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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

SAFARI CLUB INTERNATIONAL FOUNDATION

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

4800 WEST GATES PASS ROAD

City or town, state or province, country, and ZIP or foreign postal code

TUCSON, AZ 85745

F Name and address of principal officer

WILLIAM LAIRD HAMBERLIN

4800 WEST GATES PASS ROAD

TUCSON, AZ 85745

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

4325

D Employer identification number

86-0292099

E Telephone number

(520) 798-4904

G Gross receipts \$ 16,393,006

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: WWW SAFARICLUBFOUNDATION.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1972

M State of legal domicile NV

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

SCI FOUNDATION FUNDS AND DIRECTS WILDLIFE PROGRAMS DEDICATED TO WILDLIFE CONSERVATION AND OUTDOOR SCI

FOUNDATION FUNDS AND DIRECTS WILDLIFE PROGRAMS DEDICATED TO WILDLIFE CONSERVATION AND OUTDOOR EDUCATION

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

☐

3 Number of voting members of the governing body (Part VI, line 1a)

15

4 Number of independent voting members of the governing body (Part VI, line 1b)

14

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

50

6 Total number of volunteers (estimate if necessary)

100

7a Total unrelated business revenue from Part VIII, column (C), line 12

0

7b Net unrelated business taxable income from Form 990-T, line 34

-50

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year

Current Year

4,652,358

4,107,458

363,927

340,002

597,874

835,025

1,056,755

1,111,110

6,670,914

6,393,595

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) 1,017,840

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Prior Year

Current Year

1,921,470

1,055,561

0

0

1,658,109

1,867,614

0

0

2,160,400

2,107,123

5,739,979

5,030,298

930,935

1,363,297

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

End of Year

26,197,278

27,792,911

1,118,348

1,271,918

25,078,930

26,520,993

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

Signature of officer

2020-05-08

Date

NATHAN BOLT CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check if self-employed

PTIN P00317845

Firm's name CLIFTONLARSONALLEN LLP

Firm's EIN 41-0746749

Firm's address 5255 EAST WILLIAMS CIRCLE STE 5000

TUCSON, AZ 85711

Phone no (520) 790-3500

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

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

4a	(Code)	(Expenses \$	1,165,790	including grants of \$	344,608)	(Revenue \$	95,146)
See Additional Data							

4b	(Code)	(Expenses \$	452,012	including grants of \$	1,397)	(Revenue \$	287,341)
See Additional Data							

4c	(Code)	(Expenses \$	1,192,828	including grants of \$	593,273)	(Revenue \$	0)
See Additional Data							

(Code)	(Expenses \$	336,352	including grants of \$	116,283)	(Revenue \$	1,100)
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HUMANITARIAN SERVICES PROGRAMSOME SPECIFIC ACCOMPLISHMENTS/HIGHLIGHTS PATHFINDER WINNER SELECTED - MARCUS STEURY WAS CHOSEN FROM A COMPETITIVE SELECTION PROCESS BY THE SCIF PATHFINDER COMMITTEE AS THIS YEAR'S PATHFINDER AWARD RECIPIENT FOR THE WORK HE DOES TO HELP OTHER DISABLED INDIVIDUALS WHILE CONTINUING HIS PASSION FOR THE OUTDOORS AND LOVE OF HUNTING HE WILL BE HONORED WITH THIS PRESTIGIOUS AWARD AT THE 6TH ANNUAL BERETTA AND SCI FOUNDATION CONSERVATION LEADERSHIP AWARD GALA LOCATED AT THE PEPPERMILL HOTEL CASINO ON TUESDAY, FEBRUARY 4, 2020, WHERE HE WILL BE AWARDED A 10-DAY SAFARI IN NAMIBIA AFRICASAFARI CARE - THE BELL FAMILY BLUE BAGS WERE FILLED BY CHAPTERS AND INDIVIDUAL WITH MUCH NEEDED SUPPLIES LIKE MEDICAL, EDUCATIONAL, AND OTHER RELIEF SUPPLIES THESE SUPPLIES WERE DISTRIBUTED THROUGHOUT THE WORLD FOR THIS FISCAL YEAR, 276 BELL FAMILY BLUE BAGS FULL OF HUMANITARIAN SUPPLIES WERE DELIVERED TO 21 COUNTRIES BAGS WITH SUPPLIES WERE LITERALLY TAKEN AROUND THE WORLD FROM GREENLAND TO SOUTH AFRICA IN A NEW PARTNERSHIP WITH THE INTERNATIONAL WILDLIFE FELLOWSHIP FOUNDATION (IWFF) TO PROVIDE AID TO MOZAMBIQUE WHICH WAS IMPACTED BY CYCLONE IDAI DUE TO OUR FUNDING EFFORTS, APPROXIMATELY 38,000 MEALS OF DRIED FOOD, ENRICHED WITH VITAMINS AND PROTEINS WAS DELIVERED TO NEEDY YOUTH AND ADULTS VETERAN'S PROGRAM - THE SCIF VETERANS COMMITTEE SELECTED COMBAT VETERAN JONATHAN THOMAS, A 15-YEAR VETERAN WHO SERVED AS STAFF SARGENT AND HAS EARNED TWO PURPLE HEART MEDALS AND ONE BRONZE STAR RECIPIENT DURING HIS SERVICE WAS SELECTED TO GO ON A DONATED PRIVATE LAND MONTANA ELK HUNT ON MAY 08, 2019, CERTAIN COMMITTEE MEMBERS PARTICIPATED IN A WREATH LAYING CEREMONY AT THE TOMB OF THE UNKNOWN SOLDIER AT ARLINGTON NATIONAL CEMETERYSPORTSMEN AGAINST HUNGER - SCI FOUNDATION, SPORTSMEN AGAINST HUNGER FED THE NEEDY IN RENO AND LAS VEGAS AND ALSO DISTRIBUTED HUMANITARIAN AID ON JANUARY 29TH, IN RENO, THE SCI FOUNDATION AND ITS VOLUNTEERS SERVED 1,100 MEALS, ALSO GIVING OUT CARE PACKAGES CONTAINING THICK WOOL SOCKS, BEANIES, HAND WARMERS AND A SWEET-TREAT THAT BROUGHT SMILES TO THE HOMELESS ON JANUARY 30TH, THE SCI FOUNDATION AND ITS VOLUNTEERS SERVED OVER 1,000 MEALS TO THE NEEDY THE FOUNDATION ALSO DISTRIBUTED APPROXIMATELY 2,000 HUMANITARIAN CARE PACKAGES TO THE HOMELESSHUMANITARIAN SERVICES MATCHING GRANTS - THIS SUB-COMMITTEE DISTRIBUTES GRANTS FOR SPORTSMEN AGAINST HUNGER CAMPAIGNS, FILLING AND DISTRIBUTION OF BLUE BAGS, SENSORY SAFARIS AND ANY HUNTING RELATED ACTIVITIES TO RAISE FUNDS FOR CANCER RESEARCH IN FY2019, A TOTAL OF \$7,957 IN GRANTS WAS AWARDED TO CHAPTERS FOR THEIR HUMANITARIAN WORK

4d	Other program services (Describe in Schedule O)					
	(Expenses \$	336,352	including grants of \$	116,283)	(Revenue \$	1,100)

4e	Total program service expenses ▶	3,146,982
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Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36 Yes	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	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 ComplianceCheck 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 36	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 3	
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	50	2b	Yes	
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)						
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	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes	
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		No
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		No
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		No
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

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		
	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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	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.		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?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	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.	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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?		
15a	The organization's CEO, Executive Director, or top management official.	Yes	
15b	Other officers or key employees of the organization.	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	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?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: AK, AZ, AR, CA, FL, GA, HI, IL, KS, KY, MD, MI, MN, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT, VA, WI, WV, AL, DC, MA

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.
 ▶ NATHAN BOLT 4800 WEST GATES PASS ROAD TUCSON, AZ 85745 (520) 798-4904

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)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SACKMAN III WARREN A PRESIDENT	32.00	X		X				0	0	0
(2) KAUFFMAN CRAIG L PRESIDENT ELECT	16.00	X		X				0	0	0
(3) MINX BROOK F CORPORATE SECRETARY	16.00	X		X				0	0	0
(4) CUNNINGHAM RALPH S CORPORATE TREASURER	16.00	X		X				0	0	0
(5) ANDERSON DENNIS SCIF DIRECTOR	8.00	X						0	0	0
(6) DETWILER DONALD SCIF DIRECTOR	8.00	X						0	0	0
(7) DEVILLE ROMAN A SCIF DIRECTOR	8.00	X						0	0	0
(8) DONAU ALFRED SKIP SCIF DIRECTOR	8.00	X						0	0	0
(9) HARTER DON C SCIF DIRECTOR	8.00	X						0	0	0
(10) INGRAM MICHAEL SCIF DIRECTOR	8.00	X						0	0	0
(11) LEE JON T SCIF DIRECTOR	8.00	X						0	0	0
(12) MADDOX SHERRY D SCIF DIRECTOR	8.00	X						0	0	0
(13) SADLER SANDRA SCIF DIRECTOR	8.00	X						0	0	0
(14) SKOLD STEVE SCIF DIRECTOR	8.00	X						0	0	0
(15) WELKER BRIAN H SCIF DIRECTOR	8.00	X						0	0	0
(16) WOODRUFF RICHARD BUCK SCIF DIRECTOR	8.00	X						0	0	0
(17) BENSON ROBERT K EXECUTIVE DIRECTOR	40.00			X				158,228	0	10,984

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BOLT NATHAN CFO	10 00 30 00			X				0	163,593	12,140
(19) HAMBERLIN WILLIAM LAIRD CEO BEG LATE 6/2019	10 00 30 00			X				0	0	0
(20) HASLER STEPHEN J DIRECTOR OF FUNDRAISING	40 00					X		128,090	0	16,462
(21) BROOKS DANIEL E DIRECTOR OF EDUCATION & HS	40 00					X		101,719	0	8,223
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								388,037	163,593	47,809

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 **▶ 3**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
CLEAR CREEK DEVELOPMENT 20 VOYAGER LANE UNIT C BOZEMAN, MT 597183203	BUILDER	115,467
CENTIMARK CORPORATION 12 GRANDVIEW CIRCLE CANONSBURG, PA 153178533	ROOFING	110,000
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 ▶ 2		

Part VIII Statement of RevenueCheck 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	14,440			
	c Fundraising events . . .	1c				
	d Related organizations	1d	1,747,221			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,345,797			
	g Noncash contributions included in lines 1a - 1f \$ <u>123,259</u>					
	h Total. Add lines 1a-1f ▶		4,107,458			
Program Service Revenue			Business Code			
	2a TUITION AND ADMISSIONS		611600	340,002	340,002	
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶		340,002			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		512,444			512,444
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶		100,000			100,000
	6a Gross rents	(i) Real 477,651	(ii) Personal			
	b Less rental expenses	0				
	c Rental income or (loss)	477,651				
	d Net rental income or (loss) ▶		477,651			477,651
	7a Gross amount from sales of assets other than inventory	(i) Securities 9,851,873	(ii) Other			
	b Less cost or other basis and sales expenses	9,529,292				
	c Gain or (loss)	322,581				
	d Net gain or (loss) ▶		322,581			322,581
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a	703,555				
	b Less direct expenses b	409,317				
	c Net income or (loss) from fundraising events . . . ▶		294,238			294,238
	9a Gross income from gaming activities See Part IV, line 19 a	96,600				
	b Less direct expenses b	0				
c Net income or (loss) from gaming activities . . . ▶		96,600			96,600	
10a Gross sales of inventory, less returns and allowances . . . a	104,387					
b Less cost of goods sold . . . b	60,802					
c Net income or (loss) from sales of inventory . . . ▶		43,585	43,585			
Miscellaneous Revenue		Business Code				
11a OTHER INCOME	900099	99,036			99,036	
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d ▶		99,036				
12 Total revenue. See Instructions ▶		6,393,595	383,587	0	1,902,550	

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.	806,561	806,561		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	21,600	21,600		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	227,400	227,400		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	430,860	30,474	73,336	327,050
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	1,166,756	699,198	187,425	280,133
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	28,913	16,308	8,228	4,377
9 Other employee benefits.	139,199	66,599	44,721	27,879
10 Payroll taxes.	101,886	55,214	24,448	22,224
11 Fees for services (non-employees):				
a Management.	33,742		33,742	
b Legal.	65,708	1,921	62,549	1,238
c Accounting.	23,311		23,311	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	138,345		138,345	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	37,768	8,162		29,606
12 Advertising and promotion.	180,389	83,948	450	95,991
13 Office expenses.	244,556	111,080	93,074	40,402
14 Information technology.	50,704	4,902	44,924	878
15 Royalties.				
16 Occupancy.	148,274	140,251	8,023	
17 Travel.	310,198	195,130	40,802	74,266
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	48,193	34,599	12,273	1,321
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	261,523	211,827	47,215	2,481
23 Insurance.	83,362	47,146	3,158	33,058
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a PROGRAMS & PROJECTS	182,510	181,121	674	715
b MAINTENANCE & SECURITY	177,867	166,802	11,065	0
c PRINTING	74,150	12,730	3,460	57,960
d POSTAGE	46,479	24,009	4,209	18,261
e All other expenses	44		44	
25 Total functional expenses. Add lines 1 through 24e.	5,030,298	3,146,982	865,476	1,017,840
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 SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		1,797,155	1	1,926,602	
	2	Savings and temporary cash investments		1,435,614	2	1,344,559	
	3	Pledges and grants receivable, net		1,794,864	3	1,839,332	
	4	Accounts receivable, net		75,055	4	279,694	
	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		47,194	8	49,775	
	9	Prepaid expenses and deferred charges		74,667	9	150,872	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	13,132,753			
	b	Less: accumulated depreciation	10b	9,357,086	3,838,674	10c	3,775,667
	11	Investments—publicly traded securities		15,807,042	11	17,099,676	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		1,327,013	15	1,326,734	
16	Total assets. Add lines 1 through 15 (must equal line 34)		26,197,278	16	27,792,911		
Liabilities	17	Accounts payable and accrued expenses		447,835	17	602,484	
	18	Grants payable			18		
	19	Deferred revenue		596,792	19	597,081	
	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		73,721	25	72,353	
	26	Total liabilities. Add lines 17 through 25		1,118,348	26	1,271,918	
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		8,842,941	27	9,004,005	
	28	Temporarily restricted net assets		2,113,198	28	2,848,415	
	29	Permanently restricted net assets		14,122,791	29	14,668,573	
	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		25,078,930	33	26,520,993	
34	Total liabilities and net assets/fund balances		26,197,278	34	27,792,911		

Part XI Reconciliation of Net AssetsCheck 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	6,393,595
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,030,298
3	Revenue less expenses Subtract line 2 from line 1	3	1,363,297
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,078,930
5	Net unrealized gains (losses) on investments	5	68,766
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	10,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	26,520,993

Part XII Financial Statements and ReportingCheck 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? 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		No
b Were the organization's financial statements audited by an independent accountant? 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	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?		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		

Additional Data

Software ID:

Software Version:

EIN: 86-0292099

Name: SAFARI CLUB INTERNATIONAL FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

EDUCATION PROJECTS - SEE SCHEDULE O

Form 990, Part III, Line 4b:

INTERNATIONAL WILDLIFE MUSEUM - SEE SCHEDULE O

Form 990, Part III, Line 4c:

WILDLIFE CONSERVATION PROGRAM - SEE SCHEDULE O

SCHEDULE A (Form 990 or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No 1545-0047
		2018
		Open to Public Inspection
Department of the Treasury Internal Revenue Service	Name of the organization SAFARI CLUB INTERNATIONAL FOUNDATION	Employer identification number 86-0292099

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

The organization is not a private foundation because it is (For lines 1 through 12, 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 (Form 990 or 990-EZ))
- ☐ 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university
- ☒ 10 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)
- ☐ 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- ☐ 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - ☐ 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- 10 above (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), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)
(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14
15	Public support percentage for 2017 Schedule A, Part II, line 14	15
16a	33 1/3% support test—2018. 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—2017. 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—2018. 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—2017. 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 10 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,636,508	4,529,626	5,067,599	4,652,358	4,107,458	22,993,549
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	522,548	456,043	466,471	490,717	444,389	2,380,168
3	Gross receipts from activities that are not an unrelated trade or business under section 513	691,806	747,401	673,006	871,450	800,155	3,783,818
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	5,850,862	5,733,070	6,207,076	6,014,525	5,352,002	29,157,535
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	3,199,351	3,226,335	3,263,604	3,262,833	2,020,709	14,972,832
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c	Add lines 7a and 7b	3,199,351	3,226,335	3,263,604	3,262,833	2,020,709	14,972,832
8	Public support. (Subtract line 7c from line 6.)						14,184,703

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	5,850,862	5,733,070	6,207,076	6,014,525	5,352,002	29,157,535
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	948,552	899,431	929,068	959,992	1,090,095	4,827,138
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	948,552	899,431	929,068	959,992	1,090,095	4,827,138
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.)	25,901	51,571	19,465	56,870	99,036	252,843
13	Total support. (Add lines 9, 10c, 11, and 12.)	6,825,315	6,684,072	7,155,609	7,031,387	6,541,133	34,237,516
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 2018 (line 8, column (f) divided by line 13, column (f))	15	41 430 %
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	39 800 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	14 100 %
18	Investment income percentage from 2017 Schedule A, Part III, line 17	18	13 430 %

19a 33 1/3% support tests—2018. 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—2017. 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 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>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.</i>	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	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))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)			Yes	No
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?			
b	A family member of a person described in (a) above?		11a	
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		11b	
			11c	

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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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			Yes	No
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).			
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 (explain in Part VI). 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).		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

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 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

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

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	OTHER INCOME - 2014 AMOUNT \$ 25,901 2015 AMOUNT \$ 51,571 2016 AMOUNT \$ 19,465 2017 AMOUNT \$ 56,870 2018 AMOUNT \$ 99,036

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART III, LINES 3 AND 12	THE RECEIPTS FROM THE GAMING ACTIVITIES WERE INCLUDED ON LINE 12 FOR THE 2014 AND 2015 TAX YEAR COLUMNS IN PRIOR YEAR RETURNS THESE AMOUNTS ARE MORE ACCURATELY INCLUDED ON LINE 3 PER THE IRS SCHEDULE A INSTRUCTIONS THE 2014 AND 2015 TAX YEAR COLUMNS HAVE BEEN RESTATED IN SCHEDULE A TO REPORT THE GROSS GAMING REVENUES ON LINE 3 THIS RESTATEMENT HAS NOT SIGNIFICANTLY IMPACTED THE PUBLIC SUPPORT PERCENTAGE

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	1	
2 Aggregate value of contributions to (during year)	0	
3 Aggregate value of grants from (during year)	60,000	
4 Aggregate value at end of year	375,859	

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" on 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 7/25/06, 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, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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 on Form 990, Part VIII, line 1

► \$ 0

(ii) Assets included in Form 990, Part X

► \$ 1,377,755

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 on Form 990, Part VIII, line 1

► \$ 0

b Assets included in Form 990, Part X

► \$ 41,650

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" on 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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
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" on 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	14,317,723	13,817,337	12,537,139	11,916,931	11,798,282
b Contributions	617,275	810,730	803,296	706,909	792,979
c Net investment earnings, gains, and losses	765,509	918,626	1,220,591	-67,731	340,349
d Grants or scholarships	123,223	1,119,945	644,550	-73,100	958,900
e Other expenditures for facilities and programs					
f Administrative expenses	114,965	109,025	99,139	92,070	55,779
g End of year balance	15,462,319	14,317,723	13,817,337	12,537,139	11,916,931

2

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

a

Board designated or quasi-endowment

0 %

b

Permanent endowment

89 730 %

c

Temporarily restricted endowment

10 270 %

The percentages on 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

(i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

No

b

If "Yes" on 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" on 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		309,962		309,962
b Buildings		10,072,525	7,836,061	2,236,464
c Leasehold improvements				
d Equipment		1,643,686	1,498,257	145,429
e Other	41,650	1,064,930	22,768	1,083,812
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				3,775,667

Schedule D (Form 990) 2018

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on 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		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
RELATED PARTY DEPOSIT	72,353	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	72,353	

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' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	7,376,914
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	68,766
b	Donated services and use of facilities	2b	582,779
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	651,545
3	Subtract line 2e from line 1	3	6,725,369
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	138,345
b	Other (Describe in Part XIII)	4b	-470,119
c	Add lines 4a and 4b	4c	-331,774
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	6,393,595

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,934,851
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	582,779
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	460,119
e	Add lines 2a through 2d	2e	1,042,898
3	Subtract line 2e from line 1	3	4,891,953
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	138,345
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	138,345
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	5,030,298

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
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

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

Supplemental Information

Return Reference	Explanation
PART III, LINE 4	THE INTERNATIONAL WILDLIFE MUSEUM IS DEDICATED TO INCREASING KNOWLEDGE AND APPRECIATION FOR WILDLIFE AND THE ROLE THAT HUNTING PLAYS IN CONSERVATION

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE EARNINGS OF THE ENDOWMENT FUNDS ARE TO BE USED FOR THE MISSION PROGRAMS SUCH AS WILDLIFE CONSERVATION EDUCATION PROGRAMS AND SCHOLARSHIPS

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	SCIF EVALUATES ITS UNCERTAIN TAX POSITIONS, IF ANY, ON A CONTINUAL BASIS THROUGH REVIEW OF ITS POLICIES AND PROCEDURES, REVIEW OF ITS REGULAR TAX FILINGS, AND DISCUSSIONS WITH OUTSIDE EXPERTS AS OF JUNE 30, 2019 AND 2018, MANAGEMENT DOES NOT BELIEVE ANY UNCERTAIN TAX POSITIONS EXIST

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	COST OF GOODS SOLD DEDUCTED AGAINST REVENUES -60,802 COST OF FUNDRAISING EVENTS -409,317

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD DEDUCTED AGAINST REVENUES 60,802 COST OF FUNDRAISING EVENTS DEDUCTED A AGAINST REVENUES 409,317 RECOVERY ON UNCOLLECTIBLE PLEDGES -10,000

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

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.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

86-0292099

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of 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 Activities 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
See Add'l Data					
3a Sub-total	0	0			227,400
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			227,400

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.

[illegible]

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 9

3	Enter total number of other organizations or entities	0
---	---	---

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.

[illegible]

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 separately 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, don't 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't 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	SAFARI CLUB INTERNATIONAL FOUNDATION REQUESTS PROGRESS REPORTS AND FINAL REPORTS AS WELL AS PICTURES, VIDEOS, AND AN ARTICLE DETAILING THE COMPLETED PROJECT

Additional Data

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

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICE GRANTS		185,400
NORTH AMERICA	0	0	PROGRAM SERVICE GRANTS		27,000

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICE GRANTS		15,000

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)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	50,000	WIRE			
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	50,000	WIRE			

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)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	45,000	WIRE			
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	20,750	WIRE			

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)
		NORTH AMERICA	PROGRAM SUPPORT	20,000	CHECK			
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	15,000	WIRE			

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)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	10,000	WIRE			
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	9,650	WIRE			

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)
		NORTH AMERICA	PROGRAM SUPPORT	7,000	CHECK			

Part II

Fundraising Events. Complete if the organization answered "Yes" on 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.

Revenue		(a)Event #1 CONVENTION (event type)	(b) Event #2 (event type)	(c)Other events (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts	703,555			703,555
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	703,555			703,555
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	16,929			16,929
	7 Food and beverages	181,673			181,673
	8 Entertainment	13,843			13,843
	9 Other direct expenses	196,872			196,872
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				409,317
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				294,238

Part III

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Direct Expenses	1 Gross revenue			96,600	96,600
	2 Cash prizes				
	3 Noncash 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) ▶				96,600

9 Enter the state(s) in which the organization conducts gaming activities AZ , NV , DC

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☒ No

b If "No," explain _____
THE ORGANIZATION IS EXEMPT FROM LICENSING IN ARIZONA (ARS 13-3302)

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☒ No

b If "Yes," explain _____

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 activity conducted in

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

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

Name ▶ NATHAN BOLT

Address ▶ 4800 W GATES PASS ROAD
TUCSON, AZ 85745

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ DAN BROOKS

Gaming manager compensation ▶ \$ 101,454

Description of services provided ▶ RESPONSIBLE FOR ORGANIZING SWEEPSTAKES HIS TOTAL COMPENSATION IS LISTED ALTHOUGH MANAGING THE GAMING ACTIVITY IS ONLY A SMALL PART OF HIS DUTIES

☐ 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

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Department of the
Treasury
Internal Revenue Service

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public
Inspection

Employer identification number

86-0292099

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 16

3 Enter total number of other organizations listed in the line 1 table 7

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on 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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) UNIVERSITY SCHOLARSHIPS	22	21,600			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Additional Data

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

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
ACOMA BIG GAME TROPHY HUNTS PO BOX 310 PUEBLO OF ACOMA, NM 87034	85-0448136	115 TRIBAL GOVT	18,900				CONSERVATION TAG
AFRICAN CHILDREN'S SCHOOLS 1400 FIELDSPRING DRIVE BAKERSFIELD, CA 93311	81-1490071	501(C)(3)	15,000				AFRICAN SCHOOL PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
ALASKA KENAI PENINSULA CHAPTER PO BOX 2988 SOLDOTNA, AK 996692988	92-0141166	501(C)(4)	16,000				CONSERVATION TAG
BOREN STUART 4049 WEST LAKE ELLWOOD ROAD FLORENCE, WI 541219156	46-2978033		23,848				MI WINTER DEER HABITAT PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
BSA NATIONAL FOUNDATION 1325 WEST WALNUT HILL LANE IRVING, TX 750152079	75-2675978	501(C)(3)	100,000				PROGRAM SUPPORT
DISCOVER MEDIAWORKS INC PO BOX 1807 EAGLE RIVER, WI 54521	39-1648018		60,000				PRODUCTION & MEDIA PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
ESF COLLEGE FOUNDATION INC 1 FORESTRY DRIVE 214 BRAY HALL SYRACUSE, NY 13210	15-6023443	501(C)(3)	55,000				TANZANIA LION PROJECT
FRIENDS OF TRINIDAD STATE COLLEGE PO BOX 392 CRIPPLE CREEK, CO 808130392	86-2068359	501(C)(3)	10,000				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
MICHIGAN DEPARTMENT OF NATURAL RESOURCES PO BOX 30451 LANSING, MI 489097951	38-6000134	115 GOVERNMENT		19,842	INVOICES	GPS COLLARS/SNOWMOBILE	PREDATOR-PREY PROJECT
MICHIGAN INVOLVEMENT COMMITTEE 2852 COLONIAL WAY BLOOMFIELD HILLS, MI 48304	36-4526107	501(C)(3)	20,000				PREDATOR-PREY PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
MID-MICHIGAN CHAPTER PO BOX 486 MOUNT PLEASANT, MI 488040486	94-2608024	501(C)(4)	8,500				PROGRAM SUPPORT
NATIONAL ARCHERY IN THE SCHOOLS PROGRAM INC W4285 LAKE DRIVE WALDO, WI 53093	20-1112663	501(C)(3)	12,000				SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
NAVAJO NATION DEPARTMENT OF FISH & WILDLIFE PO BOX 1480 WINDOW ROCK, AZ 865151480	86-0092335	115 TRIBAL GOVT	16,200				CONSERVATION TAG
SAFARI CLUB FOUNDATION 4800 WEST GATES PASS ROAD TUCSON, AZ 85745	86-0292099	501(C)(3)	23,314				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
SHE HUNTS SKILLS CAMP 5832 NORTH 2ND AVENUE PHOENIX, AZ 850131536	83-2363128	501(C)(3)	10,000				PROGRAM SPONSORSHIP
SOUTHWEST OHIO CHAPTER 8150 AUTUMN LANE WEST CHESTER, OH 450692888	31-1407043	501(C)(4)	11,450				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
SPURWING 1880 HARBOR ISLAND DRIVE FL3 SAN DIEGO, CA 92101	47-3180660		85,000				HUNT SCHOOL PROGRAM
STATE OF VERMONT DEPT OF FISH AND WILDLIFE 1 NATIONAL LIFE DRIVE DAVIS 2 MONTPELIER, VT 056203702	03-6000264	115 GOVERNMENT	42,000				VERMONT MOOSE PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
THE GEOS FOUNDATION 1655 FORT MYER DRIVE SUITE 700 ARLINGTON, VA 222093199	27-2241003	501(C)(3)	50,000				COUNTER POACHING RANGER TRAINING PROGRAM
THE SALVATION ARMY OUTDOORS 5550 PRAIRIE STONE PARKWAY HOFFMAN ESTATES, IL 601923715	36-2167910		30,000				SHOOTING SPORTS EQUIPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
UNIVERSITY OF WYOMING FOUNDATION 222 SOUTH 22 ST LARAMIE, WY 82071	83-0201971	501(C)(3)	20,000				DEER-ELK ECOLOGY PROJECT
UNIVERSITY OF MONTANA 32 CAMPUS DRIVE MISSOULA, MT 59812	81-6001713	115 GOVERNMENT	50,000				ALBERTA YA HA TINDA BULL ELK PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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
UNIVERSITY OF WYOMING 1000 E UNIVERSITY AVE LARAMIE, WY 82071	83-6000331	115 GOVERNMENT	50,000				WYOMING MIGRATION INITIATIVE

Schedule J (Form 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization SAFARI CLUB INTERNATIONAL FOUNDATION	Employer identification number 86-0292099
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Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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 indemnification 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 on 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?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on 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?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on 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?		6b	Yes
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	Yes
8 Were any amounts reported on Form 990, Part VII, paid or accrued 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

For each individual whose compensation must be reported on 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.

[illegible]

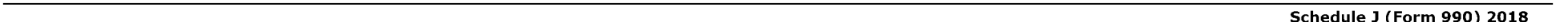
Part III **Supplemental Information**

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
PART I, LINE 3	THE RELATED ORGANIZATION IN SCHEDULE J, SCI, CHECKS THE SAME BOXES AS SCIF

Return Reference	Explanation
PART I, LINE 6	SCI BONUS PAYMENTS ARE MADE BASED ON MEETING ORGANIZATIONAL GOALS AND ARE AT THE DISCRETION OF THE BOARD OF DIRECTORS

Return Reference	Explanation
PART I, LINE 7	SCIF AND SCI BONUS PAYMENTS ARE MADE BASED ON MEETING ORGANIZATIONAL GOALS AND ARE AT THE DISCRETION OF THE BOARD OF DIRECTORS



SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures . .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . . .				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded .	X	3	123,259	FMV
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential . .				
16 Real estate—Commercial . .				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

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

29

0

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

Yes

No

30a

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

Yes

No

31

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

Yes

No

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II Supplemental Information.

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

Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER OF DONORS ARE LISTED
PART I, LINE 32B	ON OCCASION, A THIRD PARTY WILL ASSIST IN SELLING TAXIDERMY ITEMS THE ORGANIZATION ALSO USES A STOCK BROKER TO SELL DONATED STOCKS

SCHEDULE O
(Form 990 or 990-
EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury

Name of the organization

SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number

86-0292099

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	EDUCATION PROJECTS. NUMEROUS PROJECTS CONDUCTED TO EDUCATE HUNTERS AND NON-HUNTERS ABOUT THE ENVIRONMENT ECOSYSTEMS OUTDOOR LIVING SKILLS AND THE CRITICAL ROLE THE HUNTING SPORTSMAN PLAYS IN SCIENTIFIC WILDLIFE MANAGEMENT AND ITS PRODUCTIVE IMPACT ON WILDLIFE POPULATIONS AMERICAN WILDERNESS LEADERSHIP SCHOOL. FACILITIES AND PROGRAMS FOR CONSERVATION AND ENVIRONMENTAL EDUCATION PROGRAMS. SOME SPECIFIC ACCOMPLISHMENTS/HIGHLIGHTS: R3 INITIATIVES - AMERICAN'S HUNTING HERITAGE - IN 2019, THE SAFARI CLUB INTERNATIONAL FOUNDATION AND THE IN TO THE OUTDOORS EDUCATION NETWORK HAS COMPLETED PRODUCING ALL KEY DELIVERABLES OUTLINED IN AN APPROVED US FISH AND WILDLIFE GRANT. THE PROGRAM HAS PRODUCED - FOUR (4), 30-MINUTE YOUTH EDUCATIONAL BROADCAST TELEVISION SHOWS - FORMATTED TO SYNDICATED, COMMERCIAL NETWORK STANDARDS, WITH CUSTOM SCIF/FWS BRANDING - FOUR (4), 27-MINUTE YOUTH EDUCATIONAL BROADCAST TELEVISION SHOWS - FORMATTED TO NATIONAL PBS AND PUBLIC TELEVISION STANDARDS, WITH CUSTOM SCIF/FWS BRANDING - FOUR (4), DIGITAL CHANNEL VERSIONS OF EACH TELEVISION SHOW WITH CUSTOM SCIF/FWS BRANDING - SIXTEEN (16), CLASSROOM EDUCATION VIDEOS ON AMERICA'S CONSERVATION & HUNTING HERITAGE SERIES, WITH RELATED SHOOTING SPORTS THEMES - SIXTEEN (16), NEW TOPIC-SPECIFIC WEB PAGES CREATED AND POPULATED ON INTOTHEOUTDOORS.ORG THAT EACH INCLUDE STUDENT-TEACHER OVERVIEW, "DID YOU KNOW?" TOPICS FACT LIST, TEACHER-STUDENT REFERENCES, CLASSROOM LESSON ACTIVITY LINKS, IMAGE AND LINKS TO HUNTER-ED.COM - TO VIEW THE 21 RELATED WEB PAGES NOW LIVE ON THE WEBSITE HTTP://INTOTHEOUTDOORS.ORG/WILDLIFE-CONSERVATION/. SCHOLARSHIPS - DISTRIBUTED \$11,000 IN COLLEGE SCHOLARSHIPS TO 6 COLLEGE STUDENTS THAT ARE PURSUING DEGREES IN CONSERVATION AND NATURAL RESOURCE MAJORS. ALSO MAINTAINED 6 ENDOWED SCHOLARSHIPS THAT DISTRIBUTED APPROXIMATELY ANOTHER \$10,000 TO STUDENTS AND INITIATED FUND RAISING FOR THE FIRST SCIF CANADA STUDENT SCHOLARSHIP WITH THE UNIVERSITY OF SASKATCHEWAN. THE SALVATION ARMY OUTDOOR (TSA) PARTNERSHIP - ASSISTED IN THE EXPANSION OF CONSERVATION EDUCATION INTO THE SOUTHEASTERN TERRITORIES WHICH COLLECTIVELY, REACHED 10 TSA FACILITIES (CAMPS, KROC CENTER AND CORPS) PROVIDED OVER 13,000 CHILDREN AND THEIR FAMILIES AN EXPERIENCE IN SHOOTING SPORTS, HUNTING OPPORTUNITIES AND CONSERVATION EDUCATION. OUR ASSISTANCE ALSO ALLOWED TSA TO HOLD 4 WORKSHOPS PLUS THEIR OWN AWLS SESSION WHICH TRAINED AND ADDITIONAL 183 YOUTH LEADERS AND MENTORS IN SHOOTING SPORTS AND CONSERVATION EDUCATION. THE BOY SCOUTS OF AMERICA PARTNERSHIP - WE ARE CONTINUING OUR YOUTH PROGRAM PARTNERSHIP THAT EMPHASIZES TEACHING HUNTER EDUCATION AND SHOOTING SPORTS AT THE BSA SUMMIT BECHTEL RESERVE FACILITY HAS BEEN ESTABLISHED. THIS PARTNERSHIP RESULTED IN OVER 3,400 PARTICIPANTS FROM 44 DIFFERENT STATES HAVE COMPLETED THESE COURSES. SINCE THE CONCLUSION OF THE SUMMER SEASON, AN ADDITIONAL 265 PARTICIPANTS HAVE COMPLETED THIS HUNTER EDUCATION INSTRUCTION. CABIN RENOVATION FUND RAISING EXCEEDS \$900,000 - EDUCATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	SABLES AND SCIF EXCEEDED AN INITIAL FUND-RAISING GOAL OF \$870,000 FOR A DUPLEX CABIN RENOV ATION PROJECT THIS PROJECT WAS COMPLETED WITH A CERTIFICATE OF OCCUPANCY BEING ISSUED BY TETON COUNTY, WYOMING ON AUGUST 21, 2019

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B	INTERNATIONAL WILDLIFE MUSEUM SEVERAL NEW EXHIBITS WERE INSTALLED INCLUDING A NEW AQUATIC EXHIBIT AND THE WORLD'S LARGEST PUZZLE "AROUND THE WORLD", WHICH MEASURES 25 FEET LONG AND 5 25 FEET TALL AND HAS 42,000 PIECES GROSS ADMISSIONS IN REVENUE SAW A SLIGHT INCREASE FROM THE PREVIOUS FISCAL YEAR BY APPROXIMATELY \$12,000, DUE IN PART TO THE INSTALLATION AND MARKETING OF THE NEW EXHIBITS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C	WILDLIFE CONSERVATION PROGRAM PROJECTS CONDUCTED WORLDWIDE TO ESTABLISH AND SUPPORT SCIENTIFIC AND BIOLOGICAL STUDIES OF WILDLIFE POPULATIONS IN ORDER TO ASSURE THE LONG-TERM SUSTAINABILITY OF THESE POPULATIONS PROJECTS INCLUDE WILDLIFE POPULATION SURVEYS COLLARING AND MONITORING DNA ANALYSES DISEASE TESTING AND DEVELOPMENT OF SCIENTIFIC PUBLICATIONS, FIELD MANUALS, REPORTS, ETC GRANTS TOTALING \$593,273 WERE MADE TO OTHER EXEMPT ENTITIES TO FURTHER THESE CONSERVATION EFFORTS SOME SPECIFIC ACCOMPLISHMENTS/HIGHLIGHTS - THE CONSERVATION DEPARTMENT DISTRIBUTED OVER \$150,000 TO RESEARCH PROJECTS IN NORTH AMERICA, INCLUDING TO AREAS OF FOCUS THAT INCLUDE MULE DEER ECOLOGY AND MIGRATIONS IN THE WESTERN U S AND GRIZZLY BEAR SURVEYS IN BRITISH COLUMBIA - CONSERVATION IDENTIFIED SEVERAL KEY FOCAL AREAS GOING FORWARD, INCLUDING PUTTING RESOURCES INTO AFRICAN LEOPARD CONSERVATION AND CHRONIC WASTING DISEASE MANAGEMENT - WE CONTRIBUTED \$25,000 IN MATCHING GRANTS TO SCI CHAPTERS OR CONSERVATION PROJECTS SUPPORTED BY CHAPTERS, THEREBY INCREASING THE IMPACT OF CHAPTER CONTRIBUTIONS ACROSS THE AREA COVERED BY THE CHAPTER NETWORK - WE HOSTED OUR 17TH AFRICAN WILDLIFE CONSULTATIVE FORUM IN VICTORIA FALLS, ZIMBABWE IN NOVEMBER 2019 THIS UNIQUE GATHERING OF GOVERNMENTS, PROFESSIONAL HUNTING ASSOCIATIONS, COMMUNITY BASED NATURAL RESOURCE MANAGEMENT ORGANIZATIONS, AND NGOS INCLUDED DELEGATIONS FROM 11 AFRICAN COUNTRIES AND THE UNITED STATES AND A TOTAL OF NEARLY 110 TOTAL ATTENDEES WE ALSO HAD PARTICIPATION BY THE EUROPEAN COMMISSION VIA TELECONFERENCE - WE CONTINUED TO BE ACTIVE IN THE INTERNATIONAL POLICY ARENA, INCLUDING THE CONVENTION ON INTERNATIONAL TRADE IN ENDANGERED SPECIES (CITES), THE INTERNATIONAL UNION FOR THE CONSERVATION OF NATURE (IUCN), THE ASSOCIATION OF FISH AND WILDLIFE AGENCIES, AND THE WILDLIFE SOCIETY WE SENT A STRONG DELEGATION TO THE 19TH CITES CONFERENCE OF THE PARTIES IN GENEVA IN AUGUST 2019

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	KENDIS MUSCHID AND BALLARD SPAHR HAD A FAMILY RELATIONSHIP

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PRIOR YEAR UNCOLLECTIBLE PLEDGE RECOVERY 10,000

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS FOR THE AUDIT OR ITS SELECTION PROCESS FOR INDEPENDENT AUDITORS DURING THE YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
SAFARI CLUB INTERNATIONAL FOUNDATION

Employer identification number
86-0292099

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)SAFARI CLUB INTERNATIONAL 4800 WEST GATES PASS ROAD TUCSON, AZ 85745 86-0974183	HUNTING ADVOCACY	AZ	501(C)(4)		N/A		No
(2)SAFARI CLUB INTERNATIONAL CONSERVATION FUND 4800 WEST GATES PASS ROAD TUCSON, AZ 85745 23-7222137	INACTIVE	AZ	501(C)(3)		SCIF		No

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

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

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

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

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

1a

No

b Gift, grant, or capital contribution to related organization(s)

1b

No

c Gift, grant, or capital contribution from related organization(s)

1c

Yes

d Loans or loan guarantees to or for related organization(s)

1d

No

e Loans or loan guarantees by related organization(s)

1e

Yes

f Dividends from related organization(s)

1f

No

g Sale of assets to related organization(s)

1g

No

h Purchase of assets from related organization(s)

1h

No

i Exchange of assets with related organization(s)

1i

No

j Lease of facilities, equipment, or other assets to related organization(s)

1j

Yes

k Lease of facilities, equipment, or other assets from related organization(s)

1k

No

l Performance of services or membership or fundraising solicitations for related organization(s)

1l

No

m Performance of services or membership or fundraising solicitations by related organization(s)

1m

No

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1n

Yes

o Sharing of paid employees with related organization(s)

1o

Yes

p Reimbursement paid to related organization(s) for expenses

1p

Yes

q Reimbursement paid by related organization(s) for expenses

1q

Yes

r Other transfer of cash or property to related organization(s)

1r

No

s Other transfer of cash or property from related organization(s)

1s

Yes

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

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 86-0292099

Name: SAFARI CLUB INTERNATIONAL FOUNDATION

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization		(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	SAFARI CLUB INTERNATIONAL	C	187,642	FMV
(1)	SAFARI CLUB INTERNATIONAL	J	542,327	FMV
(2)	SAFARI CLUB INTERNATIONAL	O	582,779	FMV
(3)	SAFARI CLUB INTERNATIONAL	P	220,620	FMV
(4)	SAFARI CLUB INTERNATIONAL	Q	254,968	FMV
(5)	SAFARI CLUB INTERNATIONAL	S	1,529,577	FMV
(6)	SAFARI CLUB INTERNATIONAL	E	220,343	FMV