļ		(
	section 511 taxes) from businesses acquired after June 30, 1975		İ				
	•						
_	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on	1	}			1	
12	Other income. Do not include gain or	 	 				
	loss from the sale of capital assets	1					
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he			<u> </u>	<u> </u>	<u> </u>	<u> ▶ </u>
	on C. Computation of Public Suppo						
15	Public support percentage for 2013 (line					15	%
16 Canti	Public support percentage from 2012 Sc				· · · ·	16	%
	on D. Computation of Investment In			w line 10 ==1	(6)	147	
17	Investment income percentage for 2013 Investment income percentage from 2013						
18	33 ¹ / ₃ % support tests—2013. If the organ						% and line
19a	17 is not more than 331/3%, check this box						
ь	331/3% support tests—2012. If the organiz						
D	line 18 is not more than 331/3%, check this						
			hoy on line 14				

Schedule A (F	hedule A (Form 990 or 990-EZ) 2013						
Part IV	Supplemental Part III, line 12	Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and . Also complete this part for any additional information. (See instructions).	Ī·				
_							
•							
••••							
••••							

	•••••						

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations Complete Part I-A only

	•	that have filed Form 5768 (election und	•	, , ,	•
	,	·	* **	•	•
		that have NOT filed Form 5768 (election 2768).		• • •	•
		;" to Form 990, Part IV, line 5 (Proxy anizations: Complete Part III.	rax) or Form 990-E	z, Part V, line 350 (Proxy 1	ax), men
	of organization	anizations. Complete Fait III.		Employer ider	ntification number
	stone to Yukon Conservation	on Initiatus			
Part		e organization is exempt und	er section 5016	c) or is a section 527	810535303 Prognization
1		the organization's direct and indire			n gariizationi.
2			•	· ·	•
3	Volunteer hours				,
Ū	voluntoer nours				
Part	Complete if the	e organization is exempt und	er section 5016	c)(3).	
1		excise tax incurred by the organiza			0
2	•	excise tax incurred by organization			0
3		ed a section 4955 tax, did it file Fo	_		Yes No
4a	_		•		Tyes No
b	If "Yes," describe in Part				
Part		e organization is exempt und	er section 501(c), except section 501	(c)(3).
1		ly expended by the filing organiz			<u> </u>
	activities				
2	Enter the amount of the	filing organization's funds contrib	outed to other org	anizations for section	
	527 exempt function acti	vities		<i>.</i> . > \$	
3	Total exempt function e	expenditures. Add lines 1 and 2.	. Enter here and	on Form 1120-POL,	
	line 17b			\$	
4	Did the filing organization	n file Form 1120-POL for this year	7	· · · · · · · · · ·	Yes No
5		ses and employer identification nur			
	organization made payme	ents. For each organization listed,	enter the amount	paid from the filing organi	zation's funds. Also enter
	the amount of political co	ontributions received that were pro-	mptly and directly	delivered to a separate p	olitical organization, such
	as a separate segregated	fund or a political action committe	ee (PAC). If additio	nal space is needed, prov	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	\.	(-,	(-,	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization. If
					none, enter -0
(1)					
					
(2)		<u> </u>			
				 	
(3)					
				 	
(4)		}			
				 	
(5)		}			
(6)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

Par	t II-A Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ection under .
	name, address, EIN, expens	ongs to an affiliated group (and list in Part IV esses, and share of excess lobbying expenditur	es).	oup member's
<u>B</u> (cked box A and "limited control" provisions a	ipply.	_
		ying Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
18	,	, , ,	0	
ŧ	resulting experience to time entre		0	
•		and 1b)	0	<u>.</u>
(1,018,083	
•		lines 1c and 1d)	1,018,083	
f		he amount from the following table in both		
	columns.		176,808	W. IV. W V. W.
	If the amount on line 1e, column (a) or (b) is:			
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000			
	Over \$17,000,000	\$1,000,000.		. Arc. Zima
ç	Grassroots nontaxable amount (enter 25%)	% of line 1f)	44,202	
t			0	
i	Subtract line 1f from line 1c. If zero or les		0	
j	If there is an amount other than zero or reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobb	ying Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	168,427	221,849	256,204	176,808	823,288
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,234,932
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	42,107	55,462	64,501	44,202	206,272
е	Grassroots ceiling amount (150% of line 2d, column (e))					309,408
f	Grassroots lobbying expenditures	0	0	o	0	0

Schedule C (Form 990 or 990-EZ) 2013

	(election under section 501(h)).	6	a)	<u> </u>	(b)
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No.	A	mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?		<u> </u>	N. F	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?			<u> </u>	
ď	Mailings to members, legislators, or the public?	L			
е	Publications, or published or broadcast statements?	L		<u> </u>	
f	Grants to other organizations for lobbying purposes?		Ĺ		
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?	Ĺ			
j	Total. Add lines 1c through 1i		√× 28s		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	<u></u>] **	u Â
b	If "Yes," enter the amount of any tax incurred under section 4912	. 1	\		
G	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.	<u>`</u> {	- 27	ve Soots	
d Para	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	V6\		etion	
ent	501(c)(6).)(S), (or se	CHOIT	
			·		Yes I
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	ļļ.
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? . III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	
1 2	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members		1		
-	political expenses for which the section 527(f) tax was paid).	٥.	. '*		
а	Current year		2a		
ь	Carryover from last year	•	2b		
c	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby		***		
	and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>	
Pari				·	
rovic	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Pa	t II-A, I	ıne 2; aı
art II	B, line 1. Also, complete this part for any additional information.				
			-		

Schedule C (Forn	m 990 or 990-EZ) 2013	Page .4
Part IV	Supplemental Information (continued)	•
		·
•••••		
•		
	<u> </u>	

SCHEDULE D (Form 990)

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.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	vstone to Yukon Conservation Initiative	810535303
Pai		nds 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	
2	Aggregate contributions to (during year) .	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets t	
	funds are the organization's property, subject to the organization's exclusive legal contri	ol? Yes 🗌 No
6	Did the organization inform all grantees, donors, and donor advisors in writing that gra	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or t	
	conferring impermissible private benefit?	· · · · · · Yes 🗌 No
Par	t 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	f an historically important land area
	☐ Protection of natural habitat ☐ Preservation of	f a certified historic structure
	☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	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)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not	
	historic structure listed in the National Register ,	· · 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terr	minated 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, ins	spection, handling of
	violations, and enforcement of the conservation easements it holds?	· · · · · · · · · · · · · · · · · · ·
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 ease	ements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	of section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports conservation easements in its revenue	e and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's fir	nancial statements that describes the
	organization's accounting for conservation easements.	
Part		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	
	works of art, historical treasures, or other similar assets held for public exhibition, ed	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that	it describes these items.
Ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its	
	works of art, historical treasures, or other similar assets held for public exhibition, ed	ducation, 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	▶ \$
2	If the organization received or held works of art, historical treasures, or other similar	r assets for financial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these r	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
b	Assets included in Form 990, Part X	▶ \$

Part	III Organizations Maintaining	Collections of	Art, His	torical T	reasures	, or Ot	her Similar A	ssets (cont	inued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot							
а	☐ Public exhibition		d	□ Loan	or exchang	ae proar	ams		
b	☐ Scholarly research			_ Other					
С	☐ Preservation for future generations	3		_					
4	Provide a description of the organizat XIII.		and expla	ain how ti	hey further	the org	anızatıon's exe	mpt purpose	e in Part
5	During the year, did the organization								
	assets to be sold to raise funds rather	than to be mainta	ııned as ı	part of the	e organizat	ion's co	llection?	☐ Yes	☐ No
Part									
	Complete if the organization	answered "Yes	" to For	n 990, P	art IV, line	9, or r	eported an ar	nount on Fo	orm
	990, Part X, line 21.	,;; <u>— - , , , , , , , , , , , , , , , , , , </u>		v					
1a	Is the organization an agent, trustee, included on Form 990, Part X?					tions or	other assets r	not 🗌 Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:				
							/	Amount	
C	Beginning balance					1c			,
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amoun	nt on Form 990, Pa	art X, line	21? .				. ☐ Yes	☐ No
ь	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	xplanatioi	n has been	provide	d in Part XIII .		
Par	V Endowment Funds.							<u> </u>	
	Complete if the organization		" to For	n 990, P	art IV, <u>li</u> ne	e 10.			
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years bad	ck (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses				_				
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	he current year en	d balanc	e (line 1a	. column (a	a)) held a	as:		
а	Board designated or quasi-endowmen				,	,,			
b	Permanent endowment ▶								
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2	c should equal 10	0%.						
3a	Are there endowment funds not in the	e possession of th	e organi	zation tha	at are held	and adi	ministered for t	he	
	organization by:							Ye	s No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
ь	If "Yes" to 3a(ii), are the related organi	zations listed as re	equired o	n Schedi	ule R? .			3b	
4	Describe in Part XIII the intended uses	of the organization	n's endo	wment fu	ınds.				
Part									
	Complete if the organization	answered "Yes"	' to Forr	n 990, P	art IV, line	11a. S	<u>See Form 990,</u>	Part X, line	10.
	Description of property	(a) Cost or ot			r other basis ther)		Accumulated preciation	(d) Book va	alue
1a	Land	.	-			Julian or or		 -	
b	Buildings								· · · · · · · · · · · · · · · · · · ·
С	Leasehold improvements								
d	Equipment								
e	Other		-						
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part 2	K, column	(B), line 10	D(c).) .	▶		

Complete if the organization answered "Yes" to Form 990, Part IV, line 110. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) See Add valuation Cost or end-dryses market value (c) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (d) Closely-held equity interests (e) Closely-held equity interests (f) Closely-held equity interests (g) Closely-held equity interests (h) Closely-held equity interests (h) Closely-held equity interests (h) Closely-held equity interests (h) Closely-held equity interests (h) Closely-held equity interests (h) Memod of valuation (h) Memod of valuat	Part VII	Investments—Other Securiti		m DDD Dart IV lim	a 11h Coo Farm	000 Ded V line 10
(1) Financial derivatives (2) Closely-held equity interests (3) Cher (4) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	`					
(2) Closely-held equity interests			gory	(b) Book value		
(3) Other (A) (6) (7) (8) (9) (9) (10) (10) (10) (11) (11) (12) (13) (14) (14) (15) (15) (17) (18) (19) (19) (19) (19) (19) (10) (10) (10) (10) (11) (10) (10) (10	(1) Financial	derivatives				
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)	(2) Closely-h	eld equity interests				
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)	(3) Other	• •				
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)						
(ii) (iii) (iii) (iii) (iiii) (iv) (iv)	(B)					
(F) (G) (H) (F) (G) (H) (F) (G) (H) (F) (G) (H) (F) (F) (G) (H) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(C)					
(G) (H) Total, Column (b) must equal Form 990, Part X, col. (B) line 12) ► Part XIII (a) Description of investments — Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (d) (e) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(D)					
(G) (H) Total, Column (b) must equal Form 990, Part X, col. (B) line 12) ► Part XIII (a) Description of investments — Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (d) (e) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g					 	
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	organization's	s liability for uncertain tax positions un	der FIN 48 (ASC 740). Che	eck here if the text of	the footnote has be	en provided in Part XIII

Part 2	XI Reconciliation of Revenue per Audited Financial Staten	nents With I	Revenue per Return.	Page 4
,	Complete if the organization answered "Yes" to Form 990,			ŕ
1 .	Total revenue, gains, and other support per audited financial statements		1	1,269,125
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1,200,120
	Net unrealized gains on investments	2a	o 🕽	
b i	Donated services and use of facilities	2b	0	
c	Recoveries of prior year grants	2c	0	
	Other (Describe in Part XIII.)		0	
e .	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	1,269,125
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a l	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	
	Other (Describe in Part XIII.)		0	
	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 12.)	5	1,269,125
Part >		ments With	Expenses per Return.	1,200,120
	Complete if the organization answered "Yes" to Form 990,	Part IV. line	12a.	
1	Total expenses and losses per audited financial statements			1,185,898
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1,100,000
	Donated services and use of facilities	2a		
ь	Prior year adjustments		0	
С (Other losses	2c	0 1	
	Other (Describe in Part XIII.)	2d	0	
	Add lines 2a through 2d		2e	n
3 9	Subtract line 2e from line 1		3	1,185,898
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i i		1,100,000
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	المُرْجُعُ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ اللهِ الله	
	Other (Describe in Part XIII.)	4b	<u> </u>	
	A del Langue de la collection de la coll		4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, Ii.			1,185,898
Part X				1,100,000
²rovide <u>²;</u> Part à	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a at XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	nd 4; Part IV, I t to provide a	lines 1b and 2b; Part V, lin ny additional information.	e 4; Part X, line
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Scheđule D (Fo	rm 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	
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SCHÈDULE F (Form 990)

Statement of Activities Outside the United States

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

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

	wstone to Yukon Conservation I	nitiative				10535303
Pa	Form 990, Part IV, line	14b.			plete if the organization ans	
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?					
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for mon	itoring the use of its gran	ts and other
3	Activities per Region. (The fo	ollowing Part	i, line 3 table (can be duplicated if additio	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Canada	0	0	program services	conservation	647,000
(2)	Canada	0	0	program services	communications	161,500
(3)	Canada	o	0	administration		50,000
(4)	Canada	0	0	fundraising		55,000
(5)						
(6)						
(7)						
(8)						
(9)						
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(12)						
(13)						
(14)						
(15)						
(16)						
(17)			- , , , , , , , , , , , , , , , , , , ,			
3a b						913,500
_	Totals (add lines 3a and 3b)				To the same of the	013 500

Schedule F (Form 990) 2013

Scheo	lule F (Form 990) 201		sistance to Org	anizations or Entit	ties Outside the I	Inited States, Co.	molete if the orga	nization answered "Yes	Page 2
1		(b) IRS code section and EIN (if applicable)	recipient who r	eceived more than (d) Purpose of grant	\$5,000. Part II car (e) Amount of cash grant	1 be duplicated if a (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)
(1)		; 13 ¹							
(2)									
(3)		Ven V							
(4)									
(5)									
(6)									
(7)		14.7							
(8)									
(8) (9) (10)									
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7									
(15) (16)		A Company							
2	by the IRS, or	for which the gr		ted above that are rec has provided a sectio			-	tax-exempt	
_3	Enter total nu	THE OF CHIEF OF	garnzations or ent					· ·F	

Schedule F (Form 990) 2013

Part III

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

	ated if additional space				(0.4		(h) Mathad of
(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)
(1)							
(2)			,				
(3)							
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(6)	<u> </u>						
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(8)							
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(17)							
(18)							

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Page	. 4

Part	V 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 Foreig Corporation (see Instructions for Form 926)		☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With U.S. Owner (see Instructions for Forms 3520 and 3520-A)	d	☑ 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)		☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 862 Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	1,	✓ 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 Certal Foreign Partnerships. (see Instructions for Form 8865)		☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instruction for Form 5713)		☑ No

Party	Supplemental Information
	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).
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization 810535303 **Yellowstone to Yukon Conservation Initiative**

Part	Types of Property				2.0000	
rait	Types of Floperty	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) of determining tribution amounts
1 2 3	Art—Works of art					
4 5	Books and publications Clothing and household goods					
6 7 8	Cars and other vehicles Boats and planes					
9 10 11	Securities—Publicly traded Securities—Closely held stock . Securities—Partnership, LLC, or trust interests	✓	5	33,985.12	selling price	
12 13	Securities—Miscellaneous Qualified conservation contribution—Historic structures					
14	Qualified conservation contribution—Other					
15 16	Real estate—Residential Real estate—Commercial					
17 18 19	Real estate—Other					
20 21 22	Drugs and medical supplies					
23 24 25	Scientific specimens Archeological artifacts Other ► ()					
26 27 28	Other ► () Other ► () Other ► ()					
29	Number of Forms 8283 received which the organization completed				29	0 Yes No
30a	During the year, did the organizat it must hold for at least three yea used for exempt purposes for the	ers from the	date of the initial contribu	ition, and which is not req		30a ✓
31	If "Yes," describe the arrangement Does the organization have a contributions?	gift accep				31 🗸
32a		e third part	-	· •	ell noncash	32a 🗸
33	If "Yes," describe in Part II. If the organization did not report as describe in Part II.	n amount in	column (c) for a type of pro	perty for which column (a)	s checked,	

Part II	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.
Part I colun	nn (b) is reporting the number of contributions.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

20**13**

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

Schedule O (Form 990 or 990-EZ) (2013)	Page_2
Name of the organization	Employer identification number
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	•••••••••••••••••••••••••••••••••••••••
	•••••••••••••••••••••••

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37

► Attach to Form 990. ► See separate instructions

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990

Inspection

OMB No 1545-0047

2013

Open to Public

Yellowstone to Yukon Conservation Initiative

Part I	Identification of Disregarded Entities Comple	ete if the org	janization	answered "Yes"	on Form 990, Par	t IV, line 33.			
	(a) Name, address, and EIN (if applicable) of disregarded entity		Print	(b) eary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct con entit	ntrolling
(1)									
(2)									
(3)									
(4)									
(5)									
(6)								_	
Part II	Identification of Related Tax-Exempt Organia	zations Cor	nplete if th	ne organization a	inswered "Yes" or	Form 990, Part	IV, line 34 beca	use it ha	ıd
	(a) Name, address, and EIN of related organization		b) y activity	(c) Legal domicile (state or foreign country)		(e) Public charity status (if section 501(c)(3))	(f) Direct controlling	g Section cont	(g) 512(b)(13 trolled tity?
(1) Vellow	stone to Yukon Conservation Initiative Society			<u> </u>		<u> </u>	-	Yes	No
	ly Ave, Unit 200, Canmore AB T1W 1P4, Canada	Conservation	on &	Canada		Alberta Societie	s n/a		1
		Communica				7.430.12.000.04	7.5.110		Ť
(3)						<u> </u>		<u> </u>	
(4)		-						 	
(5)		-					-		
(6)									<u> </u>
(7)			·						
For Paperw	ork Reduction Act Notice, see the Instructions for Form 9	90.		Cat	No 50135Y	<u> </u>	Schedule	R (Form 9	90) 201

Part III Identification of I because it had on	Related Organizations e or more related orga	s Taxable nizations	as a Partners treated as a pa	hip Complete if rtnership during	the organiza the tax year.	tion answere	d "Ye	s" o	n Form 990, Pa	art IV,	line	34	
(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	Ospropi alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or managing partner?		(k) Percentage ownership	
					l		Yes	No]	Yes	No		
(1)													
(2)													
(3)									-				
(4)													
(5)					-								
(6)													
.(7)													

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on 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 domicite (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	Section 5 contr enti) 12(b)(13) olled ty?
								Yes	No
_(1)									
(2)			_						
(3)									
(4)						-			
(5)		·							
(6)									
.(7)									

Schedule R (Form 990) 2013

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule During the tax year, did the organization engage in any of the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organization and the following transactions with one or more related organizations. Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Pairing of paid employees with related organization(s) for expenses Reimbursement paid to related organization(s) for expenses		S II-IV? 1a 1b 1d 1d 1d	
Receipt of (i) Interest (ii) annulties (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Palenibursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses		1a 1b 1c	
b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) sharing of paid employees with related organization(s) P Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses		1b	
C Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Palenthursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses		1c	
d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) P Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses		1d	
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g Sale of assets to related organization(s)		- 1885	
g Sale of assets to related organization(s)	. ,	1.20	<u> </u>
h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses		<u>1f</u>	
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k Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Preimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses	•	<u>1</u> i	
Performance of services or membership or fundraising solicitations for related organization(s)		<u>lj</u>	
Performance of services or membership or fundraising solicitations for related organization(s)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	٠٠ الانتاا
Performance of services or membership or fundraising solicitations by related organization(s)		. <u>1k</u>	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		11	
Sharing of paid employees with related organization(s)		1m	1
P Reimbursement paid to related organization(s) for expenses		1n	1
p Reimbursement paid to related organization(s) for expenses		10	11
q Reimbursement paid by related organization(s) for expenses		nd to	
q Reimbursement paid by related organization(s) for expenses		1p	
		<u>1</u> a	
		30.7	. Lúž
r Other transfer of cash or property to related organization(s)		Îîr	
		. 1s	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, include	ling covered relation	ships and transaction th	resholds
(a) (b)	(c)	(d)	
Name of related organization Transaction type (a-s)	Amount involved	Method of determining amo	unt involve
(1) Yellowstone to Yukon Conservation Initiative Society 0	04.270	time allocation	
[1] Yellowstone to Yukon Conservation Initiative Society 0	04,275	time anocation	
(2) Yellowstone to Yukon Conservation Initiative Society	913,500	project agreements	
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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)	unrelated, excluded from tax under	Are all sec	e) partners tion (c)(3) rations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate itions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	ralor aging	(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)						•							
(3)		-											
(4)													
(5)								<u> </u>		· <u> </u>			
(6)								-					
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(13)													
(14)													
(15)													
16)								 					

Schedule R (Form 990) 2013

Schedul® R (Form 990) 2013							
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).						
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