Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ 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*

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
THE INTERNATIONAL RHINO FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
201 MAIN STREET NO 2600

City or town, state or province, country, and ZIP or foreign postal code
FORT WORTH, TX 76102

D Employer identification number
75-2395006

E Telephone number
(817) 390-4800

G Gross receipts $ 2,956,261

F Name and address of principal officer
SUSIE ELLIS
201 MAIN STREET NO 2600
FORT WORTH, TX 76102

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

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW RHINOS ORG

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

L Year of formation 1991 **M** State of legal domicile TX

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SURVIVAL OF THE WORLD'S RHINOS THROUGH CONSERVATION AND RESEARCH

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	1
6	Total number of volunteers (estimate if necessary)	6	8
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,232,612	2,921,095
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12	15
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,667	17,476
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,234,291	2,938,586
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	98,968	851,119
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	166,543	165,860
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	48,711	47,760
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶74,901		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,918,134	1,670,927
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,232,356	2,735,666
	19	Revenue less expenses Subtract line 18 from line 12	1,935	202,920

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1,768,543	1,957,147
	21	Total liabilities (Part X, line 26)	297,997	283,681
	22	Net assets or fund balances Subtract line 21 from line 20	1,470,546	1,673,466

Part II Signature Block

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

Sign Here

****** | 2015-05-15
Signature of officer | Date

SUSIE ELLIS EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
CURTIS MAXFIELD	CURTIS MAXFIELD			P00445178

Firm's name ▶ WHITLEY PENN LLP | Firm's EIN ▶ 75-2393478

Firm's address ▶ 8343 DOUGLAS AVENUE STE 400
DALLAS, TX 75225 | Phone no (214) 393-9300

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

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE INTERNATIONAL RHINO FOUNDATION (IRF) IS DEDICATED TO THE SURVIVAL OF THE WORLD'S RHINO SPECIES THROUGH CONSERVATION AND RESEARCH

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 899,453 including grants of $ 150,000) (Revenue $)

SUMATRAN RHINO CONSERVATION - THE SUMATRAN RHINO SANCTUARY (SRS), BUILT AND FUNDED BY THE IRF, ENCOMPASSES 100 HECTARES (247 ACRES) FOR PROPAGATION, RESEARCH AND EDUCATION THE SRS RECEIVED ITS FIRST RHINO IN 1998 THE SRS IS NOW HOME TO FIVE ANIMALS AND IS STAFFED BY TWO FULL-TIME INDONESIAN VETERINARIANS, TEN KEEPERS, AND SEVERAL ADMINISTRATIVE AND SUPPORT STAFF OVER THE YEARS, A NUMBER OF CIRCUMSTANTIAL, MEDICAL, AND MANAGEMENT PROBLEMS HAVE BEEN ADDRESSED AND OVERCOME AND WITHIN THE LAST DECADE, THE HUSBANDRY AND CAPTIVE PROPAGATION OF SUMATRAN RHINOS HAS MATURED THE IRF HAS BEEN STEADFASTLY WORKING TO ADDRESS THESE ISSUES WITH THE EXPERTISE OF NUMEROUS VETERINARIANS AND REPRODUCTIVE BIOLOGISTS FROM THE US, AUSTRALIA, AND INDONESIA THIS WORK PAID OFF ON JUNE 23RD, 2012, THE SANCTUARY'S FIRST CALF, "ANDATU" WAS BORN, AND WE ARE HOPEFUL THAT MORE PREGNANCIES WILL BE FORTHCOMING

4b (Code) (Expenses $ 457,501 including grants of $ 417,406) (Revenue $)

BOSTWANA BLACK RHINO - SIX BLACK RHINOS WERE CAPTURED IN SOUTH AFRICA'S KRUGER NATIONAL PARK IN MARCH 2014, AND THEN FLOWN TO BOTSWANA BY THE BOTSWANA DEFENSE FORCE THE TRANSPORT INCLUDED ONE ADULT MALE, ONE PREGNANT ADULT FEMALE, TWO SUB-ADULT MALES AND TWO SUBADULT FEMALES ALL WERE PLACED IN BOMAS AT THE MOREMI GAME RESERVE THE ORIGINAL PLAN WAS FOR A 'SOFT RELEASE', ALLOWING THE ANIMALS A MONTH TO ACCLIMATE TO THEIR NEW ENVIRONMENT IN THE BOMAS HOWEVER, THREE OF THE ANIMALS WERE RELEASED AFTER THREE DAYS, AS ONE OF THE FEMALES BROKE DOWN THE DOOR TO ANOTHER'S PEN THE PREGNANT FEMALE WAS THE FIRST TO BE RELEASED, FOLLOWED BY THE SUB-ADULT MALE AND FENCE-BREAKING FEMALE DUNG FROM THE REMAINING ANIMALS WAS SPREADAROUND THE RELEASE AREA, HOPING THAT THE SCENT WOULD KEEP THE NEWLY-FREED ANIMALS CLOSE BY TWO WEEKS LATER, THE REST OF THE ANIMALS WERE RELEASED, AND IT APPEARS THAT ALL SIX RHINOS, EACH OF WHICH WAS FITTED WITH A RADIO-TRANSMITTER FOR TRACKING PURPOSES, HAVE NOW SETTLED IN TO THEIR NEW HOMES AN ADDITIONAL 14 BLACK RHINOS WERE CAPTURED IN SOUTH AFRICA'S NORTH WEST PARKS FROM MAY 29 THROUGH JUNE 2, AFTER WHICH THEY WERE PLACED IN BOMAS NEAR THE CAPTURE SITE BEFORE ALSO BEING TRANSPORTED TO MOREMI THE GROUP INCLUDED SIX MALES AND EIGHT FEMALES, FROM 1 5 TO MORE THAN 10 YEARS OF AGE ALL THE ANIMALS SEEM TO HAVE ADJUSTED WELL TO THEIR NEW HOME, ALTHOUGH THERE HAS BEEN SOME FIGHTING AMONG THE MALES

4c (Code) (Expenses $ 305,734 including grants of $) (Revenue $)

INDONESIA JAVAN RHINO CONSERVATION- IRF SUPPORTS THREE MAJOR RHINO CONSERVATION INITIATIVES RHINO PROTECTION UNITS (RPUS) RIGOROUSLY PATROL FORESTS TO DESTROY SNARES AND TRAPS (THE MAIN MADE OF POACHING FOR THESE SPECIES) AND APPREHEND POACHERS BY GATHERING INTELLIGENCE FROM LOCAL COMMUNITIES, RPUS ALSO PROACTIVELY PREVENT POACHING ATTEMPTS BEFORE THEY TAKE PLACE RPUS HAVE BEEN VERY EFFECTIVE IN PROTECTING THE RHINO FROM POACHERS - ONLY FIVE SUMATRAN RHINOS HAVE BEEN LOST TO POACHERS SINCE THE INCEPTION OF THE PROGRAM, AND NO JAVAN RHINOS HAVE BEEN KILLED BY VIRTUE OF THE RPUS' CONSISTENT PRESENCE AND PATROLLING, OTHER SPECIES, SUCH ASSUMATRAN TIGERS AND ELEPHANTS ALSO BENEFIT, AS DOES THE ECOSYSTEM AS A WHOLE SEVEN PATROL UNITS OPERATE IN BUKIT BARISAN SELATAN NATIONAL PARK IN SUMATRA, ONE OF THE HIGHEST PRIORITY AREAS FOR SUMATRAN MEGAFAUNA APPROXIMATELY 40-60 SUMATRAN RHINO (THE SECOND LARGEST POPULATION IN THE WORLD) INHABIT THE PARK, ALONG WITH 40-50 SUMATRAN TIGERS AND AROUND 500 ASIAN ELEPHANTS FIVE PATROL UNITS OPERATE IN WAY KAMBAS NATIONAL PARK, WHICH HAS A RESIDENT POPULATION OF NEARLY 35 SUMATRAN RHINO (THE THIRD LARGEST POPULATION OF SUMATRAN RHINOS) AND IS ALSO THE SITE OF THE SUMATRAN RHINO SANCTUARY FOUR RPUS PROTECT JAVAN RHINOS IN UJUNG KULON NATIONAL PARK, WHERE THE ONLY VIABLE POPULATION OF THE SPECIES EXISTS (ESTIMATED BETWEEN 35 AND 44 ANIMALS) UJUNG KULON NATIONAL PARK IS HOME TO THE ONLY REMAINING VIABLE POPULATION OF JAVAN RHINOS IN THE WORLD NO MORE THAN 50 ESTIMATED ANIMALS IRF WORKS CLOSELY WITH YAYASAN BADAK INDONESIA (YABI), ITS IMPLEMENTING PARTNER IN INDONESIA, THE UJUNG KULON NATIONAL PARK AUTHORITIES, WWF-INDONESIA AND THE LOCAL, PROVINCIAL, AND NATIONAL GOVERNMENT TOWARDS THE SPECIES' CONSERVATION IN 2010, IRF AND PARTNERS LAUNCHED THE JAVAN RHINO STUDY AND CONSERVATION AREA (JRSCA) WITHIN UJUNG KULON NATIONAL PARK (UK) WITH THE IDEA THAT IMPROVING THE HABITAT IN THE GUNUNG HONJE AREA (THE EASTERN PART OF THE PARK) WILL DRAW MORE RHINOS AND THUS ENABLE THE POPULATION TO EXPAND WORK IS CONTINUING TO CONSTRUCT AN ELECTRIC FENCE AND ADJACENT PATROL ROAD, SMALL BRIDGES, AND TO IMPLEMENT HABITAT MANAGEMENT ACTIVITIES SUCH AS CLEARING OF THE INVASIVE ARENGA PALM AND PROVIDING FOR A WATER SUPPLY AND SALTLICK, CONSTRUCT NEW GUARD POSTS, AND SOCIALIZING THE PROJECT WITH LOCAL COMMUNITIES FIFTY PLOTS HAVE BEEN CLEARED OF ARENGA PALM SO FAR, WHICH HAS RESULTED IN NINE RHINOS MOVING INTO THE THE JRSCA IS A STUDY AND CONSERVATION AREA TO ENABLE LEARNING MORE ABOUT THE POPULATION IT ALSO SHOULD LEAD TO AN INCREASE IN THE NUMBER OF RHINOS, WHICH WOULD EVENTUALLY ALLOW TRANSLOCATING A SUBSET OF THE UJUNG KULON ANIMALS TO A SUITABLE SECOND SITE, STILL TO BE IDENTIFIED, AS AN 'INSURANCE' POPULATION THE JRSCA WILL BE COMPLETED IN EARLY 2014

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 864,676 including grants of $ 283,713) (Revenue $)

4e **Total program service expenses** ▶ 2,527,364

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	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 "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	**1a**	4			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" 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**		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			**14b**		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . .	**1a** 16			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent . . .	**1b** 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders? . . .		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .		**9**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . .	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . .			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13* . . .	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	**12c**	Yes	
13	Did the organization have a written whistleblower policy? . . .	**13**	Yes	
14	Did the organization have a written document retention and destruction policy? . . .	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official . . .	**15a**	Yes	
b	Other officers or key employees of the organization . . .	**15b**		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . .	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . .	**16b**		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶THOMAS W WHITE

201 MAIN STREET SUITE 2600
FORT WORTH, TX 76102 (817) 390-8400

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☐

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

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

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JOHN LUKAS DIRECTOR/PRESIDENT	4 00 0 00	X		X				0	0	0
(2) RICK BARONGI DIRECTOR/VP AFRICAN PROGRA	2 00 0 00	X		X				0	0	0
(3) TERRI ROTH DIRECTOR/VP ASIAN PROGRAMS	0 30 0 00	X		X				0	0	0
(4) DON FARST DIRECTOR/SECRETARY	2 00 0 00	X		X				0	0	0
(5) LEE M BASS DIRECTOR/TREASURER	2 00 0 00	X		X				0	0	0
(6) APRIL SALTER DIRECTOR	2 00 0 00	X						0	0	0
(7) CAMERON KERR DIRECTOR	0 30 0 00	X						0	0	0
(8) DIANE LEDDER DIRECTOR	2 00 0 00	X						0	0	0
(9) EVAN BLUMER DIRECTOR	0 30 0 00	X						0	0	0
(10) HEATHER EBERHART DIRECTOR	0 30 0 00	X						0	0	0
(11) LEWIS GREENE DIRECTOR	0 30 0 00	X						0	0	0
(12) MICHAEL FOURAKER DIRECTOR	0 30 0 00	X						0	0	0
(13) OLIVIER PAGAN DIRECTOR	0 30 0 00	X						0	0	0
(14) PATRICK R CONDY DIRECTOR	0 30 0 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) PETER HALL DIRECTOR	0 30 0 00	X						0	0	0
(16) RANDY RIECHES DIRECTOR	2 00 0 00	X						0	0	0
(17) SUSIE ELLIS EXECUTIVE DIRECTOR	40 00 0 00	X						145,000	0	10,567

		(D)	(E)	(F)
1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	145,000	0	10,567

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

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e 331,767				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 2,589,328				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		2,921,095			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		15			15
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) . . . . ▶					
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances .	a 35,151				
	b	Less cost of goods sold . .	b 17,675				
	c	Net income or (loss) from sales of inventory . . ▶		17,476	17,476		
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶					
	12	**Total revenue.** See Instructions . . . . . ▶		2,938,586	17,476	0	15

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	55,608	55,608		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	795,511	795,511		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	145,417		145,417	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,150		10,150	
9	Other employee benefits				
10	Payroll taxes	10,293		10,293	
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	19,224		19,224	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	47,760			47,760
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties . .				
16	Occupancy				
17	Travel	44,699		44,699	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	610		610	
23	Insurance	4,693		4,693	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	INDONESIA SUMATRAN RHIN	749,453	749,453		
b	INDONESIA JAVAN RHINO C	305,734	305,734		
c	ZIMBABWE RHINO CONSERVA	280,196	280,196		
d	FUNDRAISING AND ADVERTI	102,082			102,082
e	All other expenses	164,236	340,862	-101,685	-74,941
25	**Total functional expenses.** Add lines 1 through 24e	2,735,666	2,527,364	133,401	74,901
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash-non-interest-bearing		1,103,702	1	1,104,961
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		100,328	3	277,140
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		1,222	8	12,885
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,890			
	b	Less accumulated depreciation	10b 497	2,726	10c	2,393
	11	Investments—publicly traded securities		555,578	11	555,593
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		4,987	15	4,175
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		1,768,543	16	1,957,147
Liabilities	17	Accounts payable and accrued expenses		297,997	17	283,681
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		297,997	26	283,681
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		720,010	27	1,111,875
	28	Temporarily restricted net assets		750,536	28	561,591
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,470,546	33	1,673,466
	34	Total liabilities and net assets/fund balances		1,768,543	34	1,957,147

Part XI **Reconcilliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,938,586
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,735,666
3	Revenue less expenses Subtract line 2 from line 1	3	202,920
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,470,546
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,673,466

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 75-2395006
Name: THE INTERNATIONAL RHINO FOUNDATION

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 280,196 including grants of $) (Revenue $)

ZIMBABWE RHINO CONSERVATION - THE IRF-SUPPORTED LOWVELD RHINO TRUST (LRT)MANAGES RHINO MONITORING AND ANTI-POACHING UNITS IN ZIMBABWE THE LOWVELD RHINO TRUST (LRT) IS A ZIMBABWEAN-REGISTERED TRUST (DEEDS REGISTRY NUMBER 0006019/09) WHICH UNDERTAKES RHINO CONSERVATION ACTIVITIES IN THE LOWVELD REGION OF ZIMBABWE, WITH A CONCENTRATION OF EFFORT IN SAVE VALLEY CONSERVANCY (SVC) AND BUBYE VALLEY CONSERVANCY (BVC) THE LOWVELD CONSERVANCIES NOW HOLD NEARLY 90 PERCENT OF ZIMBABWE'S BLACK RHINOS THESE ACTIVITIES INCLUDE EFFORTS TO HELP MAINTAIN AN ENABLING ENVIRONMENT (IN TERMS OF HABITAT, LAND-USE, STAKEHOLDER ATTITUDES, ETC) FOR THE LONG-TERM GROWTH OF POPULATIONS OF BOTH SPECIES OF RHINOS, WHILST ALSO TACKLING IMMEDIATE CONSERVATION NEEDS (MONITORING, MANAGEMENT, PROTECTION AND COMMUNITY AWARENESS) THE LOWVELD CONSERVANCIES, INCLUDING MALILANGWE, HAD KNOWN TOTALS OF 436 BLACK RHINOS AND 241 WHITE RHINOS AT END DECEMBER 2014, WITH THREE BLACK RHINO POPULATIONS (SVC, BVC AND MALILANGWE) IN ADDITION TO DIRECT INVOLVEMENT IN THE MONITORING, MANAGEMENT AND PROTECTION OF RHINOS IN SVC AND BVC, LRT COORDINATES WITH MALILANGWE ON RHINO CONSERVATION NEEDS THAT REQUIRE JOINT EFFORTS, AND ASSISTS WITH MANAGEMENT INPUTS FOR THE SMALL BLACK RHINO GROUP (13-15) THAT REMAINS IN CHIPINGE SAFARI AREA LRT IS WORKING WITH THE PARKS AND WILDLIFE MANAGEMENT AUTHORITY (ZPWMA) AND FRANKFURT ZOOLOGICAL SOCIETY (FZS) TOWARDS CREATING A NEW RHINO SANCTUARY IN GONAREZHOU NATIONAL PARK THE PROGRAMME OF RHINO CONSERVATION IN THE LOWVELD BUILT UP THE BLACK RHINO POPULATION IN THAT REGION FROM 4% OF THE NATIONAL TOTAL IN 1990 TO 89% AT END DECEMBER 2014 (ABOUT 8% OF THE CONTINENTAL TOTAL) THIS HAS BEEN ACHIEVED THROUGH BIOLOGICAL MANAGEMENT, STRATEGIC TRANSLOCATIONS OF RHINOS, SUPPORT FOR ANTI-POACHING, INFORMER SYSTEMS, LEGAL ACTIONS AGAINST POACHERS, ETC THE CONSERVANCIES HAVE MAINTAINED CRUCIAL ANTI-POACHING AND MANAGEMENT INPUTS THROUGHOUT WHAT HAVE BEEN VERY CHALLENGING ECONOMIC AND POLITICAL CONDITIONS UNPLANNED SETTLEMENT UNDER ZIMBABWE'S "FAST-TRACK" RESETTLEMENT PROGRAMME HAS RESULTED IN SIGNIFICANT LOSS OF RHINO HABITAT IN THE CONSERVANCIES BUT NONETHELESS THE AVAILABLE RANGE REMAINS SUFFICIENT TO CARRY MORE THAN TWICE THE CURRENT POPULATIONS OF BOTH RHINO SPECIES THE MAJOR CHALLENGES TO THE CURRENT RHINO RANGE IN THE LOWVELD REMAIN ONGOING ENCROACHMENT BY SETTLERS AND FINANCIAL INSTABILITY OF SVC OWING TO POLITICAL PRESSURES, ESPECIALLY THE WITH-HOLDING OF SAFARI HUNTING QUOTAS FROM THE MEMBERS WHO NEED TO GENERATE OPERATING INCOME, WITHOUT WHICH THEY CANNOT INVEST IN ANTI-POACHING AND OTHER CONSERVANCY FUNCTIONS WHICH ALSO MEET RHINO CONSERVATION NEEDS THE PARKS AUTHORITY, WHO ARE NOW CLAIMING MANAGEMENT OF AREAS WITHIN SVC, DO NOT HAVE THE FINANCES OR MANPOWER CAPACITY TO MAINTAIN THE REQUIRED LEVELS OF SECURITY OR MANAGEMENT LRT HAS BEEN WORKING CLOSELY WITH COMMUNITY LEADERS AROUND SVC TO IDENTIFY AND PROMOTE A COMMUNITY-BASED RESOLUTION OF THE LAND DISPUTE THAT HAS CRIPPLED THIS CONSERVANCY UNDER THE DESTABILIZED CIRCUMSTANCES, A SUFFICIENT RANCH SCOUT FORCE TO DETECT POACHING INCURSIONS INTO SVC HAS NOT BEEN MAINTAINED, DESPITE FUNDING SUBSIDIZATION VIA LRT, AND IN 2014 SVC LOST AT LEAST FIVE BLACK RHINOS (ALL THESE INCURSIONS WERE UNDETECTED PRIOR TO SHOTS BEING HEARD OR CARCASSES BEING LOCATED), IN CONTRAST TO FOUR POACHING LOSSES FROM THE MUCH LARGER BVC POPULATION, AND NO LOSSES AT MALILANGWE IN 2014, LRT RHINO MANAGEMENT OPERATIONS INVOLVED DRUG-DARTINGS OF 52 RHINOS IN THE LOWVELD CONSERVANCIES, WITH NO RESULTANT RHINO MORTALITIES

(Code) (Expenses $ 229,428 including grants of $ 144,605) (Revenue $)

SOUTH AFRICA - RHINO POACHING IN SOUTH AFRICA REACHED AN ALL-TIME HIGH IN 2014, WITH 1,215 RHINO LOST THE AIMS OF PHASE ONE OF OPERATION STOP POACHING NOW HAS BEEN TO CONDUCT SECURITY NEEDS ASSESSMENTS IN SELECTED AREAS, PROVIDE EQUIPMENT AND TRAINING THAT WOULD ALLOW ANTI-POACHING STAFF IN THOSE AREAS TO MEET MINIMUM SECURITY STANDARDS AS PRESCRIBED BY THE SOUTH AFRICAN DEVELOPMENT COMMUNITY RHINO MANAGEMENT GROUP, AND TO PROVIDE EQUIPMENT AND TRAINING TO AID RHINO CRIME SCENE INVESTIGATIONS SO THAT SOLID, ADMISSIBLE EVIDENCE AGAINST POACHING SUSPECTS CAN BE GENERATED PHASE 2 OF OPERATION STOP POACHING NOW, LAUNCHED IN 2014, FOCUSES STRENGTHENING ANTI-POACHING AND COMMUNITY ENGAGEMENT FOR POPULATIONS OF RHINOS NUMBERING AROUND 100 ANIMALS THIS WAS A STRATEGIC DECISION ON THE PART OF THE IRF, IT IS BELIEVED THAT THESE LARGER POPULATIONS WILL BE THE ONES TO LIKELY SURVIVE THE POACHING ONSLAUGHT, WHICH SHOWS NO SIGN OF ABATEMENT IN SOUTHEASTERN SOUTH AFRICA, IRF IS SUPPORTING THE MUNAWANA CONSERVATION FUND, AFFILIATED WITH THE PHINDA PRIVATE GAME RESERVE IN KWAZULU NATAL (KZN) PROVINCE ALTHOUGH RHINO POACHING IS WIDESPREAD ACROSS SOUTH AFRICA, WITH BOTH STATE AND PRIVATELY OWNED RHINOS BEING TARGETED, THE CONSERVATION AREAS WITH THE MOST SIGNIFICANT POPULATIONS, SUCH AS PHINDA, ARE THE MAIN FOCUS OF ATTENTION IT IS CLEAR IS THAT GREATER AND MORE FOCUSED INTERVENTIONS THAT ADAPT TO THE CURRENT SITUATIONS NEED TO BE IMPLEMENTED SUCH INTERVENTIONS NEED TO BE ORIGINAL AND CREATIVE IN ORDER TO BE EFFECTIVE RECENT SUCCESSES IN KZN HAVE SHOWN THE CRITICAL VALUE OF REWARDING INFORMANTS FOR INFORMATION THE AMOUNTS HAVING TO BE PAID TO REWARD PEOPLE FOR INFORMATION LEADING TO A POSITIVE/CONFIRMED CRIME RELATING TO RHINO POACHING HAS ALSO SEEN A DRAMATIC INCREASE, BUT CAN BE A COSTLY EXERCISE FOR RESERVES AND PRIVATE SECURITY COMPANIES RECENT EXPERIENCE AND SUCCESS HAVE SHOWN THAT REWARDING FOR INFORMATION FOR AN INCIDENT AND NOT WAITING FOR A CONVICTION, WHICH COULD TAKE YEARS TO FINALIZE, HAS AN IMMEDIATE POSITIVE IMPACT ON THE FIGHT AGAINST RHINO RELATED AND OTHER WILDLIFE CRIMES WE HAVE THEREFORE PROVIDED MUNAWANA CONSERVATION FUND WITH FUNDING TO HELP THEM IMPLEMENT AN INFORMANT REWARD SYSTEM THE IRF HAS PROVIDED OTHER FUNDING FOR TO SUPPORT ANTI-POACHING WORK IN THE ZULULAND REGION THROUGH THE NYATHI ANTI-POACHING UNIT (APU), OVERSEEN BY STOP RHINO POACHING COM NORTHERN ZULULAND'S CLOSE PROXIMITY TO MOZAMBIQUE AND SWAZILAND MAKE IT A PRIME TARGET FOR RHINO POACHERS, ESPECIALLY NOW THAT SECURITY INTERVENTIONS IN THE KRUGER NATIONAL PARK'S SOUTHERN SECTION ARE DISPLACING POACHERS TO SEEK NEW SHOOTING GROUNDS STAKEHOLDERS NEED TO PROACTIVELY KEEP ON TOP OF THE ESCALATING POACHING THREAT, A THREAT THAT CONTINUOUSLY EVOLVES, IN ORDER TO KEEP RHINO LOSSES TO A MINIMUM KWA-ZULU NATAL AND THE EASTERN CAPE SHARE COMMON DARTING INCIDENTS, HENCE THE FOCUS FROM NYATHI ANTI-POACHING UNIT IN THE EASTERN CAPE REGION, WORKING CLOSELY WITH CHOSEN SECURITY OFFICIALS PROTECTING KEY POPULATIONS IN THAT AREA CREATING EFFECTIVE CONSERVATION LAW ENFORCEMENT IN ANY PROTECTED AREA REQUIRES AN ACCURATE UNDERSTANDING OF THE UNIQUE COMBINATION OF THREATS FACING WILDLIFE IN PARKS, TOGETHER WITH AN UNDERSTANDING OF THE RISK PROFILE OF THE PARKS WITH THE REGARD TO ILLEGAL WILDLIFE TRAFFICKING ACTIVITIES NYATHI APU'S OBJECTIVE IS TO MITIGATE THIS RISK WITH PRE-EMPTIVE ACTIONS AGAINST INCOMING POACHING GROUPS SOUTH AFRICA'S GREAT FISH RIVER NATURE RESERVE IS HOME TO ONE OF THE MOST SIGNIFICANT SOUTHERN BLACK RHINO (DICEROS BICORNIS MINOR) POPULATIONS, DESPITE THE FACT THAT THE BLACK RHINO WAS EXTIRPATED FROM THIS REGION IN 1886 AND NOT REINTRODUCED UNTIL 100 YEARS LATER THE RESERVE WAS ESTABLISHED IN PHASES BETWEEN 1973 AND 1987, AND TODAY COMPRISES THREE CONTIGUOUS PROTECTED AREAS DOUBLE DRIFT GAME RESERVE (23,500 HA), ANDRIES VOSLOO KUDU RESERVE (6,500 HA) AND THE SAM KNOTT NATURE RESERVE (15,500 HA) THE IRF AWARDED A GRANT TO HELP SECURE RHINO HABITAT BY CONSTRUCTING A NEW GUARD POST AND HOUSING FOR RANGER STAFF IN A CRITICAL AREA OF THE RESERVE WHERE PREVIOUSLY THERE HAD BEEN NO GUARD ACCOMMODATIONS THERE HAVE BEEN NO REPORTED RHINO POACHING INCIDENTS IN GREAT FISH FOR THE LAST TWO YEARS, ALTHOUGH ARRESTS CONTINUE TO BE MADE FOR ILLEGAL ENTRY AND HUNTING THE BLACK RHINO POPULATION THERE HAS GROWN AT A RATE GREATER THAN 10% PER YEAR SINCE THE REINTRODUCTION TOOK PLACE IN ADDITION, THE GREAT FISHPOPULATION HAS PROVIDED FOUNDER STOCK FOR THE REINTRODUCTION OF BLACK RHINO TO ZAMBIA'S NORTH LUANGWA NATIONAL PARK THE NEW GUARD HOUSE HAS BEEN CONSTRUCTED IN AN AREA VIEWED AS VULNERABLE FROM A SECURITY POINT OF VIEW RANGERS NOW ARE ON-SITE AT A HOTSPOT AREA TO THE SOUTH OF THE RESERVE WHERE A SIGNIFICANT PORTION OF THE RHINO POPULATION RESIDES AND WHERE FREQUENT INCIDENTS TAKE PLACE AND SERVICE FROM CURRENT RANGER STAFF HAD BEEN LIMITED DUE TO VEHICLE AND ACCESS PROBLEMS BY PLACING RANGERS THERE ON ROTATION, FOOT PATROLS AND NIGHT WORK IS LIKELY TO RESULT IN MORE ARRESTS AND GREATER GROUND COVERAGE IRF HAS AWARDED A GRANT TO SWAZILAND'S BIG GAME PARKS, WHICH PROTECTS BOTH WHITE AND BLACK RHINO POPULATIONS IN THE HLANE ROYAL NATIONAL PARK, MLILWANE WILDLIFE SANCTUARY, AND MKHAYA GAME RESERVE THE GRANT WILL HELP ENHANCE SECURITY MEASURES BY ENGAGING LOCAL COMMUNITIES IN CONSERVATINO SWAZILAND SHARES AN INTERNATIONAL BORDER WITH MOZAMBIQUE, AS DOES SOUTH AFRICA, ACROSS WHICH POACHERS AND SMUGGLERS ARE ABLE TO MOVE WITH RELATIVE EASE, TRAFFICKING RHINO HORN AND OTHER ILLEGAL WILDLIFE PRODUCTS TO ASIAN MARKETS BY ENHANCING COMMUNICATION WITH LOCAL COMMUNITIES, THE CHANCES OF ARRESTING SUSPECTED POACHERS BEFORE AN INCIDENT OCCURS INCREASES BIG GAME PARKS ALREADY BOASTS AN IMPRESSIVE RHINO PROTECTION RECORD ONLY THREE RHINOS HAVE BEEN KILLED BY POACHERS IN THE COUNTRY SINCE 2011, AND NONE IN THE 20 YEARS PRIOR TO THAT BOTH RHINO SPECIES WERE EXTIRPATED IN SWAZILAND IN THE MID-1900S, BUT WHITE RHINOS WERE REINTRODUCED IN 1966 AND BLACK RHINOS IN 1987, AND BOTH POPULATIONS ARE PRESENTLY ON THE RISE WHILE FOCUSED PRIMARILY ON AFRICA, IRF'S OPERATION STOP POACHING NOW CAMPAIGN SUPPORTS NOT ONLY ACTIONS TAKEN IN RHINO RANGE COUNTRIES, BUT PROGRAMS THAT FOCUS ON REDUCING DEMAND FOR RHINO HORN IN CONSUMER NATIONS WE PROVIDED A GRANT TO EDUCATION FOR NATURE - VIETNAM (ENV) TO DEVELOP A PUBLIC AWARENESS CAMPAIGN, AS WELL AS EFFORTS TO STRENGTHEN LAW ENFORCEMENT AND PROMOTE STRICTER PUNISHMENTS FOR WILDLIFE CRIMES IN VIETNAM, RHINO HORN IS SOLD IN RELATIVE SECRECY, NOT IN PUBLIC MARKETS OR TRADITIONAL MEDICINE SHOPS HORN CONSUMERS TEND TO BE MIDDLEAGED, WEALTHY, AND UNCONCERNED ABOUT ILLEGAL TRADE, ANIMAL WELFARE ISSUES OR SPECIES BEING DRIVEN TO EXTINCTION ENV'S DEMAND REDUCTION CAMPAIGN TARGETS RHINO HORN CONSUMERS, POTENTIAL CONSUMERS AND NON-USERS WHO ARE WILLING TO BECOME INVOLVED IN ACTIVITIES TO PROTECT RHINOS MESSAGES DIRECTED AT USERS AND POTENTIAL USERS WILL EMPHASIZE A NEGATIVE SOCIAL STIGMA ASSOCIATED WITH RHINO HORN USE, CONTINUE TO DEBUNK IT AS A TONIC OR CURE AND DECLARE ITS USE A WASTE OF MONEY NON-USERS, BY CONTRAST, WILL BE ASKED TO REPORT INCIDENTS OF RHINO HORN USE TO LOCAL AUTHORITIES ENV WILL USE A COMBINATION OF PUBLIC SERVICE ANNOUNCEMENTS, NATIONAL RADIO PROGRAMS, SOCIALMEDIA CAMPAIGNS AND SPECIAL EVENTS TO REACH THE VARIOUS AUDIENCES

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 88,110 including grants of $ 19,000) (Revenue $)

TECHNICAL ADVISORS - IRF PROVIDED FUNDING TO OTHER RHINO-FOCUSED GROUPS, INCLUDING SUPPORT FOR THE CHAIRMAN AND SCIENTIFIC OFFICER OF THE IUCN/SSC AFRICAN RHINO SPECIALIST GROUP, CHAIRMAN OF THE IUCN/SSC ASIAN RHINO SPECIALIST GROUP, THE IRF INDONESIA LIAISON POSITION, AND THE RHINO RESOURCE CENTER (A CENTRAL REPOSITORY FOR RHINO INFORMATION)

(Code) (Expenses $ 55,711 including grants of $ 8,000) (Revenue $)

INDIA RHINO CONSERVATION - IRF PROVIDED SUPPORT FOR IMPLEMENTING INDIAN RHINO VISION 2020, A COLLABORATIVE EFFORT AMONG THE GOVERNMENT OF ASSAM (INDIA), WWF -INDIA, THE BODO TERRITORIAL COUNCIL, AND IRF WITH THE GOAL OF INCREASING THE POPULATION OF INDIAN RHINOS TO 3,000 BY THE YEAR 2020 AND TRANSLOCATING ANIMALS IN ORDER SPREAD THE POPULATION OUT MORE EVENLY OVER AT LEAST SEVEN NATIONAL PARKS FROM 2008-2013, A TOTAL OF 18 ANIMALS WERE TRANSLOCATED FROM PABITORA WILDLIFE SANCTUARY AND KAZIRANGA NATIONAL PARK TO MANAS NATIONAL PARK AS PART OF THE PROGRAM, AND ANOTHER GROUP MOVED ADDITIONAL SEVEN ANIMALS FIVE ANIMALS WERE POACHED IN 2013, BRINGING TO SEVEN THE NUMBER LOST TO POACHERS SINCE REINTRODUCTION EFFORTS BEGAN IN 2008 HOWEVER, 10 RHINO CALVES HAVE BEEN BORN IN MANAS UNDER THE AUSPICES OF INDIAN RHINO VISION 2020, NINE OF THESE BIRTHS OCCURRED IN 2013 TWO OF THE POACHING LOSSES WERE MOTHERS WITH CALVES, THOSE ANIMALS ARE NOW BEING HAND-REARED DUE TO THE INCREASED POACHING ACTIVITY IN 2013, AND ONE ADDITIONAL ANIMAL LOST IN 2014, NO ADDITIONAL RHINO TRANSLOCATIONS TO MANAS NATIONAL PARK ARE PLANNED UNTIL PROTECTION CAN BE ENHANCED A NEW SECURITY ASSESSMENT HAS BEEN UNDERTAKEN AND THE ISSUE IS BEING ADDRESSED ON A NUMBER OF LEVELS, INCLUDING TRAINING PROGRAMS FOR PARK GUARDS AND WORKING WITH LOCAL VILLAGES TO ENSURE STAKEHOLDER SUPPORT FOR RHINO PROTECTION EFFORTS PLANS CONTINUE TO TRANSLOCATE UP TO SIX INDIAN RHINOS TO THE LAOKHOWA-BURACHAPORI COMPLEX IN LATE 2015 CONSTRUTION OF A NEW BOMA AND FENCE IS UNDERWAY AS THE AREA IS PREPARED TO RECEIVE THE ANIMALS

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 2,242 including grants of $) (Revenue $)

BLACK RHINO REPATRIATION FUND

(Code) (Expenses $ 125,039 including grants of $ 110,608) (Revenue $)

RHINO CONSERVATION RESEARCH - IN 2009, AS PART OF ITS COMMITMENT TO RHINO CONSERVATION RESEARCH, IRF ISSUED A REQUEST FOR PRE-PROPOSALS, AND INVITED 11 OF THE 30 PRE-PROPOSALS RECEIVED TO SUBMIT A FULL PROPOSAL FOR FUNDING CONSIDERATION PRE-PROPOSALS AND PROPOSALS WERE REVIEWED BY INDEPENDENT OUTSIDE RESEARCHERS AND FIVE WERE SELECTED FOR GRANT AWARDS, WITH A TOTAL OF $240,325 AWARDED ANOTHER REQUEST FOR PRE-PROPOSALS WAS ISSUED IN LATE 2014 WITH THE FOLLOWING PRIORITIES (A) FACTORS AFFECTING HEALTH AND PRODUCTION EX SITU, (B) IMPROVING RHINO POPULATION CENSUS, MONITORING AND TRACKING DEVICES, (C) IDENTIFYING THE MOST IMPORTANT FACTORS IN ACHIEVING TRANSLOCATION SUCCESS, (D) DETERMINING ECOLOGICAL FACTORS AFFECTING RHINO POPULATIONS AND (E) CONSERVING GENETIC DIVERSITY THROUGH CELL/GAMETE RESCUE FROM REMNANT POPULATIONS IRF ANTICIPATES FUNDING UP TO FIVE FULL RESEARCH GRANTS OVER A TWO-YEAR PERIOD OF 35,000-$50,000 EACH AND TWO STUDENT GRANTS OF UP TO $5,000 EACH IRF RECEIVED (A) 12 FULL RESEARCH GRANT PREPROPOSALS, OF WHICH SEVEN WERE SELECTED TO COMPLETE AND SUBMIT FULL PROPOSALS, AND (B) FIVE STUDENT GRANT PRE-PROPOSALS, OF WHICH TWO ARE UNDER REVIEW MR KONSTANT BELIEVES IRF RECEIVED A VERY GOOD MIX OF RESEARCH CANDIDATES, AND 13 INDIVIDUALS ARE SERVING ON THE REVIEW PANEL THE REVIEWERS HAVE A DEADLINE OF NOVEMBER 3 TO COMPLETE THEIR REVIEWS, THE GRANTS ARE EXPECTED TO BE PAID BY THE END OF THE YEAR, AND THE RESEARCH BUDGET HAS $175,000

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 82,450 including grants of $) (Revenue $)
ZIMBABWE SPECIAL PROJECTS

(Code) (Expenses $ 1,500 including grants of $ 1,500) (Revenue $)
SCHOLARSHIPS - INDONESIA LIAISON

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE INTERNATIONAL RHINO FOUNDATION

Employer identification number
75-2395006

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ____________

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

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	2,050,682	2,085,394	2,615,638	2,232,612	2,921,095	11,905,421
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	2,050,682	2,085,394	2,615,638	2,232,612	2,921,095	11,905,421
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,699,022
6 **Public support.** Subtract line 5 from line 4						10,206,399

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	2,050,682	2,085,394	2,615,638	2,232,612	2,921,095	11,905,421
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	178	6	5	12	15	216
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support** Add lines 7 through 10						11,905,637

12 Gross receipts from related activities, etc (see instructions)	12	39,776

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	85 730 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	86 830 %

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2013** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	**1**		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	**2**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	**3a**		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	**3c**		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* . . .	**4b**		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990).*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	**9a**		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	**9b**		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	**9c**		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below.*	**10a**		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	**10b**		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	**11c**		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

a ☐ The organization satisfied the Activities Test Complete **line 2** below

b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below

c ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	3b		

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	**1**		
2	Recoveries of prior-year distributions	**2**		
3	Other gross income (see instructions)	**3**		
4	Add lines 1 through 3	**4**		
5	Depreciation and depletion	**5**		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7	Other expenses (see instructions)	**7**		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	**8**		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	**1**		
a	Average monthly value of securities	**1a**		
b	Average monthly cash balances	**1b**		
c	Fair market value of other non-exempt-use assets	**1c**		
d	**Total** (add lines 1a, 1b, and 1c)	**1d**		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI) ____________			
2	Acquisition indebtedness applicable to non-exempt use assets	**2**		
3	Subtract line 2 from line 1d	**3**		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	**4**		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6	Multiply line 5 by 035	**6**		
7	Recoveries of prior-year distributions	**7**		
8	**Minimum Asset Amount** (add line 7 to line 6)	**8**		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	**1**		
2	Enter 85% of line 1	**2**		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**		
4	Enter greater of line 2 or line 3	**4**		
5	Income tax imposed in prior year	**5**		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**		
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. . . . . . . ______			
b From 2010. . . . . . . ______			
c From 2011. . . . . . . ______			
d From 2012. . . . . . . ______			
e From 2013. . . . . . . ______			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 $ ______			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2015.** Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. . . . . . . ______			
b From 2011. . . . . . . ______			
c From 2012. . . . . . . ______			
d From 2013. . . . . . . ______			
e From 2014. . . . . . . ______			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493135060215

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE INTERNATIONAL RHINO FOUNDATION

Employer identification number
75-2395006

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

		(a) Donor advised funds	**(b)** Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of 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 held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenue 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 assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

b Assets included in Form 990, Part X ▶ $ ________

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

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

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

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

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

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

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	2,890		497	2,393
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				2,393

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related. 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
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	2,938,586
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	2,938,586
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	2,938,586

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	2,735,666
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	2,735,666
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	2,735,666

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION FOLLOWS THE GUIDANCE UNDER GAAP, WHICH PRESCRIBES A COMPREHENSIVE MODEL FOR THE FINANCIAL STATEMENT RECOGNITION, MEASUREMENT, PRESENTATION, AND DISCLOSURE OF UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN INCOME TAX RETURNS MANAGEMENT BELIEVES THAT IT HAS NOT TAKEN A TAX POSITION THAT, IF CHALLENGED, WOULD HAVE A MATERIAL EFFECT ON THE FOUNDATION'S FINANCIAL STATEMENTS THE FOUNDATION FILES FORM 990 IN THE UNITED STATES FEDERAL JURISDICTION WITHIN THE UNITED STATES AND NO TAX RETURNS ARE CURRENTLY UNDER EXAMINATION BY ANY TAX AUTHORITIES AT DECEMBER 31, 2014, THE FOUNDATION'S TAX RETURNS RELATED TO FISCAL YEARS ENDED DECEMBER 31, 2011 THROUGH DECEMBER 31, 2013 REMAIN OPEN TO POSSIBLE EXAMINATION BY THE TAX AUTHORITIES

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493135060215

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE INTERNATIONAL RHINO FOUNDATION

Employer identification number
75-2395006

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in region	**(d)** Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			0
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	0			0

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

3 Enter total number of other organizations or entities . . . . ▶

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)*	☐ Yes	☑ No

Part V **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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	THE ORGANIZATION REQUIRES GRANT RECIPIENTS TO SUBMIT REPORTS ON THE USE OF GRANT FUNDS

Additional Data

Software ID:
Software Version:
EIN: 75-2395006
Name: THE INTERNATIONAL RHINO FOUNDATION

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AFRICA	CORE SUPPORT FOR THE AFRICAN RHINO SPECIALIST GROUP	10,000	WIRE TRANSFER			
		UNITED KINGDOM	SUPPORT FOR THE RHINO RESOURCE CENTER	9,000	WIRE TRANSFER			
		SOUTH AFRICA	SUPPORT FOR STOP RHINO POACHING COM	15,000	WIRE TRANSFER			
		SOUTH AFRICA	REDUCING RHINO HORN CONSUMPTION IN VIETNAM THROUGH A PUBLIC AWARENESS CAMPAIGN	25,179	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AFRICA	SUPPORT TOWARDS SECURING OF ONE OF THE WORLDS MOST SIGNIFICANT BLACK RHINO POPULATIONS - GREAT FISH RIVER NATURE RESERVE	35,000	WIRE TRANSFER			
		SOUTH AFRICA	ENHANCING RHINO SECURITY THROUGH COMMUNITY ENGAGEMENT	15,000	WIRE TRANSFER			
		SOUTH AFRICA	BOTSWANA BLACK RHINO TRANSLOCATIONS	417,406	WIRE TRANSFER			
		INDONESIA	SUMATRA DEBT-FOR-NATURE SWAP MATCH FUNDING	150,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AFRICA	DEVELOPING SECURITY COMMUNICATIONS FOR RHINO RE-INTRODUCTION PROJECT IN GONAREZHOU NATIONAL PARK	30,000	WIRE TRANSFER			
		SOUTH AFRICA	SUPPORT TOWARDS STRATEGIC SECURITY INITIATIVES BY NYATHI APU	24,426	WIRE TRANSFER			
		INDIA	SMALL GRANT PROGRAM FOR THE GREATER ONE-HORNED RHINO IN INDIA	8,000	WIRE TRANSFER			
		UNITED KINGDOM	ASSESSING THE GENETIC HEALTH OF THE SOUTHERN BLACK RHINOCEROS POPULATIONS USING GENOMIC TOOLS	50,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AFRICA	IMPROVING RHINO POPULATION MONITORING IN LIWONDE NATIONAL PARK, MALAWI	5,000	WIRE TRANSFER			

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE INTERNATIONAL RHINO FOUNDATION

Employer identification number
75-2395006

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

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

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1	WILLIAM KONSTANT 403 POPLAR ROAD FLOURTOWN, PA 19013	CONSULTING		No	2,016,118	32,964	1,983,154
2	GLORIA GOERES 244 TURNER ASHBY LANE EDINBURG, VA 22824	CONSULTING		No	904,977	14,796	890,181
3							
4							
5							
6							
7							
8							
9							
10							
Total . . . . ▶					2,921,095	47,760	2,873,335

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

TX

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

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

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

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

9 Enter the state(s) in which the organization conducts gaming activities ____________

a Is the organization licensed to conduct gaming activities in each of these states? . . . . ☐ **Yes** ☐ **No**

b If "No," explain ____________

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

b If "Yes," explain ____________

11 Does the organization conduct gaming activities with nonmembers? . . . . ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activities conducted in

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

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ________ and the amount of gaming revenue retained by the third party ▶ $ ________

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

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

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE INTERNATIONAL RHINO FOUNDATION

Employer identification number
75-2395006

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LINCOLN PARK ZOO 2001 NORTH CLARK STREET CHICAGO,IL 60614	36-2512404	501(C)(3)	15,608				INVESTIGATING IMPORTANT FACTORS AFFECTING HEALTH AND REPRODUCTION EX SITU
(2) UNIVERSITY OF FLORIDA PO BOX 113201 GAINESVILLE,FL 32611	59-6002052	501(C)(3)	5,000				VALIDATION OF BEST PRACTICES FOR MEASUREMENT OF IRON STATUS IN BLACK RHINOCEROS
(3) UNIVERSITY OF ILLINOIS 506 S WRIGHT STREET 108 HENRY ADMINISTRATION BUILDING URBANACHAMPAIGN,IL 61801	37-6000511	501(C)(3)	35,000				DEVELOPING EFFECTIVE MARKERS FOR CENSUSING OF SUMATRAN AND JAVAN RHINOS BY LOCAL RESEARCHERS

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

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

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

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE ORGANIZATION REQUIRES GRANT RECIPIENTS TO SUBMIT REPORTS ON THE USE OF GRANT FUNDS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
THE INTERNATIONAL RHINO FOUNDATION

Employer identification number
75-2395006

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SUSIE ELLIS, EXECUTIVE DIRECTOR	(i)	145,000	0	0	10,567	0	155,567	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493135060215

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
THE INTERNATIONAL RHINO FOUNDATION	75-2395006

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	DIRECTORS ARE REQUIRED TO ANNUALLY DISCLOSE CONFLICTS OF INTEREST THIS POLICY IS REGULARL Y AND CONSISTENTLY MONITORED BY THE PROGRAM DIRECTOR
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION DECISIONS ARE MADE BY THE ORGANIZATION'S EXECUTIVE COMMITTEE ACTING ON BE HALF OF AND WITH PERMISSION FROM THE ORGANIZATION'S BOARD OF DIRECTORS THESE DISCUSSIONS ARE MINUTED THE COMPENSATION AMOUNT DETERMINED FOR DR ELLIS, THE EXECUTIVE DIRECTOR, WAS DEEMED APPROPRIATE BY THE EXECUTIVE COMMITTEE BASED ON HER LEVEL OF EXPERTISE AND EXPERIE NCE.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XI, LINE 2C	THE EXECUTIVE COMMITTEE, WHICH HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTOR S, ASSUMES RESPONSIBILITY FOR THE SELECTION OF AN INDEPENDENT ACCOUNTANT TO AUDIT THE ORGA NIZATION'S FINANCIAL STATEMENTS
FORM 990, PART III, LINE 1	IN 1989, IN RESPONSE TO ALARMING POACHING RATES OF BLACK RHINOS IN ZIMBABWE, A GROUP OF CO NCERNED INDIVIDUALS AND INSTITUTIONS FOUNDED THE INTERNATIONAL BLACK RHINO FOUNDATION TO A SSIST IN THE CONSERVATION OF BLACK RHINOS THROUGH EFFORTS IN THE WILD AND IN CAPTIVITY IN PART BECAUSE OF THE INTERNATIONAL BLACK RHINO FOUNDATION'S SUPPORT, POACHING WAS VIRTUALL Y ELIMINATED AND ZIMBABWE'S BLACK RHINO POPULATION BEGAN TO STABILIZE. IN 1993, RECOGNIZIN G THAT THE ESCALATING CRISIS FACING ALL FIVE RHINO SPECIES WAS NOT RECEIVING THE ATTENTION IT DESERVED, THE INTERNATIONAL BLACK RHINO FOUNDATION EXPANDED ITS MISSION AND BECAME THE INTERNATIONAL RHINO FOUNDATION (IRF) FOR THE LAST 20 YEARS, IRF HAS FUNDED AND OPERATED RHINO CONSERVATION PROGRAMS IN AFRICA AND ASIA, FOCUSING EXPERTISE AND RESOURCES IN AREAS WHERE RHINOS ARE MOST IN NEED OF PROTECTION, AND WHERE CONSERVATION EFFORTS WILL HAVE THE MOST SIGNIFICANT IMPACT SINCE ITS FOUNDING, IRF HAS PROVIDED FUNDING FOR SCIENTIFIC RESEA RCH THAT ENHANCES THE ABILITY TO MANAGE RHINOCEROS POPULATIONS BOTH IN THE WILD AND IN CAP TIVITY IRF ALSO WORKS WITH CONSERVATION CENTERS AND ZOOS TO PROVIDE LINKAGES BETWEEN CAPT IVE AND WILD POPULATIONS OF RHINOS AT THE HEART OF IRF'S VISION IS THE BELIEF THAT THESE MAGNIFICENT SPECIES SHOULD ENDURE FOR FUTURE GENERATIONS, AND THAT PROTECTING RHINOS ENSUR ES THE SURVIVAL OF MANY OTHER SPECIES THAT SHARE THEIR HABITAT, INCLUDING PEOPLE.