

COMMITTEE ON NATURAL RESOURCES
Disclosure Form
As required by and provided for in House Rule XI, clause 2(g) and
the Rules of the Committee on Natural Resources

July 28, 2011

- H.R. 50 (Young), Multinational Species Conservation Funds Reauthorization Act
- H.R. 1760 (Miller), Great Ape Conservation Reauthorization Amendments Act
- H.R. 1761 (Pierluisi), Marine Turtle Conservation Reauthorization Act

For Individuals:

1. Name:
2. Address:
3. Email Address:
4. Phone Number:

For Witnesses Representing Organizations:

1. Name: Tara Stoinski
2. Name of Organization(s) You are Representing at the Hearing:
The Dian Fossey Gorilla Fund International
3. Business Address: 
4. Business Email Address: 
5. Business Phone Number: 404 624 5826

Name/Organization Tara Stoinski/The Dian Fossey Gorilla Fund
Title/Date of Hearing HR 1760 Great Ape Conservation Reauthorization Amendments Act, July 28, 2011

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Master's in Zoology from Oxford University; PhD in Psychology from the Georgia Institute of Technology.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Chair, Association of Zoos and Aquariums (AZA) Ape Taxon Advisory Group; Executive Committee, World Conservation Union (IUCN) Primate Specialist Group's Section on Great Apes; Vice Chair, AZA Field Conservation Committee; Conservation Advisor, AZA Gorilla Species Survival Plan;

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

In my positions with The Dian Fossey Gorilla Fund International and Zoo Atlanta, I have worked on issues related to primate conservation for the last two decades. I have been involved in the study of gorillas since 1995.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and/or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

USFWS Great Ape Conservation Act; 2009: \$352,185
USFWS Great Ape Conservation Act; 2008: \$42,267; \$97,006

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Name/Organization Tara Stoinski/The Dian Fossey Gorilla Fund

Title/Date of Hearing HR 1760 Great Ape Conservation Reauthorization Amendments Act, July 28, 2011

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

NA

h. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and /or other agencies invited) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

2005: USFWS, \$51,520

2006: USFWS, \$17,316

2007: USFWS, \$100,000

2008: USFWS, \$28,727, \$298,845, \$199,981, \$42,267, \$97,006

+

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

None.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None.

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2009** calendar year, or tax year beginning **10/1/2009**, and ending **9/30/2010**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization: Dian Fossey Gorilla Fund International, Inc.	D Employer identification number: 52-1118866
		Doing Business As	E Telephone number: (404) 624-5881
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 800 Cherokee Avenue, SE	G Gross receipts \$: 5,856,575
City or town, state or country, and ZIP + 4: Atlanta GA 30315		F Name and address of principal officer: Clare Richardson 800 Cherokee Avenue, SE, Atlanta, GA 30315	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
J Website: ▶ www.gorillafund.org		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1978	M State of legal domicile: GA

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: See attached statement		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	30
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30
	5 Total number of employees (Part V, line 2a)	5	12
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	158
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	4,929,060	5,715,372
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,818	2,303
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	71,873	129,825
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,004,751	5,847,500
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		217,604
	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)	1,659,471	1,536,371
	16a Professional fundraising fees (Part IX, column (A), line 11e)	142,319	63,567
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 345,142		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	3,235,668	3,305,453
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,037,458	5,122,995	
19 Revenue less expenses. Subtract line 18 from line 12	-32,707	724,505	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,679,919	End of Year 2,494,805
	21 Total liabilities (Part X, line 26)	1,186,397	1,276,778
	22 Net assets or fund balances. Subtract line 21 from line 20	493,522	1,218,027

Part II Signature Block

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

Sign Here ▶ *Clare Richardson* Signature of officer Date **July 5, 2011**
 ▶ **CLARE RICHARDSON, PRESIDENT & CEO** Type or print name and title

Paid Preparer's Use Only	Preparer's signature: <i>Terry Gordon</i>	Date: 7/5/2011	Check if self-employed: <input checked="" type="checkbox"/>	Preparer's identifying number (see instructions): P01274001
	Firm's name (or yours if self-employed), address, and ZIP + 4: Terry Gordon & Co., CPA's 40 Technology Pkwy South, Suite 250, Norcross, GA 30092	EIN: ▶ 58-1499257	Phone no.: ▶ (770) 449-4921	

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission. See attached statement.

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 [X] 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 [X] No If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 1,015,990 including grants of \$ 210,060) (Revenue \$ 762,106) The Karisoke Research Center was founded by Dian Fossey 1967. Her driving passion was to save mountain gorillas from extinction. Since her untimely death in 1985, the organization that carries Dian's name, has worked tirelessly to continue and develop her work at Karisoke in Rwanda and across the border in Eastern DRC. Because of her work - and those who have come after her - Karisoke can claim "a key role" in one of the very few global conservation success stories. Thanks to our national and international scientists, our experienced trackers, our patrols, and the local communities we both support and draw on, the mountain gorilla is the only great ape population that is increasing. Since the mid 1980s, the Virunga mountain gorillas have almost doubled from 250 to 480. But this success is fragile and demands daily anti-poaching and monitoring patrols and cross border patrols with Rwanda, DRCongo and Uganda national park staff. We impact the lives of 600 Rwandan family members by employing 120 local people as trackers for patrols, as scientists and teachers, and support for health workers, our scientific research involves collaborations with science and academic institutions around the world.

4b (Code:) (Expenses \$ 1,914,957 including grants of \$) (Revenue \$ 2,206,331) After eleven years of continuous field work in DRC, in a 27,000 sq mile landscape, creating a corridor community managed reserves between the Maiko and Kahuzi Biega National Parks, we have identified five key isolated populations of Grauer's gorillas, built local capacity, and established a model for a community-based approach to protect forest habitat. This has supported 350 Congolese nationals working in the reserves. 2 community managed reserves have official government recognition and are in the process of not only habituating two groups of gorillas, but assessing the levels of biodiversity and measuring the extent and quality of the rainforest in an effort to gain carbon offset funding. 7 other reserves are progressing towards official status and are monitoring and protecting Grauer's gorilla populations. The Tayna Center for Conservation Biology, the first conservation university in Congo has approximately 600 students, the radio station operated by students is sending regular conservation updates and the schools and clinics in the reserves are caring for 6 orphaned infant gorillas and awaiting the arrival of 6 more. Scientists and field staff will monitor them as they form a group ready for eventual release back into their rainforest habitat.

4c (Code:) (Expenses \$ 808,153 including grants of \$) (Revenue \$ 385,583) In both Rwanda and the Democratic Republic of Congo (DRC) we are committed to training the next generations to become stewards of their biodiversity and bringing awareness to primary and secondary schools of the scope and richness of their natural heritage and the charismatic species like gorillas who share the ecosystem. Approx 2,000 primary school children were served and thousands more joined as Youth Action for the Environment Clubs in 6 secondary schools. A strong program with National University in Rwanda served 200 students in formal field science studies, how to conduct research and education about birds, mammals, insects and primates. Several graduates are now employed at the Karisoke Research Center and are obtaining advanced degrees. In DRC many of the schools we support are in extremely remote locations so providing financial support for teachers, rehabilitating school buildings and supplying curriculum enhancements is crucial. The Fossey Fund website www.gorillafund.org is our main global outreach to inform and engage people in Africa and around the world by showing our work, sharing our stories and giving ideas of ways in which to help. Approximately 265,000 people visit our website each year.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 636,385 including grants of \$) (Revenue \$ 120,923)

4e Total program service expenses 4,375,485

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; 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		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• 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.		
• 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.		
• 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.		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
• 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? If "Yes," complete Schedule D, Part X.		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
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	X	
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	X	
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		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a	16	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a	12	
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 this return. (see instructions)		
	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
	4a	X	
b	If "Yes," enter the name of the foreign country: ▶ See Attached Statement See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	4b		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	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?		X
	6a		X
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?		X
	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
	8		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
	9b		X
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	

Part VI

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

Section A. Governing Body and Management

- 1a Enter the number of voting members of the governing body
1b Enter the number of voting members that 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?
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?
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?
5 Did the organization become aware during the year of a material diversion of the organization's assets?
6 Does the organization have members or stockholders?
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
a The governing body?
b Each committee with authority to act on behalf of the governing body?
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

Table with columns 1a, 1b, and Yes/No for questions 2 through 9a. Values include 30 for 1a and 1b, and 'X' marks for various 'No' responses.

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

- 10a Does the organization have local chapters, branches, or affiliates?
10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.
12a Does the organization have a written conflict of interest policy? If "No," go to line 13.
12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.
13 Does the organization have a written whistleblower policy?
14 Does the organization have a written document retention and destruction policy?
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.
15b Other officers or key employees of the organization. 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?
16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Table with columns Yes/No for questions 10a through 16b. Values include 'X' marks for various 'No' responses.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed GA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Clare Richardson, 800 Cherokee Ave., Atlanta, GA 30315 (404) 624-5881

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
Greg Hudson Board member	2	X								
Christian & Sibi Bale Board member	2	X								
Oliver Baltuch Board member	2	X								
Gilbert K. Boese Board member	2	X								
Mike Crowther Board member	2	X								
Lawrence Ellison Board member	2	X								
Nick Faust Secretary	2	X								
Glenn L. Felner Board member	2	X								
Wayne Ferguson Board member	2	X								
Lynn Flanders Treasurer	2	X								
William R. Foster Committee Chair	2	X								
Gil Grosvenor Board member	2	X								
Terry Harps Chair	2	X								
Judith C. Harris Board member	2	X								
R. Charles Henn, Jr. Board member	2	X								
Richard A. Horder Past Chair	2	X								

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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			
John Mellot Board member	2	X								
Manuel A. Mollinedo Board member	2	X								
Ruth Musgrave Board member	2	X								
Jackie Ogden, PhD Board member	2	X								
Craig Piper Board member	2	X								
Sandy Price Board member	2	X								
Rebecca Rooney Board member	2	X								
Andy Serkis Board member	2	X								
Janice Gleason Skow Vice Chair	2	X								
Gary G. Strieker Board member	2	X								
Daniel K. Thorne Board member	2	X								
Joanne Truffleman Vice Chair	2	X								
Romain Murenzi Board member	2	X								
1b Total							238,343			

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

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

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.

(A) Name and business address	(B) Description of services	(C) Compensation
Juan Carlos Bonilla PO Box 6149, Kigali,	VP-Africa Programs	159,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	54,932			
	1b Membership dues	334,510			
	1c Fundraising events				
	1d Related organizations				
	1e Government grants (contributions)	210,060			
	1f All other contributions, gifts, grants, and similar amounts not included above	5,115,870			
	g Noncash contributions included in lines 1a-1f: \$	501,377	5,715,372		
h Total. Add lines 1a-1f					
Program Service Revenue	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,303		
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross Rents	(i) Real	(ii) Personal		
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
	8a Gross income from fundraising events (not including \$ 107,340 of contributions reported on line 1c). See Part IV, line 18.	a	125,933		
	b Less: direct expenses	b		125,933	
	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19.	a			
b Less: direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a	12,809			
b Less: cost of goods sold	b	9,075			
c Net income or (loss) from sales of inventory			3,734		
Miscellaneous Revenue		Business Code			
11a rental of mailing lists		900099	158		158
b					
c					
d All other revenue			158		
e Total. Add lines 11a-11d			5,847,500		158
12 Total revenue. See instructions.					

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	217,604	217,604		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	115,010	80,507	11,501	23,002
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	1,154,189	1,008,399	51,400	94,390
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,360	3,536	854	970
9 Other employee benefits	106,151	75,301	24,700	6,150
10 Payroll taxes	155,661	139,761	6,075	9,825
11 Fees for services (non-employees):				
a Management	359,318	352,838	6,480	
b Legal	880		880	
c Accounting	36,974		36,974	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	63,567			63,567
f Investment management fees	900		900	
g Other	230,700	230,700		
12 Advertising and promotion	27,899	22,930		4,969
13 Office expenses	54,892	48,431	4,235	2,226
14 Information technology				
15 Royalties				
16 Occupancy	232,618	230,340	93	2,185
17 Travel	181,954	180,275	248	1,431
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	48,931	44,721	4,210	
20 Interest	22,441		22,441	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	37,467	6,667	30,800	
23 Insurance	23,618	10,577	13,041	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Bank Charges	16,407	3,754	12,646	7
b Contributions				
c Dues and subscriptions	14,668	12,975	275	1,418
d Education and training	84,857	84,457	400	
e Equipment	97,701	97,701		
f All other expenses see attached schedule	1,833,228	1,524,011	174,215	135,002
25 Total functional expenses. Add lines 1 through 24f	5,122,995	4,375,485	402,368	345,142
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

Assets

Liabilities

Net Assets or Fund Balances

		(A)		(B)
		Beginning of year		End of year
		609,560	1	519,716
			2	220,500
		338,414	3	1,092,801
		113,848	4	59,631
			5	
			6	
			7	
		10,152	8	14,236
		31,830	9	15,910
			10	
			11	
			12	
			13	
			14	
		441,717	15	475,080
		1,679,919	16	2,494,805
		219,937	17	237,799
			18	
			19	10,000
			20	
			21	
			22	
			23	
			24	
		904,160	25	1,028,979
		1,186,397	26	1,276,778
			27	
		-307,498	27	-162,435
		801,020	28	1,380,462
			29	
			30	
			31	
			32	
		493,522	33	1,218,027
		1,679,919	34	2,494,805

- 1 Cash—non-interest-bearing
- 2 Savings and temporary cash investments
- 3 Pledges and grants receivable, net
- 4 Accounts receivable, net
- 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L
- 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L
- 7 Notes and loans receivable, net
- 8 Inventories for sale or use
- 9 Prepaid expenses and deferred charges
- 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D
- 10b Less: accumulated depreciation
- 11 Investments—publicly traded securities
- 12 Investments—other securities. See Part IV, line 11
- 13 Investments—program-related. See Part IV, line 11
- 14 Intangible assets
- 15 Other assets. See Part IV, line 11
- 16 Total assets. Add lines 1 through 15 (must equal line 34)

- 17 Accounts payable and accrued expenses
- 18 Grants payable
- 19 Deferred revenue
- 20 Tax-exempt bond liabilities
- 21 Escrow or custodial account liability. Complete Part IV of Schedule D
- 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L
- 23 Secured mortgages and notes payable to unrelated third parties
- 24 Unsecured notes and loans payable to unrelated third parties
- 25 Other liabilities. Complete Part X of Schedule D
- 26 Total liabilities. Add lines 17 through 25

- 27 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34.
- 28 Unrestricted net assets
- 29 Temporarily restricted net assets
- 29 Permanently restricted net assets
- 30 Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.
- 30 Capital stock or trust principal, or current funds
- 31 Paid-in or capital surplus, or land, building, or equipment fund
- 32 Retained earnings, endowment, accumulated income, or other funds
- 33 Total net assets or fund balances
- 34 Total liabilities and net assets/fund balances

Part XI Financial Statements and Reporting

- 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?
- b Were the organization's financial statements audited by an independent accountant?
- 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.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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?
- 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.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return Dian Fossey Gorilla Fund International, Inc.	Business or activity to which this form relates 990	Identifying number 52-1118866
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562.	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	17,048

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	20,420
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	37,468
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	▶ 23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written?
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use.
26 Property used more than 50% in a qualified business use: Net Community 6/19/2009 100.00% 102,098 102,098 5 S/L - HY 20,420
27 Property used 50% or less in a qualified business use: S/L - S/L - S/L - 28 20,420
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year
34 Was the vehicle available for personal use during off-duty hours?
35 Was the vehicle used primarily by a more than 5% owner or related person?
36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees?
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)

Part VI

Amortization

42 Amortization of costs that begins during your 2009 tax year (see instructions):
43 Amortization of costs that began before your 2009 tax year
44 Total. Add amounts in column (f). See the instructions for where to report

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization Dian Fossey Gorilla Fund International, Inc.	Employer identification number 52-1118866
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10.					12	
12 Gross receipts from related activities, etc. (see instructions)						
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. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2009. 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. <input type="checkbox"/>		
b 33 1/3% support test—2008. 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. <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
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. <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,271,259	3,277,623	3,796,743	4,510,740	5,841,305	20,697,670
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	9,412	6,061	10,117	7,539	12,809	45,938
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	3,280,671	3,283,684	3,806,860	4,518,279	5,854,114	20,743,608
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						20,743,608

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	3,280,671	3,283,684	3,806,860	4,518,279	5,854,114	20,743,608
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		30,824	13,486	3,818	2,303	50,431
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b		30,824	13,486	3,818	2,303	50,431
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					158	158
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	3,280,671	3,314,508	3,820,346	4,522,097	5,856,575	20,794,197
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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99.76%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.72%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.24%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.28%

- 19a **33 1/3% support tests—2009.** 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—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Area with horizontal dashed lines for supplemental information.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

Name of the organization <u>Dian Fossey Gorilla Fund International, Inc.</u>	Employer identification number <u>52-1118866</u>
---	---

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
 Dian Fossey Gorilla Fund International, Inc.

Employer identification number
 52-1118866

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
20	Marketing and Printing Services	\$ 101,733	9/1/2010
23	Trip used as incentive to get people on website	\$ 15,230	12/1/2009
45	Legal Services	\$ 68,732	9/1/2010
55	Office Space, Utilities, and IT Support	\$ 80,396	9/1/2010
56	Administrative Services	\$ 51,549	9/1/2010
57	Airfare, Photo Services and Printing	\$ 50,000	9/1/2010

Name of organization

Dian Fossey Gorilla Fund International, Inc.

Employer identification number

52-1118866

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
58	Development and Fundraising Services	\$ 23,200	9/1/2010
59	Accounting and Audit Services	\$ 18,862	3/1/2010
60	Artwork for Silent Auction	\$ 16,000	9/1/2010
61	Travel Expenses to Attend Board Meetings	\$ 10,500	9/1/2010
62	Warehouse Space for Special Event	\$ 10,000	9/1/2010
63	Public Appearances	\$ 10,000	9/1/2010

Name of organization
 Dian Fossey Gorilla Fund International, Inc.

Employer identification number
 52-1118866

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
64	Items for Silent Auction	\$ 5,000	9/1/2010
26	Medical Supplies and Other Items	\$ 5,292	9/1/2010
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

- ▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
- ▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization: Dian Fossey Gorilla Fund International, Inc. Employer identification number: 52-1118866

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
 - Preservation of land for public use (e.g., recreation or pleasure)
 - Protection of natural habitat
 - Preservation of open space
 - Preservation of an historically important land area
 - Preservation of a certified historic structure
- 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶
- 4 Number of states where property subject to conservation easement is located ▶
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$
 - (ii) Assets included in Form 990, Part X ▶ \$
- 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 relating to these items:
 - a Revenues included in Form 990, Part VIII, line 1 ▶ \$
 - b Assets included in Form 990, Part X ▶ \$

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|----|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

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

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

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶
 - b Permanent endowment ▶
 - c Term endowment ▶
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| 3a(i) unrelated organizations | | |
| 3a(ii) related organizations | | |
| 3b | | |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,111		1,111
b Buildings				
c Leasehold improvements				
d Equipment		310,449	292,936	17,513
e Other		133,673	55,366	78,307
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶				96,931

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

Part IV

Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

Area with horizontal dotted lines for supplemental information.

Dian Fossey Gorilla Fund International, Inc.
 Schedule G (Form 990 or 990-EZ) 2009

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		ising - Gorillas In Ou		NONE	(add col. (a) through	
		(event type)	(event type)	(total number)	col. (c))	
Revenue	1	Gross receipts	233,273		233,273	
	2	Less: Charitable contributions	107,340		107,340	
	3	Gross income (line 1 minus line 2)	125,933		125,933	
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through 9 in column (d)				125,933
	11	Net income summary. Combine line 3, column (d), and line 10				

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Combine line 1, column d, and line 7			

- 9 Enter the state(s) in which the organization operates gaming activities: _____
- a Is the organization licensed to operate gaming activities in each of these states? _____
- b If "No," explain: _____
- 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____
- b If "Yes," explain: _____
- 11 Does the organization operate gaming activities with nonmembers? _____
- 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
9a		
10a		
11		
12		

Dian Fossey Gorilla Fund International, Inc.

Schedule G (Form 990 or 990-EZ) 2009

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

13a

13b

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

Name ▶

Address ▶

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

- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer

Employee

Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Yes No

15a

17a

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2009

**Open To Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Dian Fossey Gorilla Fund International, Inc.

Employer identification number
52-1118866

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	2	16,750	appraised value
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....)		See Attached Statement		
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

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

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

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

b If "Yes," describe in Part II.

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

	Yes	No
30a		
31		X
32a		X
33		

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization
Dian Fossey Gorilla Fund International, Inc.

Employer identification number
52-1118866

Form 990, Part III, Line 4d: Program Service Expenses: 75,918, Grants and allocations: 0,

Revenue: 115,408. In both Rwanda and DR Congo these transborder programs are conducted in

collaboration with the ministries of health & education. These programs reduce the threat of

disease transmission between humans and gorillas and enhance the public health communities

close to protected areas. By delivering hygiene, public health and conservation education,

rehabilitating rural health clinics, providing access to clean water, nutrition programs and

small scale livelihood programs the Fossey Fund helps local people work toward economic

independence. 17,757 people were served in Rwanda and approximately 15,000 in DR Congo.

Form 990, Part III, Line 4d: Program Service Expenses: 531,606, Grants and allocations: 0,

Revenue: 5,515. The Africa HQ provides leadership and coordination for all programs in Rwanda

and DR Congo. In addition HQ staff provides technical assistance and capacity building in

accounting, data collection, report and analysis and also grants compliance. The residence of

the VP Africa programs welcomes delegates, partners, and visitors, including board members and

the VP acts as spokesperson and liaison with various diplomatic missions.

Form 990, Part III, Line 4d: Program Service Expenses: 28,861, Grants and allocations: 0,

Revenue: 0. The science program provides coordinates scientific and program partnerships,

writes grants to support scientific and conservation activities, conducts research, produces

publications and manages the 44 year Karisoke gorilla databases. Notable recent achievements

include: 15 scientific papers produced by use of long-term demographic databases, edited

volume on gorilla conservation, graduate and post doctoral student oversight, ~ \$800K in

grants for science and conservation activities.

Part V, Line 4b (990) - Authority over a Financial Account in a Foreign Country

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)?
If "Yes," enter the name of the foreign country.

1	Rwanda
2	Congo (Democratic Republic)
3	
4	
5	
6	
7	
8	
9	
10	

Part I, Lines 25-28 (Sch M (990)) - Other Types of Property

	Non-Cash Contribution	Description	Number of Contributions	Revenues Reported on 990, Pt VIII, Line 1g	Method of Determining Revenues
1	X	marketing & printing services	101,733	101,733	service provider's valuation
2	X	office space, IT support, utilities	80,396	80,396	service provider's valuation
3	X	legal services	68,732	68,732	service provider's valuation
4	X	transportation, equip, accomod	51,549	51,549	service provider's valuation
5	X	airfare	50,000	50,000	service provider's valuation
6	X	development & fundraising ser	23,200	23,200	service provider's valuation
7	X	accounting services	18,863	18,863	service provider's valuation
8	X	gifts for silent auction	4,945	4,945	service provider's valuation
9	X	trip incentive on website	15,230	15,230	service provider's valuation
10	X	donated travel expenses	10,500	10,500	service provider's valuation
11	X	warehouse space for special e	10,000	10,000	service provider's valuation
12	X	public appearances	10,000	10,000	service provider's valuation
13	X	medical supplies & other items	5,293	5,293	service provider's valuation
14	X	photography	5,000	5,000	service provider's valuation
15	X	items for silent auction	5,000	5,000	service provider's valuation
16	X	catering & decorating services	4,395	4,395	service provider's valuation
17	X	donated travel expenses	3,285	3,285	service provider's valuation
18	X	direct mail consulting services	3,000	3,000	service provider's valuation
19	X	items for silent auction	3,000	3,000	service provider's valuation
20	X	items for silent auction	2,500	2,500	service provider's valuation
21	X	donated travel expenses	1,995	1,995	service provider's valuation
22	X	donated travel expenses	1,114	1,114	service provider's valuation
23	X	items for silent auction	1,000	1,000	service provider's valuation
24	X	items for silent auction	1,000	1,000	service provider's valuation
25	X	items for silent auction	1,000	1,000	service provider's valuation
26	X	items for silent auction	500	500	service provider's valuation
27	X	free shipping	400	400	service provider's valuation
28	X	donation for dinner	356	355	service provider's valuation
29	X	donation for dinner	222	222	service provider's valuation
30	X	computer for GRACE Center	200	200	service provider's valuation
31	X	Paint donated to paint Volunte	180	180	service provider's valuation
32	X	coffee bsaket for sweepstakes	41	40	service provider's valuation
33					
34					

Dian Fossey Gorilla Fund International, Inc.
Statement of Functional Expenses
Detail of line 24f, Part IX

EIN: 52-1118866

QuickBooks Category	Tax Category	Fundraising & Development	Mgmt & General	Program Services	Total
Field supplies	program supplies			185,178	185,178
Lab supplies	program supplies			1,667	1,667
Meals and entertainment	meals & entertainment	45	225	74,618	74,888
Photocopying and photogr	Photocopying & photography	25,490	473	56,636	82,599
Postage and shipping	postage & shipping	86,506	1,021	96,425	183,952
Program supplies	program supplies			435,148	435,148
Taxes, licenses and permi	taxes, licenses & permits	6,381		28,163	34,544
Telephone and internet	telephone and internet	380	5,305	78,272	83,957
Vehicle Costs	vehicle costs			120,130	120,130
Indirect operating costs	indirect operating costs		-11,040	85,974	74,934
in-kind expenses	in-kind expenses	16,200	174,920	310,256	501,376
Other direct costs			99	51,544	51,643
Bad debt expense			3,212		3,212
Total		135,002	174,215	1,524,011	1,833,228

Dian Fossey Gorilla Fund International, Inc.
Mission Statement
For the Year Ended September 30, 2010
EIN: 58-1118866

Form 990, Part 1 and Part III, Line 1:

The Dian Fossey Gorilla Fund International, Inc. is dedicated to the conservation of gorillas and their habitats in Africa. We are committed to promoting continued research on their threatened ecosystems and education about their relevance to the world in which we live.

In collaboration with government agencies and other international partners, we also provide assistance to local communities through education, health, training and economic development initiatives.

Dian Fossye Gorilla Fund International, Inc.
 Statement of Functional Expenses
 Detail of line 24f, Part IX
 EIN: 52-1118866

QuickBooks Category	Tax Category	Fundraising & Development	Mgmt & General	Program Services	Total
Field supplies	program supplies	0	0	211,090	211,090
Lab supplies	program supplies	0	0	849	849
Meals and entertainment	meals & entertainment	76	665	78,041	78,782
Photocopying and photogr	Photocopying & photography	33,308	2	67,096	100,406
Postage and shipping	postage & shipping	145,682	890	149,770	296,342
Program supplies	program supplies	1,705	-23,554	261,673	239,824
Taxes, licenses and permit	taxes, licenses & permits	6,352	0	36,140	42,492
Telephone and internet	telephone and internet	455	6,761	99,200	106,416
Vehicle Costs	vehicle costs	0	1,020	172,550	173,570
Indirect operating costs	indirect operating costs	0	-104,884	107,700	2,816
in-kind expenses	in-kind expenses	0	231,268	255,085	486,353
Total		187,578	112,168	1,439,194	1,738,940

Dian Fossey Gorilla Fund International, Inc.
Mission Statement
For Year Ended September 30, 2009
EIN: 52-118666

Form 990, Part I, Line 1 and Part III, Line 1

The Dian Fossey Gorilla Fund International, Inc. is dedicated to the conservation and protection of gorillas and their habitats in Africa. We are committed to promoting continued research on their threatened ecosystems and education about their relevance to the world in which we live.

In collaboration with government agencies and other international partners, we also provide assistance to local communities through education, health, training and economic development initiatives.

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box.
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization	Employer Identification number
	Dian Fossey Gorilla Fund International	52-1118866
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions.	
	800 Cherokee Avenue, SE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Atlanta	GA 30315

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ Clare Richardson 800 Cherokee Ave. Atlanta GA 30315

Telephone No. ▶ (404) 624-5881 FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box.
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box. . If it is for part of the group, check this box. and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 5/15/2011 to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning 10/1/2009 and ending 9/30/2010

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3 a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print <small>File by the extended due date for filing your return. See instructions.</small>	Name of exempt organization Dian Fossey Gorilla Fund International	Employer identification number 52-1118866
	Number, street, and room or suite no. If a P.O. box, see instructions. 800 Cherokee Avenue, SE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Atlanta	
	GA	30315

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **Clare Richardson**
Telephone No. **(404) 624-5881** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **8/15/2012**

5 For calendar year _____, or other tax year beginning **10/1/2010**, and ending **9/30/2011**

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension Additional time is needed to file a complete and accurate tax return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ 0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **Lynn S. Burkett** Title **CPA** Date **5/12/11**

Return of Organization Exempt From Income Tax

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

A For the 2008 calendar year, or tax year beginning 10/1/2008, and ending 9/30/2009

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization Dian Fossey Gorilla Fund International
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
800 Cherokee Avenue, SE
 City or town, state or country, and ZIP + 4
Atlanta GA 30315

D Employer identification number
52-1118866

E Telephone number
(404) 624-5881

G Gross receipts \$ 5,008,448

F Name and address of principal officer:
Clare Richardson 800 Cherokee Avenue, SE, Atlanta, GA 30315

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c) (3) ◀ (Insert no.) 4947(a)(1) or 527

J Website: www.gorillafund.org

K Type of organization: Corporation Trust Association Other ▶

L Year of formation: 1978 **M** State of legal domicile: GA

H(c) Group exemption number ▶ _____

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>See attached statement</u>		
	2 Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	<u>3</u>	<u>27</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	<u>4</u>	<u>27</u>
	5 Total number of employees (Part V, line 2a)	<u>5</u>	<u>10</u>
	6 Total number of volunteers (estimate if necessary)	<u>6</u>	
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	<u>7a</u>	<u>0</u>
b Net unrelated business taxable income from Form 990-T, line 34	<u>7b</u>	<u>0</u>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	<u>4,187,150</u>	<u>4,929,060</u>
	9 Program service revenue (Part VIII, line 2g)	<u>0</u>	<u>0</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>13,486</u>	<u>3,818</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>2,205</u>	<u>71,873</u>
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>4,202,841</u>	<u>5,004,751</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u>0</u>	<u>0</u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)	<u>0</u>	<u>0</u>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>1,489,156</u>	<u>1,659,471</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e)	<u>90,666</u>	<u>142,319</u>
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>444,608</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	<u>2,381,308</u>	<u>3,235,668</u>
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>3,961,130</u>	<u>5,037,458</u>	
19 Revenue less expenses. Subtract line 18 from line 12	<u>241,711</u>	<u>-32,707</u>	
Net Assets or Fund Balances	20 Total assets (Part X, line 18)	<u>1,163,661</u>	<u>1,679,919</u>
	21 Total liabilities (Part X, line 26)	<u>637,432</u>	<u>1,186,397</u>
	22 Net assets or fund balances. Subtract line 21 from line 20	<u>526,229</u>	<u>493,522</u>

Part II Signature Block

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

Sign Here
 Signature of officer: Clare Richardson Date: 4/20/10
 Type or print name and title: CLARE RICHARDSON PRESIDENT

Paid Preparer's Use Only
 Preparer's signature: J. Terry Gordon Date: 4/20/2010
 Firm's name (or yours if self-employed), address, and ZIP + 4: J. Terry Gordon & Co., CPA's 40 Technology Pkwy South, Suite 250, Norcross, GA 30092
 Check if self-employed: Preparer's identifying number (see instructions): 258-64-0242
 EIN: _____ Phone no.: (770) 449-4921

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
See attached statement.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 911,231 including grants of \$ 300,740) (Revenue \$ 626,467)
The Karisoke Research Center employs more than 100 Rwandese staff, conducting scientific research focused on the conservation of the biodiversity of the Virunga ecosystem with emphasis on the mountain gorilla. Daily anti-poaching and monitoring patrols in collaboration with the national park authorities. Approximately 120 gorillas (37% of the population) range in the Karisoke sector. Cross border anti-poaching patrols with Rwanda, DR Congo and Uganda national park staff. Hands on care of orphaned gorillas too young to be released into the wild in collaboration with Rwanda and DRC authorities and MGVP.

4b (Code:) (Expenses \$ 831,330 including grants of \$ 0) (Revenue \$ 250,419)
Education & Communications programs focused on building awareness and scientific capacity among Rwanda students. Training university to train and supervise the next generation of scientists. Also conduct classes for primary and secondary students in communities close to the protected area and community programs to help older generations learn about the importance of conservation. The website and various publications disseminate information worldwide.

4c (Code:) (Expenses \$ 71,117 including grants of \$ 0) (Revenue \$ 35,497)
Ecosystem Health & Community Development-Trans border programs in collaboration with the host country ministries of Health & Education. These programs reduce the threat of disease transmission between humans and gorillas and contributes to enhanced public health of communities in close proximity to protected areas. Testing, identification and treatment of intestinal parasites using paraprofessionals trained by the Fossey Fund. Delivering hygiene, public health and conservation education, rehabilitating rural health clinics, providing access to clean water, nutrition programs and financial assistance. The Fossey Fund helps local people work toward economic independence.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 2,423,120 including grants of \$ 398,693) (Revenue \$ 1,648,549)

4e Total program service expenses ▶ \$ 4,236,798 (Must equal Part IX, Line 25, column (B).)

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any accounts where 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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; 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		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
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?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
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>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
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>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
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>		X
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>		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	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 this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?	X	
4b	If "Yes," enter the name of the foreign country: ▶ See attached statement See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		X
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that 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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?		X
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11	Is there any officer, director or 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		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions).	X	
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?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 ▶ GA
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ▶ Clare Richardson (404) 624-5881 800 Cherokee Ave., Atlanta, GA 30315

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

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

- 1a** Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
Christian & Sibi Bale Board member	2	X						0	0	0
Oliver Baltuch Board member	2	X						0	0	0
Gilbert K. Boese Board member	2	X						0	0	0
Mike Crowther Board member	2	X						0	0	0
Lawrence Ellison Board member	2	X						0	0	0
Nick Faust Board member	2	X						0	0	0
Glenn L. Felner Board member	2	X						0	0	0
Wayne Ferguson Board member	2	X						0	0	0
Lynn Flanders Treasurer	2	X						0	0	0
William R. Foster Past Chair	2	X					X	0	0	0
Gil Grosvenor Board member	2	X						0	0	0
Terry Harps Board member	2	X						0	0	0
Judith C. Harris Board member	2	X						0	0	0
R. Charles Henn, Jr. Board member	2	X						0	0	0
Richard A. Horder Chair	2	X						0	0	0
Dennis W. Kelly Board member	2	X						0	0	0
Manuel A. Mollinedo Board member	2	X						0	0	0
	2	X						0	0	0

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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			
Ruth Musgrave Board member	2	X						0	0	0
Jackie Ogden, PhD Board member	2	X						0	0	0
Craig Piper Board member	2	X						0	0	0
Sandy Price Board member	2	X						0	0	0
Rebecca Rooney Board member	2	X						0	0	0
Andy Serkis Board member	2	X						0	0	0
Janice Gleason Skow Vice Chair	2	X						0	0	0
Gary G. Strieker Board member	2	X						0	0	0
Daniel K. Thorne Board member	2	X						0	0	0
Joanne Truffleman Board member	2	X						0	0	0
Clare F. Richardson Pres/CEO	40				X	X	X	115,010	0	0
Alecia Lily Dir of Africa Programs	40					X		37,179	0	0
	0							0	0	0
1b Total								152,189	0	0

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **▶** 1

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

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.

(A) Name and business address	(B) Description of services	(C) Compensation
Miles River Direct 19 Boardman Lane Hamilton MA 01982	Fundraising & direct mail	129,785
Development Resources 2259 Sagamore Hills Drive Decatur GA 30033	Fundraising & direct mail	103,543
		0
		0
		0

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **▶** 2

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a 22,364				
	b Membership dues	1b 333,656				
	c Fundraising events	1c 2,600				
	d Related organizations	1d 0				
	e Government grants (contributions)	1e 699,433				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 3,871,007				
	g Noncash contributions included in lines 1a-1f: \$	486,353				
	h Total. Add lines 1a-1f	4,929,060				
Program Service Revenue	2a	Business Code				
	b		0			
	c		0			
	d		0			
	e		0			
	f All other program service revenue		0			
	g Total. Add lines 2a-2f		0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,818			
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0			
	6a Gross Rents	(i) Real				
		(ii) Personal				
			0	0		
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)			0		
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
			0	0		
			0	0		
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)			0		
d Net gain or (loss)			0			
8a Gross income from fundraising events (not including \$ 45,813 of contributions reported on line 1c). See Part IV, line 18	a		68,033			
	b Less: direct expenses		0			
	c Net income or (loss) from fundraising events			68,033		
9a Gross income from gaming activities. See Part IV, line 19	a		0			
	b Less: direct expenses		0			
	c Net Income or (loss) from gaming activities			0		
10a Gross sales of inventory, less returns and allowances	a		7,537			
	b Less: cost of goods sold		3,697			
	c Net income or (loss) from sales of inventory			3,840		
Miscellaneous Revenue	11a	Business Code				
	b		0			
	c		0			
	d All other revenue		0			
	e Total. Add lines 11a-11d		0			
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		5,004,751	0	0	0	

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) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	151,512	82,482	11,505	57,525
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	1,263,061	1,179,568	55,547	27,946
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,065	1,626	240	1,199
9	Other employee benefits	98,786	72,656	18,937	7,193
10	Payroll taxes	143,047	129,597	5,471	7,979
11	Fees for services (non-employees):				
a	Management	72,225	72,225		
b	Legal	1,698		1,698	
c	Accounting	40,204		40,204	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	142,319			142,319
f	Investment management fees	900		900	0
g	Other	333,100	325,300	7,800	
12	Advertising and promotion	13,137	13,137		
13	Office expenses	79,955	74,230	3,542	2,183
14	Information technology	4,575	4,143	432	
15	Royalties	0			
16	Occupancy	227,500	222,646	4,558	296
17	Travel	209,784	207,948	-257	2,093
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	181,138	177,925	3,213	
20	Interest	14,622		14,622	
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	26,999	3,888	23,111	0
23	Insurance	22,128	10,193	11,935	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a	Bank Charges	67,331	50,185	16,440	706
b	Contributions	3,588	3,488	100	
c	Dues and subscriptions	31,994	5,075	19,871	7,048
d	Education and training	52,528	52,528		
e	Equipment	113,322	108,764	4,015	543
f	All other expenses see attached schedule	1,738,940	1,439,194	112,168	187,578
25	Total functional expenses. Add lines 1 through 24f	5,037,458	4,236,798	356,052	444,608
26	Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	624,864	1	609,560
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	224,532	3	338,414
	4	Accounts receivable, net	54,881	4	113,848
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	10,305	8	10,152
	9	Prepaid expenses and deferred charges	59,341	9	31,830
	10a	Land, buildings, and equipment: cost basis	10a 445,233		
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b 310,835		
	11	Investments—publicly traded securities	15,954	10c	134,398
	12	Investments—other securities. See Part IV, line 11	0	11	0
	13	Investments—program-related. See Part IV, line 11	0	12	0
	14	Intangible assets	0	13	0
	15	Other assets. See Part IV, line 11	173,784	14	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,163,661	15	441,717	
Liabilities	17	Accounts payable and accrued expenses	123,648	16	1,679,919
	18	Grants payable		17	219,937
	19	Deferred revenue		18	
	20	Tax-exempt bond liabilities		19	62,300
	21	Escrow account liability. Complete Part IV of Schedule D	0	20	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23	Secured mortgages and notes payable to unrelated third parties	0	22	0
	24	Unsecured notes and loans payable	0	23	0
	25	Other liabilities. Complete Part X of Schedule D	0	24	0
	26	Total liabilities. Add lines 17 through 25	513,784	25	904,160
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		637,432	26	1,186,397
	27	Unrestricted net assets	152,464	27	-307,498
	28	Temporarily restricted net assets	373,765	28	801,020
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	526,229	33	493,522
	34	Total liabilities and net assets/fund balances	1,163,661	34	1,679,919

Part XI Financial Statements and Reporting

1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	X	
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 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?	X	
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?	X	
b	If "Yes," did the organization undergo the required audit or audits?	X	

Part III, Line 4d (990) - Program Service Accomplishments

(Code: _____) (Expenses \$ 2,120,257 including grants of \$ 398,693.) (Revenue \$ 1,635,773.)
Congo Landscape (Approx. 27,000 sq. miles) in collaboration with the government of DRC and with Conservation International, we provide funding for more than 350 Congolese nationals working in community managed reserves. We provide technical expertise, working to create a conservation corridor between Maiko National Park and Kuhuzi Biega National Park and protecting the bulk of the habitat of the Grauers (eastern lowland gorillas).
Gorilla Rehabilitation & Conservation Education (GRACE) center is currently under construction. It is a rescue center in DRC, funded by US Fish and Wildlife Services, designed to provide a home for infant gorillas taken by animal traffickers. The ultimate goal is to raise the gorillas, create cohesive groups, able to be re-introduced into the wild. Land was donated by the Tayna Center for Conservation Biology (TCCB) and a consortium of the Fossey Fund, Pan African Sanctuary Alliance (PASA), Disney's Animal Programs & Disney Wildlife Conservation Fund.

(Code: _____) (Expenses \$ 34,769 including grants of \$ 0.) (Revenue \$ 1,319.)
Science-Scientific research and daily monitoring of gorillas has provided 40 years of behavioral and demographic data. This provides valuable information on gorilla life history patterns and population dynamics to assist national park authorities in their management of the parks.

(Code: _____) (Expenses \$ 268,094 including grants of \$ 0.) (Revenue \$ 11,457.)
Kigali Headquarters-Africa headquarters in Kigali provides leadership, advocacy and coordination to all African programs.

(Code: _____) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)

(Code: _____) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

Dian Fossey Gorilla Fund International

Employer identification number

52-1118866

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: (Please check only **one** organization.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III—Functionally integrated
 - d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
									0
									0
									0
									0
									0
Total									0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0			0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0			0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0			0
4 Total Add lines 1-3	0	0	0	0	0	0
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.						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0			0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0			0
11 Total support. Add lines 7 through 10						0
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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	0.00%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	0.00%
16a 33 1/3% support test—2008. 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 ▶ <input type="checkbox"/>		
b 33 1/3% support test—2007. 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 ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances-test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
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. ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,357,347	3,271,259	3,277,623	3,796,743	4,510,740	17,213,712
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	10,560	9,412	6,061	10,117	7,539	43,689
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0			0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0			0
6 Total. Add lines 1-5	2,367,907	3,280,671	3,283,684	3,806,860	4,518,279	17,257,401
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						17,257,401

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	2,367,907	3,280,671	3,283,684	3,806,860	4,518,279	17,257,401
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	90		30,824	13,486	3,818	48,218
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	90	0	30,824	13,486	3,818	48,218
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0			0
13 Total support. (Add lines 9, 10c, 11, and 12.)						17,305,619

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 2008 (line 8, column (f) divided by line 13, column (f))	15	99.72%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	97.29%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	0.28%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	0.28%

19a 33 1/3% support tests—2008. 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—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Area with horizontal dashed lines for supplemental information.

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization

Dian Fossey Gorilla Fund International

Employer identification number

52-1118866

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

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

- 5 Did the organization inform all donors and donor advisors in writing that the assets 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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

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

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

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

- 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$
- (ii) Assets included in Form 990, Part X ▶ \$
- 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 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$
- b Assets included in Form 990, Part X ▶ \$

Schedule D (Form 990) 2008

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

3 Using the organization's 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 XIV.

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

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

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

Table with 2 columns: Description (1c-1f) and Amount. Rows include Beginning balance, Additions during the year, Distributions during the year, and Ending balance.

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

b If "Yes," explain the arrangement in Part XIV.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include 1a-1g: Beginning of year balance, Contributions, Investment earnings or losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance.

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %

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

Table with 2 columns: Yes, No. Rows: 3a(i) unrelated organizations, 3a(ii) related organizations.

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows include 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other.

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 134,398

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

Area with horizontal dashed lines for supplemental information.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>Gorillas in the Midst</u> (event type)	(b) Event #2 _____ (event type)	(c) Other Events <u>NONE</u> (total number)	(d) Total Events (Add col. (a) through col. (c))	
Revenue	1	Gross receipts	113,846	0	0	
	2	Less: Charitable contributions	45,813	0	0	
	3	Gross revenue (line 1 minus line 2)	68,033	0	0	
Direct Expenses	4	Cash prizes	0	0	0	
	5	Non-cash prizes	0	0	0	
	6	Rent/facility costs	0	0	0	
	7	Other direct expenses	0	0	0	
	8	Direct expense summary. Add lines 4 through 7 in column (d)				0
	9	Net income summary. Combine lines 3 and 8 in column (d)				68,033

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))	
Revenue	1	Gross revenue			0	
Direct Expenses	2	Cash prizes			0	
	3	Non-cash prizes			0	
	4	Rent/facility costs			0	
	5	Other direct expenses			0	
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				0
	8	Net gaming income summary. Combine lines 1 and 7 in column (d)				0

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities:		
a	Is the organization licensed to operate gaming activities in each of these states?		
b	If "No," Explain:		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," Explain:		
11	Does the organization operate gaming activities with nonmembers?		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		

			Yes	No
13	Indicate the percentage of gaming activity operated in:			
	a The organization's facility	13a	%	
	b An outside facility	13b	%	
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶ _____			
	Address ▶ _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
	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:			
	Name ▶ _____			
	Address ▶ _____			
16	Gaming manager information:			
	Name ▶ _____			
	Gaming manager compensation ▶ \$ _____ 0			
	Description of services provided ▶ _____			
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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?		17a	
	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 ▶ \$ _____			

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2008

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ
▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

Name of the organization

Employer identification number

Dian Fossey Gorilla Fund International

52-1118866

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. ▶ \$ 0
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. ▶ \$ 0

Part II Loans to and/or From Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
						0	0			
			0	0						
			0	0						
			0	0						
			0	0						
			0	0						
			0	0						
Total			0	0						

Part III Grants or Assistance Benefitting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See attached statement		0			
		0			
		0			
		0			
		0			
		0			

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No. 1545-0047

2008

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ To be completed by organizations that answered "Yes"
on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

Name of the organization
Dian Fossey Gorilla Fund International

Employer identification number
52-1118866

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	2	9,500	estimated value
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.)		See	Attached	Statement
26 Other ▶ (.)				0
27 Other ▶ (.)				0
28 Other ▶ (.)				0

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

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

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.

Part V, Line 4b (990) - Authority over a Financial Account in a Foreign Country

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)? If "Yes," enter the name of the foreign country:	
1	Rwanda
2	Congo (Democratic Republic)
3	
4	
5	
6	
7	
8	
9	
10	

Part VII, Section B, Line 1 (990) - Highest Compensated Independent Contractors

	Contractor's Name	Check if Business	Street Address	City	State	Zip Code	Foreign Country
1	Miles River Direct						
2	Development Resources Unlimited	X	19 Boardman Lane	Hamilton	MA	01982	
3		X	2259 Sagamore Hills Drive	Decatur	GA	30033	
4							
5							
6							
7							
8							
9							
10							

Description of Services	Compensation	Explanation
Fundraising & direct mail	129,785	
Fundraising & direct mail	103,543	

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

	Cash		Non Cash
1 Federated Campaigns	22,364	1	
2 Membership dues	333,656	2	
3 Fundraising events	2,600	3	
4 Related organizations		4	
5 Government grants (contributions)	699,433	5	
6 All other contributions, gifts, grants, and similar amounts not included above:			
Donations			
Adoptions	1,613,451		486,353
Memorials & Bequests	157,148		
Royalties, Usage Fees & Shipping Income	120,145		
Miscellaneous non-government grants grants & contributions	45,191		
Other contributions total	1,448,719		
7 Total	3,384,654	6	486,353
	4,442,707	7	486,353

Part VIII, Line 10 (990) - Gross Sales of Inventory

7,537

3,697

3,840

Category		Gross Sales	Cost of Goods Sold	Net
1	Merchandise Sales	7,537	3,697	3,840
2				0
3				0
4				0
5				0
6				0
7				0
8				0
9				0
10				0
11				0
12				0
13				0
14				0
15				0
16				0
17				0
18				0
19				0
20				0

Part IX, Line 22 (990) - Depreciation, Depletion, etc.

		26,999	3,888	23,111	0
Description		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
1	Furniture & Fixtures, Machinery & Equipment	26,999	3,888	23,111	
2		0			
3		0			
4		0			
5		0			
6		0			
7		0			
8		0			
9		0			
10		0			
11		0			
12		0			
13		0			
14		0			
15		0			
16		0			
17		0			
18		0			
19		0			
20		0			

Part X, Line 3 (990) - Pledges and Grants Receivable

		Pledges and grants receivable		Allowance for doubtful accounts	
		Beginning	End	Beginning	End
1					
2	Promises to give	224,532	338,414		
3					
4					
5					
6					
7					
8					
9					
10					
11					
12	Total pledges and grants receivable	224,532	338,414	0	0

Part X, Line 4 (990) - Accounts Receivable

		Accounts receivable		Allowance for doubtful accounts	
		Beginning	End	Beginning	End
1	Advances to Africa	53,349	108,837		
2	Contributions & other receivables	1,532	5,011		
3					
4					
5					
6					
7					
8					
9					
10					
11	Total accounts receivable	54,881	113,848	0	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

	Category or Item	Land	Buildings	Leasehold Improvements	Equipment	Other	Check if Investment Asset	Check if Asset Disposed	Cost/Other Basis	Beginning Accumulated Depreciation	Ending Accumulated Depreciation	Disposals/ Adjustments	Beginning Balance	Ending Balance
1	Furniture & Equipment									283,837	310,835	0	15,954	134,398
2	Machinery & Equipment				X				13,188	10,602	11,678		2,586	1,510
3	Software				X				111,081	104,929	110,605		6,152	476
4	Leasehold Improvements				X	X			133,673	24,973	33,363		5,258	100,310
5	Vehicles				X				36,726	35,879	36,514		847	212
6	Land	X							149,454	107,454	118,675		0	30,779
7									1,111	0			1,111	1,111
8									0	0			0	0
9									0	0			0	0
10									0	0			0	0
11									0	0			0	0
12									0	0			0	0
13									0	0			0	0
14									0	0			0	0
15									0	0			0	0
16									0	0			0	0
17									0	0			0	0
18									0	0			0	0
19									0	0			0	0
20									0	0			0	0

Part X, Line 15 (990) - Other Assets

		173,784	441,717
Description		Beginning	End
1	Due from operating fund	173,784	441,717
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Part X, Line 25 (990) - Other Liabilities

513,784

904,160

	Description	Beginning	End
1	Notes and leases payable	340,000	350,000
2	Due to restricted fund	173,784	441,717
3	BB Net Community Lease Payable		112,443
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Part IX (Sch D (990)) - Other Assets

441,717

Description		Book Value
1	Due from operating fund	441,717
2		0
3		0
4		0
5		0
6		0
7		0
8		0
9		0
10		0
11		0
12		0
13		0
14		0
15		0
16		0
17		0
18		0
19		0
20		0

Part X (Sch D (990)) - Other Liabilities

904,160

1	Description	Amount
2	Federal Income Taxes	
3	Notes and leases payable	
4	Due to restricted fund	350,000
5	BB Net Community Lease Payable	441,717
6		112,443
7		0
8		0
9		0
10		0
11		0
12		0
13		0
14		0
15		0
16		0
17		0
18		0
19		0
20		0
21		0

Part II (Sch G (990/990EZ)) - Events

	Line 1	Line 2	Line 3	Line 4	Line 5	Line 6	Line 7
	Gross Receipts	Less: (Charitable contributions)	Gross Revenue (line 1 minus line 2)	Cash Prizes	Non-cash Prizes	Rent/Facility costs	Other direct expenses
1	113,846	45,813	68,033	0	0	0	0
2	113,846	45,813	68,033	0	0	0	0
3			0				
4			0				
5			0				
6			0				
7			0				
8			0				
9			0				
10			0				
11			0				
12			0				
13			0				
14			0				
15			0				
16			0				
17			0				
18			0				
19			0				
20			0				

Gorillas in the Midst

Part IV (Sch L (990/990EZ)) - Business Transactions Involving Interested Persons

	Name	Check if a Business	Relationship with Organization	Amount of Transaction	Description of Transaction	Sharing in Revenues?	
						Yes	No
1	Zoo Atlanta	X	tenant	58,470	rent		X
2	T.G. Madison	X	board member	118,781	advertising & marketing		X
3	J. Terry Gortfort & Co. CPAs	X	CPA	5,388	accounting services		X
4	Peter Max			15,000	private studio tour and lunch		X
5	Sergey Cherep			8,500	oil painting		X
6	Atlanta Daily Word	X	none	6,500	advertising		X
7	KDFC	X	none	5,000	advertising		X
8	Herbert Lurie		none	7,472	Air Transportation		X
9	Disney wildlife Conservation Fund	X	business associate	85,481	program equipment		X
10	Kilpatrick Stockton	X	board member	165,000	legal services		X
11	Active Production and Design	X	none	1,746	advertising & marketing		X
12	Sandy Price		board member	1,051	expense deferrals		X
13	Manuel Mollinedo		board member	1,234	expense deferrals		X
14	Nigel Richardson			126	expense deferrals		X
15	Steve Sachs			205	expense deferrals		X
16	Gienice Moore			1,300	2-limited edition Titus posters		X
17	John Fowar			1,000	original painting		X
18	Tory Burch			1,395	in-store shopping party		X
18	Denise Berry			300	2-gift certificates		X
20	Tony Cameron			2,395	cardio bike		X

Part I, Lines 25-28 (Sch M (990)) - Other Types of Property

	Non-Cash Contribution	Description	Number of Contributions	Revenues Reported on 990, Pt VIII, Line 1g	Method of Determining Revenues
1	X	Studio Tour/Lunch	1	15,000	estimated value
2	X	Legal services	1	165,000	estimated value
3	X	Marketing and advertising	4	132,027	estimated value
4	X	storage container	1	85,491	estimated value
5	X	rent, CAM expenses, salary	1	58,470	actual costs
6	X	accounting service	1	5,388	actual costs
7	X	gift certificates, posters, etc.	5	8,006	estimated value
8	X	Air Transportation	1	7,472	estimated value
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization Dian Fossey Gorilla Fund International	Employer identification number 52-1118866
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 800 Cherokee Avenue, SE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Atlanta GA 30315	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ Clare Richardson 800 Cherokee Ave. Atlanta GA 30315

Telephone No. ▶ (404) 624-5881 FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 5/15/2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning 10/1/2008, and ending 9/30/2009

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box **X**.
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.		
Type or print <small>File by the extended due date for filing the return. See instructions.</small>	Name of Exempt Organization Dian Fossey Gorilla Fund International	Employer identification number 52-1118866
	Number, street, and room or suite no. If a P.O. box, see instructions. C/O J. Terry Gordon & Co., CPA's, 40 Technology Parkway South, Suite 250	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Norcross GA 30092	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of See attached worksheet
 Telephone No. (404) 624-5881 FAX No.
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 8/15/2009

5 For calendar year _____, or other tax year beginning 10/1/2007, and ending 9/30/2008

6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension More time is requested to acquire all information needed to complete and file an accurate return.

8 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ 0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Lynn S. Buhett Title CPA Date 5/13/09

Part I (8868) - Books in care of

Name			
<input checked="" type="checkbox"/>	Person		
<input type="checkbox"/>	Business	Clare Richardson	
Address		Fax no.	Telephone no.
800 Cherokee Ave.			(404) 624-5881
City	State	Zip code	Foreign country
Atlanta	GA	30315	

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047
2007
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 10/1/2007 and ending 9/30/2008

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization: Dian Fossey Gorilla Fund International
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: _____
800 Cherokee Avenue, SE
 City or town State or country ZIP + 4:
Atlanta GA 30315

D Employer identification number: 52-1118866

E Telephone number: (404) 624-5881

F Accounting method: Cash Accrual
 Other (specify) ▶ _____

G Website: ▶ www.gorillafund.org

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ _____
H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶ _____

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 4,210,753

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a	0		
	b Direct public support (not included on line 1a)	1b	3,753,440		
	c Indirect public support (not included on line 1a)	1c	62,735		
	d Government contributions (grants) (not included on line 1a)	1d	370,975		
	e Total (add lines 1a through 1d) (cash \$ <u>3,796,745</u> noncash \$ <u>390,405</u>)	1e		4,187,150	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		0	
	3 Membership dues and assessments	3		0	
	4 Interest on savings and temporary cash investments	4		13,486	
	5 Dividends and interest from securities	5		0	
	6a Gross rents	6a			
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c		0		
7 Other investment income (describe ▶)	7		0		
Revenue	8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	b Less: cost or other basis and sales expenses	8a	0		
	c Gain or (loss) (attach schedule)	8b	0		
	d Net gain or (loss). Combine line 8c, columns (A) and (B)	8c	0		
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a	0		
	b Less: direct expenses other than fundraising expenses	9b	0		
	c Net income or (loss) from special events. Subtract line 9b from line 9a	9c		0	
	10a Gross sales of inventory, less returns and allowances	10a	10,117		
	b Less: cost of goods sold	10b	7,912		
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c		2,205		
11 Other revenue (from Part VII, line 103)	11		0		
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		4,202,841		
Expenses	13 Program services (from line 44, column (B))	13		3,494,928	
	14 Management and general (from line 44, column (C))	14		111,446	
	15 Fundraising (from line 44, column (D))	15		354,756	
	16 Payments to affiliates (attach schedule)	16		0	
	17 Total expenses. Add lines 16 and 44, column (A)	17		3,961,130	
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		241,711	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		674,924	
	20 Other changes in net assets or fund balances (attach explanation)	20		0	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		916,635	

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>				
22 b Other grants and allocations (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25 a Compensation of current officers, directors, key employees, etc. listed in Part V-A	158,500	93,400	10,850	54,250
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0	0	0	0
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
26 Salaries and wages of employees not included on lines 25a, b, and c	1,235,414	1,164,585	44,896	25,933
27 Pension plan contributions not included on lines 25a, b, and c	0			
28 Employee benefits not included on lines 25a - 27	95,242	73,519	12,616	9,107
29 Payroll taxes	109,694	99,250	4,296	6,148
30 Professional fundraising fees	90,666			90,666
31 Accounting fees	35,406		35,406	
32 Legal fees	2,394		2,394	
33 Supplies	381,652	376,866		4,786
34 Telephone	94,531	89,477	4,569	485
35 Postage and shipping	240,311	158,357	903	81,051
36 Occupancy	94,210	92,106	1,709	395
37 Equipment rental and maintenance	57,518	55,030	978	1,510
38 Printing and publications	98,729	72,121	26	26,582
39 Travel	239,290	220,578	11,510	7,202
40 Conferences, conventions, and meetings	73,281	69,082	4,199	
41 Interest	14,185		14,185	
42 Depreciation, depletion, etc. (attach schedule)	18,892	0	18,892	0
43 Other expenses not covered above (itemize):				
a See attached statement	921,215	930,557	-55,983	46,641
b	0	0	0	0
c	0	0	0	0
d	0	0	0	0
e	0	0	0	0
f	0	0	0	0
g	0	0	0	0
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	3,961,130	3,494,928	111,446	354,756

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 0; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ see statement one All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a Karisoke Research Center-Daily antipoaching patrols of Karisoke sector of park: approximately 120 gorillas(37% of remaining population) live in this area. When the need arises, DFGFI staff participates in cross border patrols w/ national park authorities in Uganda, Rwanda & DRC. Our staff is providing hand-on care of orphaned gorillas that are too young to return to the wild, as our contribution to a consortium of organizations that include national park staff in Rwanda, DRC and the MGVP. (Grants and allocations \$ <input type="checkbox"/> 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	831,584
b Education & Communications-Education programs aimed to build awareness and scientific capacity among Rwandan students. We work at the university level to help train and supervise the next generation of scientists and conservationists. We also conduct conservation classes for primary and secondary students in Virunga Park, and community programs to help older generations learn about the importance of conservation. Our publications & website provide worldwide communication of this information. (Grants and allocations \$ <input type="checkbox"/> 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	648,434
c Kigali & Eco-Health-Ecosystem health programs and are conducted in collaboration with host country Ministries of Health. These programs reduce the threat of disease transmission between humans and gorillas through testing for and treatment of intestinal parasites for those living in close proximity of protected areas, delivering hygiene & conservation education materials, rehabilitating clinics, providing access to clean water and preventing malnutrition. In the past 2 years, staff has treated over 200,000 people. (Grants and allocations \$ <input type="checkbox"/> 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	442,156
d Congo-Our organization works closely with the government of the DRC, providing funds to hire over 350 Congolese to operate protection programs. We help protect the last remaining 280 mountain gorillas in Virunga National Park. We provide hands on care for orphaned gorillas. We have community development projects that help local people work toward economic independence. (Grants and allocations \$ <input type="checkbox"/> 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	1,534,723
e Other program services (attach schedule) (Grants and allocations \$ <input type="checkbox"/> 0) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	38,031
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	3,494,928

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		684,268	45	624,864	
	46 Savings and temporary cash investments			46		
	47 a Accounts receivable	47a	54,881			
	b Less: allowance for doubtful accounts	47b	0			
				74,561	47c	54,881
	48 a Pledges receivable					
	b Less: allowance for doubtful accounts	48a	224,532			
	49 Grants receivable	48b	0			
				122,230	48c	224,532
	50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				49	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) (attach schedule)			0	50a	0
	51 a Other notes and loans receivable (attach schedule)	51a	0			
	b Less: allowance for doubtful accounts	51b	0			
	52 Inventories for sale or use			0	51c	0
	53 Prepaid expenses and deferred charges			10,938	52	10,305
	54 a Investments—publicly-traded securities.			12,409	53	59,341
	b Investments—other securities (attach schedule).	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		0	54a	0
	55 a Investments—land, buildings, and equipment: basis	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		0	54b	0
	b Less: accumulated depreciation (attach schedule)	55a	0			
	56 Investments—other (attach schedule)	55b	0		55c	0
57 a Land, buildings, and equipment: basis			0	56	0	
b Less: accumulated depreciation (attach schedule)	57a	299,791				
58 Other assets, including program-related investments (describe <input type="checkbox"/> Due from operating fund)	57b	283,837				
			27,163	57c	15,954	
59 Total assets (must equal line 74). Add lines 45 through 58			225,266	58	173,784	
Liabilities	60 Accounts payable and accrued expenses		1,156,835	59	1,163,661	
	61 Grants payable		101,645	60	123,648	
	62 Deferred revenue			61		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			62		
	64 a Tax-exempt bond liabilities (attach schedule)			0	63	0
	b Mortgages and other notes payable (attach schedule)			0	64a	0
	65 Other liabilities (describe <input type="checkbox"/> See attached statement)			0	64b	0
	66 Total liabilities. Add lines 60 through 65			380,266	65	513,784
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		481,911	66	637,432	
	67 Unrestricted					
	68 Temporarily restricted		449,658	67	152,464	
	69 Permanently restricted		225,266	68	373,765	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				69	
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21).					
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.			674,924	73	526,229
			1,156,835	74	1,163,661	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	3,812,436
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4	0	
	Add lines b1 through b4		b	0
c	Subtract line b from line a		c	3,812,436
d	Amounts included on Part I, line 12, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): In-kind revenues	d2	390,405	
	Add lines d1 and d2		d	390,405
e	Total revenue (Part I, line 12). Add lines c and d		e	4,202,841

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	3,961,131
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify): In-kind expenses	b4	390,405	
	Add lines b1 through b4		b	390,405
c	Subtract line b from line a		c	3,570,726
d	Amounts included on Part I, line 17, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2	0	
	Add lines d1 and d2		d	0
e	Total expenses (Part I, line 17). Add lines c and d		e	3,570,726

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name <u>Clare F. Richards</u> Str <u>800 Cherokee Ave</u> City <u>Atlanta</u> ST <u>GA</u> ZIP <u>30315</u>	Title <u>Pres/CEO</u> Hr/WK <u>40</u>	<u>108,500</u>	<u>2,170</u>	<u>3,500</u>
Name <u>Alecia Lily</u> Str <u>800 Cherokee Ave</u> City <u>Atlanta</u> ST <u>GA</u> ZIP <u>30315</u>	Title <u>Dir of Africa Prog</u> Hr/WK <u>40</u>	<u>50,000</u>	<u>0</u>	<u>1,000</u>
Name <u>See Attached</u> Str City ST ZIP	Title Hr/WK	<u>0</u>	<u>0</u>	<u>0</u>
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			
Name <u>N/A</u> Str City ST ZIP	Title Hr/WK			

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75 a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings	27	Yes	No
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		X
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." If "Yes," attach a statement that includes the information described in the instructions.	75c		X
d	Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				
Name N/A City Str ZIP				

Part VI Other Information (See the instructions.)

76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	Yes	No
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	76	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	77	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78a	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	78b	N/A
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	79	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	80a	X
81 a	Enter direct and indirect political expenditures. (See line 81 instructions.)	81a	
b	Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b 390,405		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	N/A	
d	Section 162(e) lobbying and political expenditures	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12.		
b	Gross receipts, included on line 12, for public use of club facilities		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 N/A ; section 4912 N/A ; section 4955 N/A		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	N/A	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	N/A	
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90 a	List the states with which a copy of this return is filed GA		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	7
91 a	The books are in care of Name Clare Richardson Telephone no. (404) 624-5881 Located at 800 Cherokee Ave. City Atlanta ST GA ZIP + 4 30315		
b	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)? If "Yes," enter the name of the foreign country See attached statement See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
		Yes	No
91b		X	

Part VI Other Information (continued)

- c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶ See attached statement
- 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** | N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14		13,486
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			05		2,205
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		0	15,691
105 Total (add line 104, columns (B), (D), and (E))					15,691

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
102	Sales of items bearing likeness of a mountain gorilla to stimulate and enhance public awareness, interest and appreciation of the mountain gorilla.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%		0	0
	%		0	0
	%		0	0
	%		0	0

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI

Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

		Yes	No
106	Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				0

		Yes	No
107	Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				0

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		X

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.

Please Sign Here

Signature of officer: Lynn A. Flanders Date: 5-20-09
 Type or print name and title: Lynn A. Flanders, Treasurer

Paid Preparer's Use Only	Preparer's signature: <u>J. Terry Gordon</u>	Date: <u>5/4/2009</u>	Check if self-employed: <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. X): <u>258-64-0242</u>
	Firm's name (or yours if self-employed), address, and ZIP + 4: <u>J. Terry Gordon & Co., CPA's</u> <u>40 Technology Pkwy South, Suite 250, Norcross, GA 30092</u>	EIN: <u>58-1499257</u>	Phone no.: <u>(770) 449-4921</u>	

Part III, Line e (990) - Other Program Services

	Program Service Expenses
Science-Scientific research; daily monitoring of gorillas has provided 40 years of behavioral and demographic data which provides valuable information on mountain gorilla life history patterns and population dynamics to assist in developing conservation strategies. Scientists at Karisoke are conducting studies ongoing.	
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	38,031
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0
(Grants and allocations \$ _____ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	0

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Dian Fossey Gorilla Fund International

Employer identification number

52-1118866

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Clare F. Richardson, 800 Cherokee Ave Atlanta, GA 30315	President/CEO 40	108,500	11,664	
Alecia Lily, 800 Cherokee Ave Atlanta, GA 30315	Dir of Africa Operations 40	50,000	5,683	
Athena Buchanan, 800 Cherokee Ave Atlanta, GA 30315	Dir of Marketing 40	65,000	9,428	
Elyese Christensen, 800 Cherokee Ave Atlanta, GA 30315	Development Director 40	51,000	5,496	
Nina Mallard, 800 Cherokee Ave Atlanta, GA 30315	Dir of Finance & Admin 40	70,000	11,393	
Total number of other employees paid over \$50,000 ▶	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Miles River Direct, 19 Boardman Lane Hamilton, MA 01982	Mailing Service	155,099
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Miles River Direct, 19 Boardman Lane Hamilton, MA 01982	Postage/Direct Mailings	88,716
Zoo Atlanta, 800 Cherokee Ave Atlanta, GA 30315	Office Support	77,782
Total number of other contractors receiving over \$50,000 for other services ▶	0	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V, Form 990	X	
e Transfer of any part of its income or assets?		X
3 a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	X	
b Did the organization have a section 403(b) annuity plan for its employees?	X	
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement.		X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g.		
b Did the organization make any taxable distributions under section 4966?		X
c Did the organization make a distribution to a donor, donor advisor, or related person?		X
d Enter the total number of donor advised funds owned at the end of the tax year.		
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year.		
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts.		0
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year.		0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state City ST Country
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
					0
					0
					0
					0
					0
					0
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	3,277,623	3,271,259	2,357,347	2,082,469	10,988,698
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	6,061	9,412	10,560	11,464	37,497
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	30,824		90	28	30,942
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	3,314,508	3,280,671	2,367,997	2,093,961	11,057,137
24 Line 23 minus line 17	3,308,447	3,271,259	2,357,437	2,082,497	11,019,640
25 Enter 1% of line 23	33,145	32,807	23,680	20,940	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	0
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		26b	
c Total support for section 509(a)(1) test: Enter line 24, column (e)		26c	0
d Add: Amounts from column (e) for lines:	18 _____ 19 _____ 22 _____ 26b _____	26d	0
e Public support (line 26c minus line 26d total)		26e	0
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	0.00%

27 Organizations described on line 12:	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:	(2006) _____ (2005) _____ (2004) 174,850 (2003) 94,159
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2006) _____ (2005) _____ (2004) _____ (2003) _____	
c Add: Amounts from column (e) for lines:	15 10,988,698 16 _____ 17 37,497 20 _____ 21 _____	27c 11,026,195
d Add: Line 27a total	269,009 and line 27b total _____	27d 269,009
e Public support (line 27c total minus line 27d total)		27e 10,757,186
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)		27f 11,057,137
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27g 97.29%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		27h 0.28%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A

Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38	0	0
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40	0	0
41 Lobbying nontaxable amount. Enter the amount from the following table—			
If the amount on line 40 is—	The lobbying nontaxable amount is—		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42	0	0
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0	0
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0	0

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures					0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Name of organization

Dian Fossey Gorilla Fund International

Employer identification number

52-1118866

Part II Noncash Property (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	<u>office support</u> _____ _____	\$ <u>54,253</u>	<u>various</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>5</u>	<u>advertising and marketing</u> _____ _____	\$ <u>94,844</u>	<u>various</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>34</u>	<u>consulting services</u> _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>40</u>	<u>accounting services</u> _____ _____	\$ <u>21,819</u>	<u>various</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>51</u>	<u>legal services</u> _____ _____	\$ <u>197,000</u>	<u>various</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>72</u>	<u>advertising</u> _____ _____	\$ _____	_____

Line 1 (990) - Public Support and Contributions

	Cash	Non Cash
Line 1a - Contributions to Donor Advised Funds		
Line 1b - Direct public support		
1 Contributions	3,363,035	390,405
2 Membership dues and assessments (contributions from the public)		
3 Commercial co-venture		
4 Special events contributions (Line 9 - Special Events)	0	
5 _____		
6 _____		
7 _____		
8 _____		
9 _____		
10 Total	3,363,035	390,405
Line 1c - Indirect public support	62,735	
Line 1d - Government contributions (grants)	370,975	

Line 10 (990) - Gross Profit from Sale of Inventory

10,117

7,912

2,205

	Category	Gross Sales	Cost of Goods Sold	Net
1	Merchandise Sales	10,117	7,912	2,205
2				0
3				0
4				0
5				0
6				0
7				0
8				0
9				0
10				0
11				0
12				0
13				0
14				0
15				0
16				0
17				0
18				0
19				0
20				0

Part II, Line 43 (990) - Other Expenses		921,215	930,557	-55,983	46,641
Description		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
		28,760	28,361		399
1	Repairs & Maintenance	67,991	67,991		
2	Training and Education	83,248	76,266	4,159	2,823
3	Office Supplies	19,236	10,611	968	7,657
4	Dues & Subscriptions	0	97,288	-97,288	
5	Direct Operating Costs	26,626	19,780	1,289	5,557
6	Taxes Licenses & Permits	61,448	61,448		
7	Utilities	54,212	51,994	2,009	209
8	Meals & Entertainment	18,958	5,608	13,350	
9	Insurance	0			
10	In-kind Expenses	0			
11	Equipment	4,106	4,106		
12	Security	421	321		100
13	Software	140,584	138,133	2,451	
14	Vehicle Costs	9,732	10,744	-1,012	
15	Indirect Operating Costs	15,955	15,318	637	
16	Marketing and Advertising	58,370	44,528	13,842	
17	Bank Charges	-600	-600		
18	Contributions	332,168	298,660	3,612	29,896
19	Professional Fees	0			
20	Professional Service	0			
21	Marketing Consultants and Various Expenses	0			

Part IV, Line 47 (990) - Accounts Receivable

		Accounts receivable		Allowance for doubtful accounts	
		Beginning	End	Beginning	End
1 Advances to Africa	1	63,901	53,349		
2 Contributions & other receivables	2	10,660	1,532		
3	3				
4	4				
5	5				
6	6				
7	7				
8	8				
9	9				
10	10				
11 Total accounts receivable	11	74,561	54,881	0	0

Part IV, Line 48 (990) - Pledges Receivable

		Pledges receivable		Allowance for doubtful accounts	
		Beginning	End	Beginning	End
1 Promises to give	1	122,230	224,532		
2	2				
3	3				
4	4				
5	5				
6	6				
7	7				
8	8				
9	9				
10	10				
11 Total pledges receivable	11	122,230	224,532	0	0

Part IV, Line 57 (990) - Land, Buildings, and Equipment

Category or Item		Land (net of any amortization)	Buildings and Equipment	Cost/Other Basis	Beginning Accumulated Depreciation	Ending Accumulated Depreciation	Beginning Balance	Ending Balance
1	Furniture & Equipment		X	13,188	9,727	10,602	3,461	2,586
2	Machinery & Equipment		X	111,081	99,111	104,929	11,970	6,152
3	Software		X	30,231	23,659	24,973	1	5,258
4	Leasehold Improvements		X	36,726	35,243	35,879	1,483	847
5	Vehicles		X	107,454	97,206	107,454	10,248	0
6	Land	X		1,111			0	1,111
7							0	0
8							0	0
9							0	0
10							0	0
11							0	0
12							0	0
13							0	0
14							0	0
15							0	0
16							0	0
17							0	0
18							0	0
19							0	0
20							0	0
				299,791	264,946	283,837	27,163	15,954

Part IV, Line 58 (990) - Other Assets

		225,266	173,784
Description		Beginning	End
1	Due from operating fund	225,266	173,784
2			
3			
4			
5			
6			
7			
8			
9			
10			

Part IV, Line 65 (990) - Other Liabilities

		380,266	513,784
Description		Beginning	End
1	Notes and leases payable	155,000	340,000
2	Due to restricted fund	225,266	173,784
3			
4			
5			
6			
7			
8			
9			
10			

Part IV-A, Line d(2) (990) - Reconciliation of Rev per Audited Financial Stmts

		390,405
		Amount
1	In-kind revenues	390,405
2		
3		
4		
5		
6		
7		
8		
9		
10		

Part IV-B, Line b(4) (990) - Reconciliation of Exp per Audited Financial Stmt

		390,405
		Amount
1	In-kind expenses	390,405
2		
3		
4		
5		
6		
7		
8		
9		
10		

Part VI, Line 91b (990) - Authority over a Financial Account in a Foreign Country

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)?

If "Yes," enter the name of the foreign country

1	Rwanda
2	Congo (Democratic Republic)
3	
4	
5	
6	
7	
8	
9	
10	

Part VI, Line 91c (990) - Offices Maintained Outside the U.S.

At any time during the calendar year, did the organization maintain an office outside of the United States?
If "Yes," enter the name of the foreign country

1	Rwanda
2	Congo (Democratic Republic)
3	
4	
5	
6	
7	
8	
9	
10	

Part VIII (990) - Relationship of Activities to the Accomplishment of Exempt Purposes

	Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	102	Sales of items bearing likeness of a mountain gorilla to stimulate and enhance public awareness, interest and
2		appreciation of the mountain gorilla.
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
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14		
15		
16		
17		
18		
19		
20		

Dlan Fossey Gorilla Fund International
Fixed Asset/Depreciation Schedule
September 30, 2008

SGW
3/18/09

G/L Account #	Description	Date Acquired	Method/ Life	Cost	Accum. Depr. 09/30/07	2008 BEG BV	Depr. Exp. 09/30/08	Accum. Depr. 09/30/08	2008 Ending BV
1301	Furniture-Domestic								
	Work Stations	12/91	S-L/5	2,400.00	2,400.00	0.00	0	2,400.00	0.00
	Conference room chairs	12/91	S-L/5	600.00	600.00	0.00	0	600.00	0.00
	Shelves	01/31/92	S-L/5	503.37	503.37	0.00	0	503.37	0.00
	Furniture(Pat)	12/31/92	S-L/5	2,048.99	2,048.99	0.00	0	2,048.99	0.00
	Gift in Kind	06/30/94	S-L/5	705.00	705.00	0.00	0	705.00	0.00
	2 big desks, executive chair & 4 shelving units	06/31/02	S-L/5	1,501.00	1,400.93	100.07	100.07	1,501.00	(0.00)
	Furnishings for new office	01/31/05	S-L/7	5,429.36	2,068.33	3,361.03	775.62	2,843.95	2,585.41
1302	Balance per Audit, 9/30/08			13,187.72	9,726.62	3,461.10	875.69	10,602.31	2,585.41
	Balance per GL, 9/30/08			13,187.72	9,726.61	3,461.11	1,075.82	10,802.43	2,385.29
	Variance			0.00	0.01	(0.01)	(200.13)	(200.12)	200.12
1307	Software-Domestic								
	Blackbaud & Install	08/05/92	S-L/5	13,265.50	13,265.50	0.00	0	13,265.50	0
	Blackbaud Budget	05/31/94	S-L/5	1,250.00	1,250.00	0.00	0	1,250.00	0
	Rec Software	06/30/94	S-L/5	1,203.00	1,203.00	0.00	0	1,203.00	0
	Great Plains	03/01/95	S-L/5	3,500.00	3,500.00	0.00	0	3,500.00	0
	Software-Dieter	03/01/99	S-L/5	627.63	627.63	(0.00)	0	627.63	0
	Blackbaud Software	02/18/00	S-L/5	3,225.00	3,225.00	0.00	0	3,225.00	0
	Peachtree Accounting Software	05/30/01	S-L/5	587.43	587.43	0.00	0	587.43	0
	Blackbaud Software	10/16/07	S-L/5	6,572.83			1,314.57	1,314.57	5,258.26
1308	Balance per Audit, 9/30/08			30,231.39	23,658.56	0.00	1,314.57	24,973.12	5,258.26
	Balance per GL, 9/30/08			30,231.39	23,658.56	0.00	0.00	23,658.56	6,572.83
	Variance			0.00	(0.00)	0.00	1,314.57	1,314.56	(1,314.57)
000-1171-000	Equipment-Domestic								
	Dell Computer-Laptop	04/14/03	S-L/5	2,702.82	2,432.53	270.29	270.29	2,702.82	(0.00)
	Dell Accounting Computer	05/14/03	S-L/5	1,658.49	1,465.01	193.48	193.48	1,658.49	0.00
	Dell Computer-Netzin Steklis	05/14/03	S-L/5	2,798.05	2,471.61	326.44	326.44	2,798.05	(0.00)
	Dell Computer	04/30/04	S-L/5	7,072.45	4,832.84	2,239.61	1,414.49	6,247.33	825.12
	LCD Projector	04/30/04	S-L/5	1,039.99	932.52	107.47	107.47	1,039.99	0.00
	Dell Computer Products	06/05/04	S-L/5	335.93	293.38	42.55	42.55	335.93	0.00
	HP Parts	06/05/04	S-L/5	73.83	64.48	9.35	9.35	73.83	0.00
	HP Direct SMB	08/05/04	S-L/5	1,934.91	1,624.25	310.66	310.66	1,934.91	0.00
	Cameras (KRC)	10/01/04	S-L/5	1,090.00	751.83	338.17	218.00	969.83	120.17
	Averatec Laptop (Mika)	03/04/05	S-L/3	1,328.01	693.52	634.49	265.60	959.12	368.89
	Dell Latitude D610 Laptop (KRC)	04/26/05	S-L/3	1,292.75	637.04	655.71	258.55	895.59	397.16
	Dell Inspiron 6000 Laptop (KRC)	04/27/05	S-L/3	1,243.08	611.87	631.21	248.62	860.49	382.59
	Dell Laptop	06/07/05	S-L/3	1,191.09	559.15	631.94	238.22	797.37	393.72
	Dell Laptop-CIare	07/22/05	S-L/3	1,720.32	764.59	955.73	344.06	1,108.65	611.67
	Golf Cart	09/23/05	S-L/5	2,500.00	1,023.61	1,476.39	500.00	1,523.61	976.39
	HP Color Printer	09/30/05	S-L/3	2,798.00	1,134.74	1,663.26	559.60	1,694.34	1,103.66
	Dell workstation	01/23/06	S-L/3	1,373.76	610.56	763.20	274.75	885.31	488.45
	Dell workstation	02/28/06	S-L/3	1,178.28	458.22	720.06	235.66	693.88	484.40
1305	Balance per Audit, 9/30/08			111,081.14	99,111.13	11,970.01	5,817.79	104,928.92	6,152.22
	Balance per GL, 9/30/08			111,081.14	99,111.13	11,970.01	1,732.07	100,843.20	10,237.94
	Variance			-	(0.00)	0.00	4,085.72	4,085.72	(4,085.72)
000-1173-000	Leasehold Improvements								
	Office space remodeling	01/28/05	S-L/5	1,900.00	1,013.33	886.67	380.00	1,393.33	506.67
	Carpet for new office	02/01/05	S-L/5	1,278.34	681.78	596.56	255.67	937.45	340.89
1311	Balance per Audit, 9/30/08			36,726.29	35,243.07	1,483.22	635.67	35,878.74	847.55
	Balance per GL, 9/30/08			36,726.29	35,243.08	1,483.21	635.67	35,878.75	847.54
	Variance			-	(0.01)	0.01	-	(0.01)	0.01
000-1175-000	Vehicles-International								
	SUV	04/30/01	S-L/3	7,000.00	7,000.00	(0.00)		7,000.00	
	SUV	08/08/01	S-L/3	18,000.00	18,000.00	0.00		18,000.00	
	SUV	02/28/02	S-L/3	10,700.00	10,700.00	0.00		10,700.00	
	Toyota Camry, Nissan Sunny	01/08/03	S-L/3	3,600.00	3,600.00	0.00		3,600.00	
	Deposit for Motorcycle	10/31/02	S-L/3	1,010.00	1,010.00	(0.00)		1,010.00	
	Toyota Land Cruiser Hard Top	04/19/04	S-L/3	36,400.00	36,400.00	(0.00)		36,400.00	
	Toyota Land Cruiser Hard Top	06/07/06	S-L/3	30,744.00	20,496.00	10,248.00	10,248.00	30,744.00	
1321	Balance per Audit, 9/30/08			107,454.00	97,206.00	10,248.00	10,248.00	107,454.00	(0.00)
	Balance per GL, 9/30/08			107,454.00	97,206.00	10,248.00	10,248.00	107,454.00	-
	Variance			-	0.00	(0.00)	-	0.00	(0.00)
	Total Per Schedule			298,680.54	264,945.38	27,162.33	18,891.72	283,837.09	14,843.45
	Total Per G/L			298,680.54	264,945.38	27,162.33	13,691.56	278,636.94	20,043.60
	variance			-	(0.00)	0.00	5,200.16	5,200.15	(5,200.15)

Dian Fossey Gorilla Fund International
 52-1118866
 YE 9/30/08

Form 990, Part V-A

Current Officers, Directors, Trustees and Key Employees

Name	Street Address	City	State	Zip Code	Title	Type Entity Individual	Hours per Week	Compensation	Contributions to		Expense Accounts
									Emp	Benefits	
3 Christian Bale	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
4 Sibi Bale	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
5 Lynn Flanders	800 Cherokee Ave.	Atlanta	GA	30315	Treasurer	X	4	0	0	0	0
6 Gilbert Boese	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
7 William Foster	800 Cherokee Ave.	Atlanta	GA	30315	Past Chair	X	4	0	0	0	0
8 Lawrence Ellison	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
9 Nick Faust	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
10 Glenn Felner	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
11 Judith C. Harris	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
12 Wayne Ferguson	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
13 Gil Grosvenor	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
14 Terry Harps	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
15 Andy Serkis	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
16 Janice Gleason Skow	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
17 Richard A. Horder	800 Cherokee Ave.	Atlanta	GA	30315	Vice Chair	X	4	0	0	0	0
18 Gary G. Striker	800 Cherokee Ave.	Atlanta	GA	30315	Chairman	X	4	0	0	0	0
19 Dennis W. Kelly	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
20 Daniel K. Thorne	800 Cherokee Ave.	Atlanta	GA	30315	Secretary	X	4	0	0	0	0
21 Manuel A. Mollinedo	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
22 Joanne Truffleman	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
23 Ruth Musgrave	800 Cherokee Ave.	Atlanta	GA	30315	Vice Chair	X	4	0	0	0	0
24 Sandy Price	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
25 Terry L. Maple	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
26 R. Kenton Musgrave	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0
27 Mary G. Smith	800 Cherokee Ave.	Atlanta	GA	30315	Member	X	4	0	0	0	0