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

Oversight hearing on "The Endangered Species Act: How Litigation is Costing Jobs and Impeding True Recovery Efforts."

For Individuals:
1. Name:
2. Address:
3. Email Address:
4. Phone Number:
* * * *
For Witnesses Representing Organizations:
1. Name: Kierán Suckling
2. Name of Organization(s) You are Representing at the Hearing: Center for Biological Diversity
3. Business Address: PO Box 710 Tucson, AZ 85702
4. Business Email Address: [Information redacted for privacy]
5. Business Phone Number:

[Information redacted for privacy]

Name/Organization: Kieran Suckling, Center for Biological Diversity

Title/Date of Hearing: The Endangered Species Act: How Litigation is Costing Jobs and Impeding True Recovery Efforts, December 6, 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.

BA Philosophy, College of the Holy Cross, 1987.

MA Philosophy, State University of New York at Stony Brook, 1998.

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.

None

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.

Founded the Center for Biological Diversity in 1989, currently serving as Executive Director.

"At the Center for Biological Diversity, we believe that the welfare of human beings is deeply linked to nature — to the existence in our world of a vast diversity of wild animals and plants. Because diversity has intrinsic value, and because its loss impoverishes society, we work to secure a future for all species, great and small, hovering on the brink of extinction. We do so through science, law and creative media, with a focus on protecting the lands, waters and climate that species need to survive. e want those who come after us to inherit a world where the wild is still alive."

Worked as a contractor for the U.S. Forest Service doing wildlife surveys, 1989-93.

Publications:

Suckling, K.F. 2006. Measuring the Success of the Endangered Species Act, Recovery Trends in the Northeastern United States. Center for Biological Diversity, Tucson, AZ.

Suckling, K.F. 2007. Frogs. In: Bernheimer, K. (ed.) Brothers and Beasts: An Anthology of Men on Fairy Tales (Wayne State University Press)

Suckling, K.F. and W. Hodges. 2007. Status of the bald eagle in the Lower 48 states and the District of Columbia. Center for Biological Diversity, Tucson, AZ.

http://www.biologicaldiversity.org/species/birds/bald_eagle/report/index.html

Suckling. K.F. 2008. Three catastrophes, one sky. Terrain, v22, Summer/Fall 2008. http://www.terrain.org/columns/22/guest.htm

Suckling, K.F. and M.F.J. Taylor. 2006. Critical habitat and recovery. In: Gobel, d., Scott, MJ, Davis, FW. (eds.) The Endangered Species Act at Thirty: Renewing the Conservation Commitment. Island Press, Washington DC. P.76.

Suckling, K.F. 2000. A House on Fire: Connecting the Biological and Linguistic Diversity Crises. Animal Law 6:193-202.

Suckling, K.F. 2000. Biodiversity, Linguistic Diversity And Identity - toward an ecology of language in an age of extinction. Language 17:14-20. www.terralingua.org/Language/LS17.pdf

Name/Organization Kieran Suckling, Center for Biological Diversity

Title/Date of Hearing: The Endangered Species Act: How Litigation is Costing Jobs and Impeding True Recovery Efforts, December 6, 2011

<u>Publications</u>: (cont.)

Suckling, K.F., R. Slack, and B. Nowicki. 2004. Extinction and the Endangered Species Act. Center for Biological Diversity, Tucson, AZ. www.biologicaldiversity.org/swcbd/programs/policy/esa/eesa.html

Allen, C.D., M. Savage, D.A. Falk, K.F. Suckling, T.W. Swetnam, T. Schulke, P.B. Stacey, P. Morgan, M. Hoffman, and J. Klingel. 2002. Ecological restoration of southwestern ponderosa pine ecosystems: A broad perspective. Ecological Applications 12(5):1418-1433. wwwpaztcn.wr.usgs.gov/fire/ponderosa_rest.pdf

Taylor, M.F.J., K.F. Suckling and J.J. Rachlinski. 2005. The Effectiveness of the Endangered Species Act: A Quantitative Analysis BioScience 55(4):360-367.

www.biologicaldiversity.org/swcbd/programs/policy/ch/sub1.html

Greenwald, D.N., D.C. Crocker-Bedford, L. Broberg, K.F. Suckling, and T. Tibbetts. 2005. A review of northern goshawk habitat selection in the home range and implications for forest management in the western United States. Wildlife Society Bulletin, 33, 120-129.

Greenwald D.N., K.F. Suckling and M.F.J. Taylor. 2006. Factors affecting the rate and taxonomy of species listings under the US Endangered Species Act. In Gobel, D, M.J. Scott and F.W. Davis (eds.) The Endangered Species Act at Thirty: Renewing the Conservation Commitment. Washington (DC): Island Press.

Greenwald, D.N., K.F. Suckling and M.F.J. Taylor, 2006. The listing record. In: Gobel, d., Scott, MJ, Davis, FW. (eds.) The Endangered Species Act at Thirty: Renewing the Conservation Commitment. Island Press, Washington DC. P.55.

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

None

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.

None.

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.

Executive Director, Center for Biological Diversity

Name/Organization Kieran Suckling, Center for Biological Diversity Title/Date of Hearing: The Endangered Species Act: How Litigation is Costing Jobs and Impeding True Recovery Efforts, December 6, 2011

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) 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).

None.

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).

Over the past five years, the Center has filed on average about 48 lawsuits a year. A significant portion of these (about 20%) are not federal cases. About half the federal cases are brought under the Endangered Species Act, while the remainder include claims under the National Environmental Policy Act, Clean Air Act, Clean Water Act, Freedom of Information Act, National Forest Management Act, and quite a few other federal laws. Recent federal cases include:

- -a challenge filed in Nebraska federal court to route-clearing work that's being done on the Keystone XL Pipeline before the State Department issued its approvals
- -a suit to protect Gulf of Mexico sea turtles from drowning caused by shrimp trawling
- -a suit challenging as unconstitutional the Congressional bid to override a federal court and remove federal protection for the Rocky Mountain wolf population
- -a set of lawsuits challenging late decisions on Endangered Species Act listing petitions that resulted in a settlement with the Fish and Wildlife Service to make listing decisions on 757 species faced with extinction
- -the 2007 lawsuit that resulted in revision of the politically motivated 2005 critical habitat designation for the Santa Ana sucker.
- 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)).

2008 990 Form -- http://www.biologicaldiversity.org/publications/reports/CBD_2008_990_amended.pdf

2009 990 Form -- http://www.biologicaldiversity.org/publications/reports/CBD-990-form_2009.pdf

2010 990 Form -- http://biologicaldiversity.org/publications/reports/CBD 2010 990.pdf

Department of the Treasury

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)

Inte	rnal Rev	enue Servi	ice	u The o	organization may ha	ave to use a co	py of this return to satisfy	state re	porting requir	emen	ts.	l Îr	nspection	on
<u>A</u>	For the	e 2010 cal	endar yea	ır, or tax year beg	ginning	,	and ending							
В	Check if a	applicable:	C Name	of organization						D	Emplo	yer identif	ication n	umber
Ш	Address of	change			CENTER FOR	BIOLOGIC	CAL DIVERSITY I	NC						
	Name cha	ange	Doing	Business As							85-	04202	85	
H		Ü	Numbe	er and street (or P.C	O. box if mail is not de	elivered to street a	address)	F	Room/suite	E		one number		
님	Initial retu	ım	PO :	BOX 710							520	-623-	5252	
Ш	Terminate	ed	City or	town, state or cour	ntry, and ZIP + 4									
	Amended	l return	TUC	SON		AZ 857	02			G G	ross recei	pts \$	8,101	,675
同	Annlicatio	on pending	F Name	and address of prin	ncipal officer:								$\overline{\neg}$	
ш	Applicatio	ni penuing	KIE	RAN SUCK	KLING				H(a) Is this a	group re	eturn for a	ffiliates?	Yes	X No
			PO	BOX 710					H(b) Are all	affiliate	s includ	ed?	Yes	∐ No
				CSON		AZ 8	35702		If "N	No," att	ach a lis	st. (see instr	uctions)	
$\overline{}$	Tax-exe	empt status			01(c) () t	(insert no.)	4947(a)(1) or 527							
J					LDIVERSIT		10 11 (4)(1) 01 021		H(c) Group	exemp	tion nun	nber 1.1		
ĸ		organization:		orporation Trust		Other u		I Yea	r of formation:			M State of I	egal domicil	e: NM
	Part I		ımmary		7.5500.00.01	Other C2			or formation.			orac or i	sgar dornicii	<u>. 1111</u>
_					mission or most sid	nificant activitie							-	-
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Ô	2						or disposed of more than	1 25% 01	its net asser	s.	ا ہ	6		
⋖ర	3				governing body (Pa						3	6		
Activities	4	Number o	of indeper	ndent voting men	nbers of the govern	ning body (Part	VI, line 1b)				4	3		
ΞΞ	5					r 2010 (Part V,	line 2a)				5	68		
Ac	6			olunteers (estima							6			
											7a			
_	b	Net unrela	ated busi	ness taxable inco	ome from Form 99	0-T, line 34		<u> </u>			7b			0
		0			P 41.				Prior Ye		-г1		rrent Year	
ē	8	Contributi	ions and	grants (Part VIII,	line 1h)				6,18			/	<u>, 229</u>	
Revenue	9							1,19					<u>,613</u>	
Š	10				nn (A), lines 3, 4, a				6	9,5			<u> 14 </u>	<u>,104</u>
_	11	Other rev	enue (Pa	rt VIII, column (A	A), lines 5, 6d, 8c, 9	9c, 10c, and 11	e)	📙			L92		<u>1</u>	<u>,739</u>
							ı (A), line 12)		7,44			7	,989	
	13	Grants ar	nd similar	amounts paid (F	Part IX, column (A)	, lines 1–3)			2	18,8	350		3	<u>,250</u>
					art IX, column (A),									
Ś	15	Salaries,	other con	npensation, empl	loyee benefits (Par	t IX, column (A	a), lines 5–10)		3,56			3	<u>,</u> 773 ,	
nses		Profession	nal fundra	aising fees (Part	IX, column (A), line	e 11e)		L	21	5,0)82		120	,244
Exper	. b	Total fund	draising e	xpenses (Part IX	(, column (D), line	25) u	438,161							
ш	17				A), lines 11a-11d,	446.040			1,94	9,9	54	2	,406	,758
	18	Total exp	enses. Ad	dd lines 13–17 (r	must equal Part IX,	column (A), lin	e 25)		5,75	5,1	26	6	,304	,100
_	19								1,69			1	,685,	,159
or	ξί.								Beginning of Cu			En	d of Year	
sets	20	Total asse	ets (Part	X, line 16)				L	8,33			9	,999 _.	
Net Assets	21	Total liabi	ilities (Pai	rt X, line 26)				L	18	3,5	522		160	,286
Ž,	22	Net asset	ts or fund	balances. Subtra	act line 21 from lin	e 20			8,15	3,7	780	9	,838,	,939
F	Part II	Sig	gnature	Block										
U	Jnder per	nalties of pe	erjury, I de	clare that I have ex	camined this return, in	cluding accompar	nying schedules and statemen	nts, and to	the best of m	y know	vledge a	nd belief, it	is	
tr	rue, corre	ect, and cor	mplete. De	claration of prepare	er (other than officer) i	s based on all info	ormation of which preparer ha	as any kn	owledge.					
Sig	gn	S	Signature o	f officer							Date			
He	_		KIER	RAN SUCKI	LING		EXE	CUT:	IVE DII	REC'	TOR			
		 		nt name and title										
		+ -	pe preparei			Preparer's signa	ature		Date		Check	if PT	IN IN	
Pai	id			DWIG, CPA							self-em		" ' 0053913	32
	eparer				G KLEWER 8	& CO. PI	LLC		'	Firm's			45382	
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Part III	Statement of Program Service Accomplishments	_
		Χ
,	escribe the organization's mission:	
	ENTER FOR BIOLOGICAL DIVERSITY WORKS THROUGH SCIENCE, LAW AND CREATIVE	<u>.</u>
	TO SECURE A FUTURE FOR ALL SPECIES, GREAT OR SMALL, HOVERING ON THE	
RKTNK.	OF EXTINCTION.	
2 Did the d	organization undertake any significant program services during the year which were not listed on the	_
		Nο
•	m 990 or 990-EZ? Yes X describe these new services on Schedule O.	10
	organization cease conducting, or make significant changes in how it conducts, any program	
services		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, th	ne total expenses, and revenue, if any, for each program service reported.	
	1 500 044	
4a (Code:) (Expenses \$ 1,578,744 including grants of \$ 2,100) (Revenue \$)
	ENTER'S PUBLIC LANDS PROGRAM AIMS TO ENSURE THAT OUR PUBLIC LANDS AND	
	ARE PROTECTED, RESTORED AND MANAGED FOR THE MAXIMUM BENEFIT TO OUR	
NŸİTÖÜ	I'S WILDLIFE AND ECOSYSTEMS.	
4b (Code:) (Expenses \$ $1,114,641$ including grants of \$) (Revenue \$)
	ENTER'S CLIMATE PROGRAM WORKS TO REDUCE U.S. GREENHOUSE GAS EMISSIONS	
	IR POLLUTION TO PROTECT BIOLOGICAL DIVERSITY AND THE ENVIRONMENT. IC OBJECTIVES INCLUDE SECURING PROTECTIONS FOR SPECIES THREATENED BY	
	FIC OBJECTIVES INCLUDE SECURING PROTECTIONS FOR SPECIES THREATENED BY MPACTS OF GLOBAL WARNING, ENSURING COMPLIANCE WITH APPLICABLE LAW	
	DER TO REDUCE GREENHOUSE GAS EMISSIONS, AND EDUCATING AND MOBILIZING	
	IBLIC ON GLOBAL WARMING ISSUES	
-~	DDITE ON GLODAL WARFIING IDDUED.	
	1.005.755	_
4c (Code:) (Expenses \$ 1,335,766 including grants of \$ 150) (Revenue \$)
	ENTER'S ENDANGERED SPECIES PROGRAM WORKS TO PROTECT AND RECOVER	
	LED PLANTS AND ANIMALS AND THEIR HABITAT. THIS IS ACCOMPLISHED	
ADVOCA	CH A VARIETY OF TOOLS INCLUDING SCIENTIFIC RESEARCH, POLICY AND LEGAL ACY, AND GRASSROOTS ORGANIZING.	
AD A OCE	CI, AND GRASSROOIS ORGANIZING.	
`	ogram services. (Describe in Schedule O.)	
(Expense	es \$ 1,428,471 including grants of \$ 1,000) (Revenue \$)	

If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Χ complete Schedule A Χ Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 Χ 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes." complete Schedule C. Χ 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," Χ complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, Χ the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art. historical treasures, or other similar assets? If "Yes." Χ complete Schedule D, Part III 8 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," Χ complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part V Χ If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Χ 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Χ 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV 14b Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 Χ to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Χ 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Χ Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20a

Form 990 (2010) CENTER FOR BIOLOGICAL DIVERSITY INC Page 4 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations Χ in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States Χ on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 Χ 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 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 Χ 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Χ 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? Χ If "Yes," complete Schedule L, Part III 27 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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Χ 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 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 IV, and V, line 1 Χ 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? Χ 35 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Yes X No Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Χ related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

Part VI

19? Note. All Form 990 filers are required to complete Schedule O

Form **990** (2010)

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Form 990 (2010) CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	47			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c	X	
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	68			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
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 auth	nority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ial				
	account)?			4a		Х
b	If "Yes," enter the name of the foreign country: u					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Acceptable 1.	counts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction					Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		<u> </u>
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?			<u>6a</u>	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or			3.7	
_	gifts were not tax deductible?			6b	X	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo			70	Х	
h	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?			<u>7a</u> 7b	X	
b c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				- 21	
·	required to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				72
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contri			7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?					X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	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:	1 1				
а	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 10	1 1		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40-		
а				13a		
h	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
С		13c				
14a	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					

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.

	Check if Schedule O contains a response to any question in this Part VI		<u></u>	X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	. 2		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?	. 3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	. 5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	. 7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	. 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	01-	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. 9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue		.)	
	· · · · · · · · · · · · · · · · · · ·		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	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?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11a	Х	
b	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 12	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	.		
·		12c	Х	
13	Does the organization have a written whistleblower policy?		X	
14	Done the consciention have a written decreased extention and destruction relies 0	1 44	X	
15	Did the process for determining compensation of the following persons include a review and approval by		- 25	
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•		15a	Х	
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	451	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	. 130	<i>A</i>	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
104	with a tayable entity during the year?	16a		Х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	. 10a		Λ
b	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
		4Ch		
500	organization's exempt status with respect to such arrangements?	. 16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed u AZ, CA			
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: u LINDA WELLS, DIRECTOR OF FINANCE PO BOX 710			<u></u>
ΤŢ	JCSON AZ 85702-0710 5:	20-62	3 - 5	252

Form **990** (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

DAA

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

Check this box if neither the organ	nization nor any	relat	ed o	rgani	zatic	ns c	ompe	ensated any current officer,	director, or trustee.	
(A) Name and Title	(B) Average hours per				all t	hat ap	oply)	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) GALVIN, PETER J	F0.00							06 500		15.000
DIRECTOR	50.00	Х						96,580	0	15,098
(2) SILVER, ROBIN D DIRECTOR	50.00	Х						88,255	0	17,196
(3) SCHULKE, TODD D DIRECTOR	50.00	Х						53,870	0	14,705
(4) OLAJOS, MARCEY CHAIRPERSON	2.00	Х		Х				0	0	0
(5) MEYER, KATHERINE DIRECTOR	1.00	Х						0	0	0
(6) POWER, SCOTT DIRECTOR	1.00	Х						0	0	0
(7) ZILL, STEPHANIE TREASURER	2.00	Х		Х				0	0	0
(8) SUCKLING, KIERAN	F									
EXEC DIR	50.00			Х				114,500	0	18,269
(9) BERGMAN, SARAH SECRETARY	40.00			Х				63,610	0	8,949
(10) HENDRICKS, BRENT	R									
SECRETARY (11)	40.00			Х				39,968	0	13,706
(12)										
(13)										
(14)										
(15)										
(16)										

Pa	rt VII Section A. Officers,	Directors, Trus	tees	, Ke	y Em	ploy	yees,	, and	d Highest Compensated E	imployees (continued)			-	J
	(A) Name and Title	(B) Average	Pos	ition ((C check		hat ap	oply)	(D) Reportable	(E) Reportable		(F) Estima	ited	
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	,	amour othe ompens from torganiza and relation	er sation the ation ated	
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)	3)													
(24)	·													
(25)														
(26)														
(27)														
(28)														
1b	Sub-total							u	456,783				87,	923
С	Total from continuation shee							u	456 502					
d 2	Total (add lines 1b and 1c) . Total number of individuals (inc								who received more than \$1	00.000 in			87,	923
	reportable compensation from t	_		1				,,,,						
											1		Yes	No
3	Did the organization list any for employee on line 1a? If "Yes,"	·				•		•	ee, or highest compensated			3		Х
4	For any individual listed on line organization and related organization							tion a	and other compensation fror	m the				
	individual											4		Х
5	Did any person listed on line 1a for services rendered to the org											5		Х
Sec	tion B. Independent Contracto													
1	Complete this table for your five compensation from the organization		nsate	ed in	depe	nder	nt cor	ntrac	ctors that received more than	n \$100,000 of				
	Name and	(A) business address							Descript	(B) tion of services		Co	(C) mpensati	ion
	VALON CONSULTING GR	OUP				115	0 1		TH STREET NW SUIT					
<u>W</u> .	WASHINGTON DC 20036								CONSULTING				102	,131
2	Total number of independent co	ontractors (includ	ing b	ut no	ot lim	ited	to th	ose	listed above) who					
	received more than \$100,000 in	n compensation f	rom	the c	organ	izatio	on u	ı		1				

Pa	<u>rt V</u>	III Staten	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s s	1a	Federated can	npaigns	1a						2 , 2 2 , 2 2
Contributions, gifts, grants and other similar amounts	b	Membership d		1b						
₽,E	<u>~</u>	Fundraising ev		1c						
ifts ar a	d			1d						
3, 11,0	۵	Government grants		1e						
ons:	,	All other contribution								
Per	'	and similar amounts	0 0	1 _f	7	,229,803				
E T						109,901				
and	g		ns included in lines 1a-				7 220 002			
	n	I otal. Add line	s 1a–1f				7,229,803			
Program Service Revenue						Busn. Code	605 001	605 001		
eve	2a		ETTLEMENT				685,981	685,981		
e e	b		HIP LIST REN				50,278	50,278		
νic	С	UNIVERS	ITY CONTRACT	S			7,354	7,354		
Sel	d									
am	е									
.og	f	All other progra	am service rever	nue						
<u>-</u>	g	Total. Add line	s 2a–2f			u	743,613			
	3		ome (including o							
		and other simil	ar amounts)			u	14,303			14,303
	4		vestment of tax-							
	5	Royalties	<u> </u>			u				
			(i) Real			Personal				
	6a	Gross Rents								
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
	d	Net rental inco	me or (loss)			u				
		Gross amount from	(i) Securities) Other				
		sales of assets other than inventory	109	,350						
	h	Less: cost or other		, 555						
	~	basis & sales exps.	109	,549						
		Gain or (loss)		-199						
	c d		ss)				-199	-199		
			om fundraising ever			u	100	100		
ne	8a									
/en										
Re			eported on line 1c)							
Other Reven	١.		18							
₹			penses							
			(loss) from fund		vents .	u				
	9a		om gaming activities							
		See Part IV, line								
			penses							
			(loss) from gami	ing activi	ities	u				
	10a	Gross sales of	• •							
		returns and alle	owances	а		3,452				
		Less: cost of g		bL		2,867				
	С	Net income or	(loss) from sales	of inve	ntory		585	585		
		Misc	ellaneous Revenue)		Busn. Code				
	11a	OTHER INC	COME				1,154	1,154		
	b									
	С									
	d		ue							
	е	Total. Add line	s 11a-11d			u	1,154			
	12	Total revenue	. See instruction:				7,989,259	745,153	0	14,303

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).

	All other organizations must o	(A) but are	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service	Management and	Fundraising
	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and		expenses	general expenses	expenses
'	organizations in the U.S. See Part IV, line 21	2,250	2,250		
2	Grants and other assistance to individuals in	2,250	2,250		
_	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	1,000	1,000		
4	Benefits paid to or for members	,	,		
5	Compensation of current officers, directors,				
	trustees, and key employees	461,290	439,441	8,926	12,923
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	2,517,438	2,274,312	78,797	164,329
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	170,113	155,597	5,475	9,041
9	Other employee benefits	381,483	338,898	19,513	23,072
10	Payroll taxes	243,524	218,405	11,149	13,970
11	Fees for services (non-employees):				
а	Management				
b	Legal	245,858	189,603	56,255	
С	Accounting	10,780		10,780	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	120,244			120,244
f	Investment management fees				
g	Other	332,538	237,939	94,599	
12	Advertising and promotion	20,207	20,100	107	4 60 5
13	Office expenses	41,914	34,117	3,192	4,605
14	Information technology				
15	Royalties	010 550	002 040	0 077	2 722
16	Occupancy	210,552	203,842	2,977 5,567	3,733
17	Travel	229,212	220,543	5,50/	3,102
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	34,502	31,218	1,509	1,775
19	Conferences, conventions, and meetings	34,302	31,210	1,309	1,773
20 21	Interest				
22	Payments to affiliates Depreciation, depletion, and amortization	71,867	63,661	3,048	5,158
23		29,131	11,560	16,167	1,404
23 24	Insurance Other expenses. Itemize expenses not covered	۵۶, ۱۵۲	11,500	10,107	1,101
27	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а	INTERNET ORGANIZING	593,445	593,445		
b	POSTAGE	211,504	152,320	9,556	49,628
С	TELEPHONE AND INTERNET	122,908	114,573	1,776	6,559
d	PRINTING	110,962	94,590	3,957	12,415
е	BANK CHARGES	69,110		69,110	
f	All other expenses	72,268	60,208	5,857	6,203
25	Total functional expenses. Add lines 1 through 24f	6,304,100	5,457,622	408,317	438,161
26	Joint costs. Check here u X if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational				
	campaign and fundraising solicitation	387,260	106,014	4,901	276,345
DAA					Form 990 (2010)

Pa	rt X	Balance Sheet					<u> </u>
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest bearing			1,548,001	1	720,363
	2	Savings and temporary cash investments			5,135,988	2	3,694,758
	3	Pledges and grants receivable, net			1,461,805	3	868,332
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, tru	stees, key				
		employees, and highest compensated employees. Comple	te Part II o	f			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined ur	nder section	1			
		4958(f)(1)), persons described in section $4958(c)(3)(B)$, an	d contributi	ng			
		employers and sponsoring organizations of section 501(c)(
		employees' beneficiary organizations (see instructions)				6	
ets	7	Notes and loans receivable, net				7	20,000
Assets	8	Inventories for sale or use			10,497	8	9,076
⋖	9	Prepaid expenses and deferred charges	,		19,659	9	31,184
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	518,791			
	b	Less: accumulated depreciation	10b	425,924	142,596	10c	92,867
	11	Investments—publicly traded securities				11	46,931
	12	Investments—other securities. See Part IV, line 11				12	4,496,758
	13	Investments—program-related. See Part IV, line 11 \dots	13				
		Intangible assets				14	
	15	Other assets. See Part IV, line 11			18,756	15	18,956
	16	Total assets. Add lines 1 through 15 (must equal line 34)			8,337,302	16	9,999,225
	17	Accounts payable and accrued expenses			183,522	17	160,286
		Grants payable				18	
	19	Deferred revenue				19	
- 1		Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete Part IV of S				21	
≅	22	Payables to current and former officers, directors, trustees					
Liabilities		employees, highest compensated employees, and disquali	fied person	s.			
		Complete Part II of Schedule L				22	
- 1		Secured mortgages and notes payable to unrelated third p				23	
	24	Unsecured notes and loans payable to unrelated third parti	es			24	
	25	Other liabilities. Complete Part X of Schedule D			102 502	25	160 206
$\overline{}$	26	Total liabilities. Add lines 17 through 25			183,522	26	160,286
Balances		Organizations that follow SFAS 117, check here \mathbf{u}	and com	piete			
<u>ا ۾</u>	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			3,445,114	27	6,012,784
39					4,708,666		3,826,155
		Temporarily restricted net assets Permanently restricted net assets			±,/00,000	28 29	J,040,133
Fund	23	Permanently restricted net assets Organizations that do not follow SFAS 117, check here				23	
Ē.		complete lines 30 through 34.	· u °	and			
<u>o</u>	30				30		
ets		Paid-in or capital surplus, or land, building, or equipment fu	· · · · · · · · · · · · · · · · · · ·		31		
SS	31 32	Retained earnings, endowment, accumulated income, or o				32	
~					8,153,780	33	9,838,939
S	34	Total net assets or fund balances			8,337,302	34	9,999,225
	J-7	Total habilities and not assets/fully balances			0,337,302	J7	7,777,223

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Pa	art XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response to any question in this Part XI	<u>.</u>	<u></u>			$\perp \! \! \perp$
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,98		
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,30)4,1	<u> 100</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		1,68	35,1	<u> 159</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8,1	53,7	<u> 780</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6	Ī	9,83	38,9	939
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					П
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b				2b	Χ	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	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 separate basis, consolidated basis, or both:					
	X 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?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b		
	The state of the s			Form	990	(2010)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2010

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

CENTER FOR BIOLOGICAL DIVERSITY INC

Employer identification number 85-0420285

			CHNIER FOR D	TODOCICAL DIVERS	<u> </u>				0.5	0121	0205			
Pa	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this p	art.) S	ee ins	tructio	ns.			
The	orgai	nization is not a	a private foundation because	it is: (For lines 1 through 11, che	eck only or	ne box.)								
1		A church, cor	evention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A	۸)(i).							
2	П	A school desc	cribed in section 170(b)(1)(A)	(ii). (Attach Schedule E.)										
3	П	A hospital or	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii).								
4	П	•	·	in conjunction with a hospital de			70(b)(1)	(A)(iii).	Enter th	ne hospi	tal's name.			
	ш	city, and state		,, ,, ,,,			-(-/, /	`			,			
5		•		a college or university owned or	operated	by a gove	ernmenta	t de	scribed	in				
Ü	ш		b)(1)(A)(iv). (Complete Part I		operated	by a gove	J	ii driit de	зопоса					
6	\Box			,	tion 170/	h\/4\/ h \//								
6	\forall	·		vernmental unit described in sec	•	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		. 41		L II -				
7	X	-		ubstantial part of its support from	a govern	mentai un	it or from	tne gei	nerai pu	DIIC				
		described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8	Н	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9	Ш	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 inco	me (less	section 51	1 tax) fr	om busii	nesses					
	_	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	Ш	An organization	on organized and operated ex	clusively to test for public safety	. See sec	tion 509(a	a)(4).							
11	Ш	An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions (of, or to	carry ou	t the					
		purposes of c	ne or more publicly supporte	d organizations described in sec	tion 509(a)(1) or se	ction 509	9(a)(2). S	See sec	tion				
		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												
е	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			, , , ,	nination from the IRS that it is a	Type I. Ty	pe II. or T	vpe III s	upporting	a					
·		-	check this box) · ,)	, , ,	,, ,		,					
a		•		on accepted any gift or contribution	on from ar	ov of the								ш
g		following per		or accepted any girt of continuent	on nom a	1, 01 1110								
				strala aither alone or together wi	th noroon	doooribo	din (ii) c	nd				ſ	Yes	No
				ntrols, either alone or together wi	•						11.	/:\	163	140
			v, the governing body of the s								110			_
			member of a person describe	"							110			
		` '	ontrolled entity of a person de	*****							110	(III)		L
<u>h</u>			ollowing information about the				()			1		_		
(i)		e of supported anization	(ii) EIN	(iii) Type of organization	. ,	organization	(v) Did y	ou notify iization in	(vi) organizati	ls the			unt of	
	org	anization		(described on lines 1–9 above or IRC section		sted in your document?	col. (i)			zed in the	3	uppo	""	
				(see instructions))	, ,		supp	ort?	U.:	S.?				
					Yes	No	Yes	No	Yes	No				
(A)														
(B)														
(C)														
•														
(D)														
,														
(E)														
. ,														
									1					

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

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under

Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) u (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 5,295,401 7,825,898 3,502,252 6,182,551 7,229,803 30,035,905 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 3,502,252 5,295,401 7,825,898 6,182,551 7,229,803 30,035,905 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) 7,479,082 Public support. Subtract line 5 from line 4 22,556,823 Section B. Total Support Calendar year (or fiscal year beginning in) u (f) Total (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 Amounts from line 4 3,502,252 5,295,401 7,825,898 6,182,551 7,229,803 30,035,905 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 56,575 97,902 68.970 69,622 14,303 sources 307,372 Net income from unrelated business activities, whether or not the business is regularly carried on 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 30,343,277 Gross receipts from related activities, etc. (see instructions) 12 12 23,617 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 14 74.34% 15 Public support percentage from 2009 Schedule A, Part II, line 14 15 66.91% 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test—2009. 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 10%-facts-and-circumstances test—2010. 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 10%-facts-and-circumstances test—2009. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 instructions ______

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in) u	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual				.,		.,
2	grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	tion B. Total Support	T	T	T		T T	
	ndar year (or fiscal year beginning in) ${f u}$	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	s a section 501(c)	(3)	
	organization, check this box and stop here						▶
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2010 (line 8,	column (f) divided I	by line 13, column	(f))		15	%
16	Public support percentage from 2009 Sched						%
	tion D. Computation of Investmen						
17	Investment income percentage for 2010 (lin			column (f))			%_
18	Investment income percentage from 2009 S						<u>%</u>
19a	33 1/3% support tests—2010. If the organ			•	•		
	17 is not more than 33 1/3%, check this box	-					▶ □
b	33 1/3% support tests—2009. If the organ			·		·	▶ □
20	line 18 is not more than 33 1/3%, check this Private foundation. If the organization did						······ [

Schedule A (For	rm 990 or 990-EZ) 2010	CENTER FOR	BIOLOGICAL	DIVERSITY INC	85-0420285	Page 4
Part IV	Supplemental Info Part II, line 17a or instructions).	ormation. Complete 17b; and Part III, li	this part to provi ne 12. Also comp	de the explanations re ete this part for any a	equired by Part II, line 10; additional information. (See	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 **u** Complete if the organization is described below. **u** Attach to Form 990 or Form 990-EZ. **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

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

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

ivar	ne or organization CENTER FOR BIOLOGICA	י. הדעקספדייע דאוכ		85-042028	
Pai	t I-A Complete if the organization is exem		or is a section		
1	Provide a description of the organization's direct and indirect			· oz. organization	•
2	Political expenditures			u \$	
3	Volunteer hours			·········	
-				-	
Pai	t I-B Complete if the organization is exem	pt under section 501(c)	(3).		
1	Enter the amount of any excise tax incurred by the organiza			u\$_	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		u \$	
3	If the organization incurred a section 4955 tax, did it file Form	m 4720 for this year?			Yes No
4a	Was a correction made?				
b	If "Yes," describe in Part IV.				
Pa	t I-C Complete if the organization is exen	npt under section 501(c)	, except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	n for section 527 exempt function	1		
	activities			u \$,	
2	Enter the amount of the filing organization's funds contribute	ed to other organizations for sect	ion		
	527 exempt function activities			u \$	
3	Total exempt function expenditures. Add lines 1 and 2. Ente				
	line 17b			u\$_	
4	Did the filing organization file Form 1120-POL for this year?				Yes No
5	Enter the names, addresses and employer identification nur	nber (EIN) of all section 527 poli	tical organizations t	o which the filing	
	organization made payments. For each organization listed, $\boldsymbol{\varepsilon}$	enter the amount paid from the fi	ling organization's f	unds. Also enter	
	the amount of political contributions received that were pron	nptly and directly delivered to a s	separate political or	ganization, such	
	as a separate segregated fund or a political action committee	ee (PAC). If additional space is n	eeded, provide info	rmation in Part IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds. If none, enter -0	delivered to a separate
					political organization. If
					none, enter -0
(1)					
(2)					
(3)					
(4)					
<u></u>					
(5)					
(C)					
(6)					

Schedule C (Form 990 or 990-EZ) 2010 CENTER FOR BIOLOGICAL DIVERSITY	INC 85-0420	285 Page 2										
Part II-A Complete if the organization is exempt under section 501(c)(3) and	filed Form 5768 (ele	ection under										
section 501(h)).												
A Check u ☐ if the filing organization belongs to an affiliated group.												
B Check u if the filing organization checked box A and "limited control" provis	ions apply.											
Limits on Lobbying Expenditures (a) Filing (b) Affiliated												
(The term "expenditures" means amounts paid or incurred.)	organization's totals	group totals										
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	4,457											
b Total lobbying expenditures to influence a legislative body (direct lobbying)	6,298											
c Total lobbying expenditures (add lines 1a and 1b)	10,755											
d Other exempt purpose expenditures	5,855,184											
e Total exempt purpose expenditures (add lines 1c and 1d)	5,865,939											
Class the state of the control of the first term												

1	f Lobbying nontaxable amount. Enter the amount.	ount from the following table in both		
	columns.		443,297	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
9	Grassroots nontaxable amount (enter 25% of	of line 1f)	110,824	
				1

h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 Yes reporting section 4911 tax for this year?

4-Year Averaging Period Under Section 501(h)

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

Lol	bbying Expenditu	res During 4-Year	r Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	379,180	421,128	404,274	443,297	1,647,879
b Lobbying ceiling amount (150% of line 2a, column(e))					2,471,819
c Total lobbying expenditures	14,831	11,920	9,059	10,755	46,565
d Grassroots nontaxable amount	94,795	105,282	101,069	110,824	411,970
e Grassroots ceiling amount (150% of line 2d, column (e))					617,955
f Grassroots lobbying expenditures	3,993	4,633	4,457	4,457	17,540

Schedule C (Form 990 or 990-EZ) 2010

	(a	a)		(b)	
	Yes	No		Amo	unt	
year, did the filing organization attempt to influence foreign, national, state or local						
including any attempt to influence public opinion on a legislative matter or						
n, through the use of:						
or management (include compensation in expenses reported on lines 1c through 1i)?						
members, legislators, or the public?						
s, or published or broadcast statements?						
*						
ivities in line 1 cause the organization to be not described in section 501(c)(3)?						
ter the amount of any tax incurred under section 4912						
	(=\ <u></u>					
Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), c	or se	ction			
					Yes	No
tantially all (90% or more) dues received nondeductible by members?				1		
panization make only in-house lobbying expenditures of \$2,000 or less?				2		
				3		
"Yes."			swere	d		
		-				
for which the section 527(f) tax was paid).						
ar						
from last year		2b				
		2c				
amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
• • •						
*		4				
		5				
	1i. Also	Ο,				
TYPE OF CITE OF THE SECOND SEC	in, through the use of: 72 or management (include compensation in expenses reported on lines 1c through 1i)? 73 or managements? 74 or members, legislators, or the public? 75 on members, legislators, or the public? 75 on members, legislators, their staffs, government officials, or a legislative body? 75 on members, legislators, their staffs, government officials, or a legislative body? 75 other organizations for lobbying purposes? 75 tact with legislators, their staffs, government officials, or a legislative body? 75 other organizations, seminars, conventions, speeches, lectures, or any similar means? 76 vities? If "Yes," describe in Part IV 77 Il lines 1c through 1i 77 tivities in line 1 cause the organization to be not described in section 501(c)(3)? 77 onter the amount of any tax incurred under section 4912 78 organization incurred a section 4912 tax, did it file Form 4720 for this year? 78 Complete if the organization is exempt under section 501(c)(4), section 501(c) 79 501(c)(6). 79 Stantially all (90% or more) dues received nondeductible by members? 79 ganization make only in-house lobbying expenditures of \$2,000 or less? 79 ganization agree to carryover lobbying and political expenditures from the prior year? 79 Complete if the organization is exempt under section 501(c)(4), section 501(c) 79 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part III-A, lines 1 and 2 are answered "No" or if part II	m, through the use of: Proceedings	m, through the use of: Proceedings	m, through the use of:	m, through the use of:	m, through the use of: ?? or management (include compensation in expenses reported on lines 1c through 1i)? retrisements? or members, legislators, or the public? so, or published or broadcast statements? other organizations for lobbying purposes? tact with legislators, their staffs, government officials, or a legislative body? monostrations, seminars, conventions, speeches, lectures, or any similar means? wites? If "Yes," describe in Part IV lines 1c through 1i twitise in line 1 cause the organization to be not described in section 501(c)(3)? nter the amount of any tax incurred under section 4912 tret the amount of any tax incurred under section 4912 corganization incurred a section 4912 tax, did if life Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." essments and similar amounts from members 2(c) nondeductible lobbying and political expenditures (do not include amounts of political for which the section 527(f) tax was paid). are from last year 2a amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues as the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (do not include amounts of the este the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Supplemental Information art to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also,

Schedu	le C (For	m 990 or 990)-EZ) 2010	CENT	rer fo	DR B	SIOLOGICA	L DIV	ERSITY	INC	85-042028	35 Page 4
Part	t IV	Supplen	nental Ir	nformatio	n (contir	nued)					85-042028	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

u Attach to Form 990. u See separate instructions.

2010
Open to Public Inspection

Name of the organization Employer identification number CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 4 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ${f u}$ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X u \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2010 CENTER FOR	BIOLOGICAL I	DIVERSITY	INC	85-042	0285		F	Page
Pa	rt III Organizations Maintaining C	Collections of Art, Hi	storical Treasu	ıres, c	r Other Sir	nilar Asse	ets (contin	nued)	
3	Using the organization's acquisition, accession, a collection items (check all that apply):	and other records, check ar	ny of the following th	nat are a	significant use	e of its			
а	Public exhibition	d Loan or	exchange programs	:					
b	Scholarly research								
	H '	e Other							
C	Preservation for future generations								
4	Provide a description of the organization's collect	tions and explain how they	further the organiza	ation's ex	kempt purpose	in Part			
	XIV.								
5	During the year, did the organization solicit or re		•					_	_
	assets to be sold to raise funds rather than to be	e maintained as part of the	organization's collec	tion?				Yes	No
Pa	rt IV Escrow and Custodial Arrar	ngements. Complete	if the organizat	tion ar	swered "Ye	es" to Forn	n 990, Pa	art IV,	
	line 9, or reported an amount								
1a	Is the organization an agent, trustee, custodian			assets n	ot				
								Yes	No
h	If "Yes," explain the arrangement in Part XIV and						Ш		
b	ii 163, explain the analigement in Fart XIV and	a complete the following tax	iic.				Amo	unt	
	Particles Indone					4.	AIIIO	unt	
	Beginning balance								
	Additions during the year								
е	Distributions during the year					. 1e			
f	Ending balance					1f		_	
2a	Did the organization include an amount on Form	990, Part X, line 21?						Yes	No
	If "Yes," explain the arrangement in Part XIV.							_	
Pa	rt V Endowment Funds. Comple	te if organization ans	wered "Yes" to	Form	990, Part I\	√, line 10.			
	<u> </u>	(a) Current year	(b) Prior year			(d) Three year		our years	back
1a	Beginning of year balance								
	Contributions								
C	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the year en	d balance held as:							
а	Board designated or quasi-endowment u								
	Permanent endowment u %								
	Term endowment u %								
	Are there endowment funds not in the possession	on of the organization that a	re held and adminis	tored fo	r the				
Ju	·	or the organization that a	ile field and adminis	stered io	i tile			Yes	No
	organization by:						2-4		No
							3a(1
							3a(ii)	-
b	If "Yes" to 3a(ii), are the related organizations lis	ted as required on Schedul	e R?				3k)	
4	Describe in Part XIV the intended uses of the or	ganization's endowment fur	nds.						
Pa	rt VI Land, Buildings, and Equipr	nent. See Form 990	, Part X, line 10)					
	Description of investment	(a) Cost or other basis	(b) Cost or other b	oasis	(c) Accum	nulated	(d) Bo	ook value	
		(investment)	(other)		deprecia	ation			
12	Land								
	Buildings Leasehold improvements		117	752		88,963		28,	790
	Leasehold improvements								
d	Equipment		<u>4</u> ∪⊥,	,039	3.	36,961		64,	U / E

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2010

	5111 330) 2010 CENTER TOR BIOLOGICTE		05 0120205	r age (
Part VII	Investments—Other Securities. See Form 990			
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial d				
	d equity interests ERTIFICATES OF DEPOSITS	4,496,758	MARKET	
• • • • • • • • • • • • • • • • • • • •	ERITFICATES OF DEPOSITS	4,490,730	MARKEI	
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u> </u>				
	n (b) must equal Form 990, Part X, col. (B) line 12.) u	4,496,758		
Part VIII	Investments—Program Related. See Form 99			
	(a) Description of investment type	(b) Book value	(c) Method o Cost or end-of-ye	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		u	
Part X	Other Liabilities. See Form 990, Part X, line 25	5.		
1.	(a) Description of liability	(b) Amount		
(1) Federal i	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	n (b) must equal Form 990, Part X, col. (B) line 25.)			
Coluilli	. (~,	1		

^{2.} FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part any a	Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.																																										
													٠.	 	٠.	 	 	 	 	 	 ٠.	٠.		٠.	٠.	 	 ٠.	 ٠.	 ٠.	٠.	 	٠.	٠.	 	٠.	 	 ٠.	 	 	 ٠.	 ٠.		
													٠.	 	٠.	 	 	 	 	 	 	٠.				 	 	 ٠.	 ٠.		 		٠.	 	٠.	 	 ٠.	 	 	 ٠.	 ٠.		
													٠.	 		 ٠.	 	 	 	 ٠.	 	٠.	٠.			 	 ٠.	 ٠.	 ٠.		 	٠.	٠.	 	٠.	 	 ٠.	 	 	 	 		
														 		 	 	 	 	 	 					 	 	 	 		 		٠.	 		 	 ٠.	 	 	 	 		

Schedule D (Fo	orm 990) 2010	CENTER	FOR	BIOLOGICAL	DIVERSITY	INC	85-0420285	Page 5
Part XIV	Supplementa	al Informat	ion (co	ontinued)				
•								

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding

Fundraising or Gaming Activities
Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

u Attach to Form 990 or Form 990-EZ.

u See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

CENTER FOR BIOLOGICAL DIVERSITY INC

Employer identification number

85-0420285 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events X In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fund-(i) Name and address of individual (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to raiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of contributions? col. (i) AVALON CONSULTING GROUP Yes No 1150 17TH STREET NW SUITE 200 DC 20036 CONSULTANT Χ 672,250 102,131 570,119 WASHINGTON SHARE GROUP 2 PO BOX 55183 MEMBERSHIP Х 11,935 -3,840 BOSTON MA 02205 8,095 5 10 566,279 Total 680,345 114,066 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. ALABAMA, ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, CONNECTICUT, DIST OF COLUMBIA, FLORIDA, HAWAII, ILLINOIS, KANSAS, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, MISSISSIPPI, MISSOURI, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, NORTH CAROLINA, NORTH DAKOTA, OHIO, OREGON,

PENNSYLVANIA, SOUTH CAROLINA, SOUTH DAKOTA, TENNESSEE, UTAH, VIRGINIA,

WISCONSIN

WASHINGTON,

CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (total number) (event type) (event type) 1 Gross receipts 2 Less: Charitable contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs **Direct Expenses** 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 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. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo Revenue (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor Nο 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 Enter the state(s) in which the organization operates gaming activities: Is the organization licensed to operate gaming activities in each of these states? Yes If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

Sche	dule G (Form 990 or 990-EZ) 2010	CENTER	FOR	BIOLOGICA	AL I	DIVERSITY	INC	85-04	20285	5	F	age 3
11	Does the organization operate gar	ning activities with non	member	rs?							Yes	No
12	Is the organization a grantor, bene										1	П
	formed to administer charitable ga								_.	Ш	Yes	∐ No
13	Indicate the percentage of gaming								425			0/
a	The organization's facility								1 401 1			<u>%</u>
b 14	An outside facility	o porcon who propored							13b			%
14	records:	e persori who prepares	s the org	gariizauori's gariirig	J/speci	ai events books an	u					
	Name u											
	Address u											
15a	Does the organization have a contrevenue?			-						П	Yes	□ No
b	If "Yes," enter the amount of gamin									_		_
	amount of gaming revenue retaine											
С	If "Yes," enter name and address of											
	Name u											
	Address u											
16	Gaming manager information:											
	Name u											
	Gaming manager compensation u	ı \$										
	Description of services provided u	ı										
	Director/officer	Employee	In	ndependent contrac	ctor							
17	Mandatan, distributions											
ı, a	Mandatory distributions: Is the organization required under	state law to make cha	ritable d	lietributione from th	e dam	ing proceeds to						
u	retain the state gaming license?									П	Yes	□ No
b	Enter the amount of distributions re	equired under state lav	w to be o	distributed to other	exem	pt organizations or						···
	spent in the organization's own ex-	•				, .						
Par	t IV Supplemental Info columns (iii) and (v part to provide any), and Part III, line	es 9, 9	9b, 10b, 15b, 1	5c, 1						his	
	part to provide arry	additional IIIIOIIII	auon (SEC HISHUULIUI	13).							
											• • • • • •	
• • •												
											• • • • •	

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

**U Complete if the organization 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.

**U Attach to Form 990 or Form 990-EZ. **U See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

CENTER FOR BIOLOGICAL DIVERSITY INC

Employer identification number 85-0420285

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 Yes No (1) (2) (3) (4) (5) (6) Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ________u \$__ Enter the amount of tax, if any, on line 2, above, reimbursed by the organization 3 Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (b) Loan to (f) Approved (g) Written (a) Name of interested person and purpose (c) Original (d) Balance due (e) In default? or from the principal amount by board or organization? committee? To From Yes No No Yes No Yes (10)Total **u** \$ Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount and type of assistance organization (1) (2) (3) (4) (5) (6) (7)

(8) (9)

Part IV	Business Transactions Involving In	terested Persons.				
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 28a,			(-) ('hi
	(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction	(e) S	Sharing ora.
		interested person and the	transaction			org. nues?
		organization			Yes	
(1) LYDIA		OFFCR SPOUSE	38,088	COMPENSATION		Х
(2) MARCY	OLAJOS	BOARD MEMBER	359,412	CASH CONTRIBUTION		Х
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						-
Part V	Complemental Information					
Part v	Supplemental Information	ion for roomanage to avactic	no on Cobodulo I. (oco i	note estimal		
	Complete this part to provide additional informat	ion for responses to questio	ns on Schedule L (see i	nstructions).		
-						
-						
-						
-						

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. 11 Attach to Form 990.

Employer identification number CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art—Works of art 1 Art—Historical treasures 2 Art—Fractional interests 3 Books and publications 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities—Publicly traded 109,901 FAIR MARKET VALUE 9 Securities—Closely held stock 10 Securities—Partnership, LLC, 11 or trust interests Securities—Miscellaneous 12 13 Qualified conservation contribution—Historic structures Qualified conservation 14 contribution—Other Real estate—Residential 15 Real estate—Commercial 16 Real estate—Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 25 Other $\mathbf{u}($) 26 Other $\mathbf{u}($) 27 Other $\mathbf{u}($ 28 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 Yes No 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? Χ 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 Χ 31 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Χ contributions? 32a If "Yes," describe in Part II. b If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

u Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CENTER FOR BIOLOGICAL DIVERSITY INC

 $\begin{array}{c} \textbf{Employer identification number} \\ 85 - 0420285 \end{array}$

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS
THE CENTER'S OCEANS PROGRAM WORKS TO PROTECT GLOBAL MARINE
BIODIVERSITY AND PREVENT THE EXTINCTION OF ANY MARINE
SPECIES SUBJECT TO U.S. JURISDICTION. PRIORITIES INCLUDE SECURING
ENDANGERED SPECIES ACT LISTINGS AND HABITAT DESIGNATIONS FOR IMPERILED
MARINE LIFE, AND ADVOCATING FOR REFORM OF HARMFUL FISHING PRACTICES, NOISE
POLLUTION, CLIMATE CHANGE AND OTHER DAMAGING PRACTICES
AFFECTING THE OCEANS' ENVIRONMENT.
THE URBAN WILDLANDS PROGRAM AIMS TO PROTECT WILDLIFE,
NATURAL AREAS AND QUALITY OF LIFE AT THE URBAN INTERFACE
THROUGH CONSERVATION PLANNING, POLICY ADVOCACY AND
GRASSROOTS MOBILIZATION.
THE INTERNATIONAL PROGRAM AIMS TO PROTECT GLOBAL
BIODIVERSITY WHERE U.S. AND INTERNATIONAL LAWS CAN BE
APPLIED AND SUCCESSFULLY HOLD THE U.S. GOVERNMENT
ACCOUNTABLE FOR ITS ACTIONS THREATENING SPECIES AROUND THE
GLOBE.
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
AN ELECTRONIC COPY OF THE FINAL VERSION OF FORM 990 IS PROVIDED TO EACH
VOTING MEMBER OF THE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE IRS.
IN ADDITION, A COPY OF THE FINAL VERSION OF FORM 990 WILL BE PROVIDED TO
THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO FILING. THE AUDIT
COMMITTEE OVERSEES THE FINANCIAL REPORTING PROCESS OF THE ORGANIZATION AND
WILL CONDUCT A REVIEW OF FORM 990 BEFORE THE END OF THE 2010 CALENDAR YEAR.

Name of the organization

CENTER FOR BIOLOGICAL DIVERSITY INC

Employer identification number 85-0420285

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY NO CONFLICTS OF INTEREST AROSE DURING THE CURRENT REPORTING YEAR. THE ORGANIZATION HAS A STANDARD CONFLICT OF INTEREST POLICY. UNDER THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, ANY OFFICER, DIRECTOR OR COMMITTEE MEMBER MUST IMMEDIATELY DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS THAT MIGHT CONSIDER ANY PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE LEAVES THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON BY THE REMAINING BOARD OR COMMITTEE MEMBERS. THEREAFTER, THE GOVERNING BOARD OR COMMITTEE INVESTIGATES ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT AND DETERMINES WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL FOR THE CURRENT REPORTING YEAR, PURSUANT TO ITS EXECUTIVE COMPENSATION

POLICY, THE BOARD OF DIRECTORS APPROVED THE ANNUAL COMPENSATION OF THE

Employer identification number Name of the organization CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285 EXECUTIVE DIRECTOR AND ALL OTHER EMPLOYEES WHOSE COMPENSATION IS REQUIRED TO BE REPORTED ON THE IRS FORM 990, INCLUDING THAT OF OFFICERS AND KEY EMPLOYEES. COMPENSATION WAS APPROVED BY ONLY INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS, BASED ON PROPER COMPARABILITY OF COMPENSATION DATA. THE DECISION OF THE BOARD OF DIRECTORS WAS THEN CONTEMPORANEOUSLY DOCUMENTED IN THE WRITTEN MINUTES OF THE BOARD OF DIRECTORS' MEETING. FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS FOR THE CURRENT REPORTING YEAR, PURSUANT TO ITS EXECUTIVE COMPENSATION POLICY, THE BOARD OF DIRECTORS APPROVED THE ANNUAL COMPENSATION OF THE EXECUTIVE DIRECTOR AND ALL OTHER EMPLOYEES WHOSE COMPENSATION IS REQUIRED TO BE REPORTED ON THE IRS FORM 990, INCLUDING THAT OF OFFICERS AND KEY EMPLOYEES. COMPENSATION WAS APPROVED BY ONLY INDEPENDENT MEMBERS OF THE BOARD OF DIRECTORS, BASED ON PROPER COMPARABILITY OF COMPENSATION DATA. THE DECISION OF THE BOARD OF DIRECTORS WAS THEN CONTEMPORANEOUSLY DOCUMENTED IN THE WRITTEN MINUTES OF THE BOARD OF DIRECTORS' MEETING. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ON OUR WEBSITE, THE ORGANIZATION MAKES AVAILABLE ITS ANNUAL REPORT CONTAINING A STATEMENT OF ACTIVITIES AND THE FORM 990. GOVERNING DOCUMENTS AND ITS CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

SCHEDULE R (Form 990)

Part I

(1)

(2)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

(c)

Legal domicile (state

or foreign country)

(d)

Total income

Primary activity

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

OMB No. 1545-0047

2010

Open to Public Inspection

(f) Direct controlling

entity

Department of the Treasury Internal Revenue Service

Name of the organization

CENTER FOR BIOLOGICAL DIVERSITY INC

(a)
Name, address, and EIN of disregarded entity

Employer identification number 85-0420285

(e)

End-of-year assets

(3)								
(4)								
(5)								
Part II Identification of Related Tax–Exempt Orgone or more related tax-exempt organization	anizations (Co	l omplete if the o tax year.)	organization ansv	vered "Yes" to Fo	orm 990, Part IV	/, line 34 because	e it had	
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 51:	g) 12(b)(13) con- 1 entity?
(1) SOUTHWEST ACTION PO BOX 710 89	5-0422394		, , , , , , , , , , , , , , , , , , , ,		(100		100	110
TUCSON AZ 85702		INACTIVE	NM	501C4		N/A		Х
(2)								
(3)								
(4)								
(5)								
			l			1		1

Schedule R	(Form 990) 2010 CENTER FOR BIOLOGI	CAL DIVER	PITI	INC 85-04	20285										Page 2
Part III	Identification of Related Organization because it had one or more related or	ons Taxable a	as a l	Partnership ((ed as a partne	Complete if the right of the ri	e org	ganization ar x vear)	nswer	ed "Yes" to	Foi	rm :	990, Part IV, line	34		
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections		(f) e of total income	Share	(g) of end-of-year assets	allo	pro- onate oc.?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana partr	ral or aging ner?	(k) Percentage ownership
(1)			3.		512-514)					Yes	No		Yes	No	
(2)															
(3)															
(4)															
Part IV	Identification of Related Organization line 34 because it had one or more r	ons Taxable a	as a c zatior	Corporation on treated as a	r Trust (Com a corporation	plete or tru	if the organ	izatio e tax	n answered year.)	I "Y	es"	to Form 990, Pa	art l'	V,	
	(a)	(b)		(c)	(d)	lin a	(e)	4	(f)			(g)			h)
١	Name, address, and EIN of related organization	Primary activi	ity	Legal domicile (state or foreign country)	Direct control entity	ling	Type of entition (C corp, S coor trust)	-	Share of total in	come		Share of end-of-year assets			entage ership
(1)															
(2)															
(0)															
(3)															
(4)															

Part V Transactions With Related Organizations (Complete if the organization a	inswered res to Fo	orm 990, Part IV, III	9 34, 35, 35a, 0f 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			ſ		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more relate						
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		X
b Gift, grant, or capital contribution to other organization(s)				1b		X
c Gift, grant, or capital contribution from other organization(s)				1c		X
d Loans or loan guarantees to or for other organization(s)				1d		Х
e Loans or loan guarantees by other organization(s)				1e		X
				1f		X
f Sale of assets to other organization(s)						X
g Purchase of assets from other organization(s)				1g		X
h Exchange of assets				1h		X
i Lease of facilities, equipment, or other assets to other organization(s)				1i		
j Lease of facilities, equipment, or other assets from other organization(s)				1j		Χ
k Performance of services or membership or fundraising solicitations for other organization(s)				1k		X
Performance of services or membership or fundraising solicitations by other organization(s)				11		X
m Sharing of facilities, equipment, mailing lists, or other assets				1m		X
n Sharing of paid employees				1n		X
o Reimbursement paid to other organization for expenses				10		Х
p Reimbursement paid by other organization for expenses				1р		Х
q Other transfer of cash or property to other organization(s)				1q		X
r Other transfer of cash or property from other organization(s)				1r		Χ
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin	ne, including covered relation	onships and transaction the	resholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determinin amount involved	ng		
(1)						
(2)						
(3)						
(4)						
		1				

(5)

(6)

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all processed for the section of	partners tion c)(3) ations?	(e) Share of end-of-year assets	Oispropo allocat	ortionate tions?	itionate Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		h) eral or aging ner?
40			Yes	No		Yes	No		Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										

Schedule R (Form 990) 2010

Schedule R (Fo	orm 990) 2010	CENTER FO	OR BIOLOG	GICAL	DIVERSITY	INC	85-0420285	Page 5
Part VII		al Information						
	Complete th	is part to provi	de additional	informati	on for respons	es to au	estions on Schedu	ıle R (see
	instructions).							
• • • • • • • • • • • • • • • • • • • •								
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Schedule R (Form 990) 2010

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 2009 Open to Public Inspection

Form 990 (2009)

A	For the 2009	calendar ye	ar, or tax year beginning , and ending				
B	Check if applicable		C Name of organization		D	Emplo	oyer identification number
	Address change	use IRS label or	CENTER FOR BIOLOGICAL DIVERSIT	TY INC	- 46		
	Name change	print or	Doing Business As			85-	0420285
Ħ.	Initial return	type.	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E	Teleph	none number
Ħ.		See Specific	PO BOX 710			520)-623-5252
	Termination	Instruc-	City or town, state or country, and ZIP + 4		G	Gross rece	ipts \$ 7,597,133
	Amended return	tions.	TUCSON AZ 85702				
	Application pendir	9	and address of principal officer.		H(4 6	a group return for
		77.6	ERAN SUCKLING		H	affiliate b) Are all	affiliates
			BOX 710 CSON AZ 85702		100	include	
-	Tax-exempt st	177			_	If "No,"	" attach a list. (see instructions)
	Website:		IOLOGICALDIVERSITY.ORG		ш	c) Group	exemption number
_	Type of organizat	-		L Year of formation			M State of legal domicile: NM
_	and the same of th	Summar		L rear or formation	11. 2.2.2		M State of regal doffficile. 1411
			e organization's mission or most significant activities:				Contraction of the Contraction o
Щ			R FOR BIOLOGICAL DIVERSITY WORKS THROUGH S	CIENCE LAD	J AND	CREA	TTVE
JCe	G. 8 K 8 8 8 8		SECURE A FUTURE FOR ALL SPECIES, GREAT OR	******	*****	5 5 5 5 T T T T	于"去去,我们不会也不会的 的复数美国美国美国美国美国
rnai	7. 52. 04.	(まちちがわただだだ)	EXTINCTION.	romani ana	11111111	. 771 7	*******************
Governance	15 40 30	, , , , , ,	if the organization discontinued its operations or disposed of more that	an 25% of its net a	assets.		*****
Ö			members of the governing body (Part VI, line 1a)			3	7
SS			ndent voting members of the governing body (Part VI, line 1b)		******	4	4
Activities &	5 Total	number of e	mployees (Part V, line 2a)			5	78
Acti	6 Total	number of v	olunteers (estimate if necessary)		5555555	6	0
9	7a Total	gross unrela	ted business revenue from Part VIII, column (C), line 12			7a	
	b Net ur	related bus	iness taxable income from Form 990-T, line 34			7b	0
					ior Year	774	Current Year
on ne	8 Contril	outions and	grants (Part VIII, line 1h) evenue (Part VIII, line 2g)		651,		6,182,551
Revenue	9 Progra	m service i	454,		1,192,267		
Re	10 Investi	ment incom	e (Part VIII, column (A), lines 3, 4, and 7d)	68,		69,531	
			art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		178,	335	2,192 7,446,541
			dd lines 8 through 11 (must equal Part VIII, column (A), line 12) ramounts paid (Part IX, column (A), lines 1–3)		68,		28,850
	14 Benefi	ts naid to o	for members (Part IX, column (A), line 4)		00,	337	20,030
			mpensation, employee benefits (Part IX, column (A), lines 5–10)	3.	643,	734	3,561,240
Expenses	16a Profes	sional fundi	alsing fees (Part IX, column (A), line 11e)		114,		215,082
pen	b Total f	undraising (expenses (Part IX, column (D), line 25) > 669, 648				2237002
ŭ			Part IX, column (A), lines 11a-11d, 11f-24f)	2,	244,	951	1,949,954
			dd lines 13–17 (must equal Part IX, column (A), line 25)	6,	071,		5,755,126
	19 Reven		enses. Subtract line 18 from line 12		107,		1,691,415
S OF			(A) (i) = 467	Beginning			End of Year
Net Assets or Fund Balances	20 Total a	issets (Part	X, line 16)	6,	770,		8,337,302
Net A	21 Total li	abilities (Pa	π X, line 2b)	77.77	307,		183,522
	The state of the s	2	balances. Subtract line 21 from line 20	6,	462,	365	8,153,780
Pa		Signatur			40.4		
	1/2	and belief, it	es of perjury, I declare that I have examined this return, including accompanying scheres true, correct, and complete. Declaration of preparer (other than officer) is based on a	dules and statements all information of whic	h preparer	has any	knowledge
Sig	n 1		Ky VC			10	-21-10
Her		Signatur	of officer			Date	
			DE BULL LEI PERSON THE	ECUTIVE I	TREC		
		9 -	print name and title				
		Preparer's	The state of the s	ate C	heck if		Preparer's identifying number
Paid	OI .	signature		S	elf- mployed		(see instructions) P00539132
3.0	parer's		LUDWIG KLEWER & CO. PLLC	Į e		EIN D	36-4538293
Use	- CHILD	Firm's name (f self-employe	or yours			Phone	JU 4330233
		address, and					520-545-0500
Vlay	the IRS disc	uss this ret	um with the preparer shown above? (see instructions)			110.	X Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. DAA

Part III Statement of Program Service Accomplishments	
· · · · · · · · · · · · · · · · · · ·	CREATIVE ON THE
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 \$ 1,359,837 including grants of \$ 1,450)(Revenue \$ THE CENTER'S PUBLIC LANDS PROGRAM AIMS TO ENSURE THAT OUR PUBLIC LAWATERS ARE PROTECTED, RESTORED AND MANAGED FOR THE MAXIMUM BENEFIT NATION'S WILDLIFE AND ECOSYSTEMS.	NDS AND TO OUR
•	
·	
•	
•	
4b (Code:)(Expenses \$ 983,329 including grants of \$ 500) (Revenue \$ THE CENTER'S CLIMATE PROGRAM WORKS TO REDUCE U.S. GREENHOUSE GAS EM AND AIR POLLUTION TO PROTECT BIOLOGICAL DIVERSITY AND THE ENVIRONMED SPECIFIC OBJECTIVES INCLUDE SECURING PROTECTIONS FOR SPECIES THREAT THE IMPACTS OF GLOBAL WARNING, ENSURING COMPLIANCE WITH APPLICABLE IN ORDER TO REDUCE GREENHOUSE GAS EMISSIONS, AND EDUCATING AND MOBITHE PUBLIC ON GLOBAL WARMING ISSUES.	NT. ENED BY LAW
4c (Code:)(Expenses \$ 1,256,754 including grants of \$ 14,650)(Revenue \$ THE CENTER'S ENDANGERED SPECIES PROGRAM WORKS TO PROTECT AND RECOVED IMPERILED PLANTS AND ANIMALS AND THEIR HABITAT. THIS IS ACCOMPLISHED) R
THROUGH A VARIETY OF TOOLS INCLUDING SCIENTIFIC RESEARCH, POLICY AN ADVOCACY, AND GRASSROOTS ORGANIZING.	
THROUGH A VARIETY OF TOOLS INCLUDING SCIENTIFIC RESEARCH, POLICY AN	
THROUGH A VARIETY OF TOOLS INCLUDING SCIENTIFIC RESEARCH, POLICY AN	
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THROUGH A VARIETY OF TOOLS INCLUDING SCIENTIFIC RESEARCH, POLICY AN ADVOCACY, AND GRASSROOTS ORGANIZING.	
THROUGH A VARIETY OF TOOLS INCLUDING SCIENTIFIC RESEARCH, POLICY AN	

ГС	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		,,	
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			٦,
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4	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	5		
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	6		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	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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	9		Х
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	10		Х
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	11	Х	
•	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 related 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.	12	Х	
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	<u> </u>		
	MINA II A A A A A A A A A A A A A A A A A			
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	, , , u		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	175		
15	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16		13		25
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		Х
17	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	10		- 21
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	47	Х	
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Λ.	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.0		v
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1,0		₹.
	If "Yes," complete Schedule G, Part III	19		X
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

	onomic of required constants (continues)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
21	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the		21	
22	United Otates an Death V. selvene (A) line 20 16 IV as II assemblate Ochodula I. Death Lond III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			- 21
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	omployogs? If "Vac " complete Schodule I	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	240		Х
h	24b through 24d and complete Schedule K. If "No," go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		- 2\(\)
b		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	242		
لہ	to defease any tax-exempt bonds?	24c		
d or-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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			3.7
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			3.7
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		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	27		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):			37
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		3.7	
	Schedule L, Part IV	28b	X	
С	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,			3.7
	Part IV	28c	37	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			3.7
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		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	32		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	33		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	34	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	35		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	36		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	37		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.	38	Χ	

Statements Regarding Other IRS Filings and Tax Compliance Yes No Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 46 U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Χ 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 Χ If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a Χ If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b 3b 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 4a Χ If "Yes," enter the name of the foreign country: ${f u}$ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 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? 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). 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? If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b b С Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Χ Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? 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? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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.

	Schedule O. See instructions.					
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	7			
b	Enter the number of voting members that are independent	1b	4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed				Х	
5	Did the organization become aware during the year of a material diversion of the organization's assets?					Х
6	Does the organization have members or stockholders?			6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7a		Х
b				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
-	the year by the following:					
а	The governing hedy?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			5.5		
J	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the International Company of the Company				<u> </u>	21
	renue Code.)	Jiliai				
1101	0100 0000.				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	103	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			100		- 25
b	affiliates, and branches to ensure their operations are consistent with those of the organization?			10b		
11				100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			144	Х	
110	form?			11	22	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			40-	Х	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	Λ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			1.01	\ ₃₂	
	rise to conflicts?			12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			1	3,7	
	describe in Schedule O how this is done				X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	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?					
а	The organization's CEO, Executive Director, or top management official			15a	X	-
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		X
b	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?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ${f u}$ AZ, CA					
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: u LINDA WELLS, DIRECTOR OF FINANCE PO BOX 710					
T	JCSON AZ 8570	2-0	710 52	0-62	3-5	<u> 25</u> 2

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		sate	any			fficer,	dire			
(A) Name and Title	(B) Average hours per			check		hat ap Io ⊥		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
GALVIN, PETER J DIRECTOR	50.00	Х						104,881	0	13,312
SILVER, ROBIN D DIRECTOR	50.00	Х						84,000	0	15,256
SCHULKE, TODD D DIRECTOR	50.00	Х						51,500	0	12,561
OLAJOS, MARCEY CHAIRPERSON	2.00	Х						0	0	C
MEYER, KATHERINE DIRECTOR	1.00	Х						0	0	(
POWER, SCOTT DIRECTOR	1.00	Х						0	0	(
ZILL, STEPHANIE TREASURER	2.00	Х		Х				0	0	(
EXEC DIR	F 50.00			Х				105,541	0	15,948
HENDRICKS, BRENT SECRETARY	R 40.00			Х				50,000	0	9,235

<u>ı uı</u>	rt VII Section A. Officers,	, Directors, Trus	tees	, Ke	y Em	ploy	yees	, and	d Highest Compensated E	imployees (continued)				
	(A) Name and Title	(B) Average	Pos	ition ((C) (check		hat ar	(vlac	(D) Reportable	(E) Reportable		(F)		
		hours per week	Individual trustee or director	_	Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	,	amour othe ompens from organiza and rel organiza	at of er sation the ation ated	
•														
•														
•														
·														
•														
·														
·														
·														
•														
· ····														
	Total							u	395,922				66,	312
2	Total number of individuals (inc reportable compensation from t			to th	iose	listed	d abo	ove)	who received more than \$1	00,000 in				
											1		Yes	No
3	Did the organization list any for employee on line 1a? If "Yes,"											3		Х
4	For any individual listed on line the organization and related organization	1a, is the sum oganizations greate	f rep er tha	ortal an \$	ole co 150,0	ompe 000?	ensat If "Y	tion : 'es,"	and other compensation from complete Schedule J for su	m uch				37
5	individual	a receive or accru	 Je co	 ompe	 ensati	ion f	rom	any	unrelated organization for			4		X
	services rendered to the organi		comp	olete	Sche	edule	e J fo	or su	ıch person			5		Х
1	tion B. Independent Contracto Complete this table for your five		nsate	ed in	depe	nder	nt cor	ntrac	ctors that received more that	n \$100,000 of				
	compensation from the organization	ation. (A) business address						Г		(B) tion of services			(C) mpensati	
	Name and YALON CONSULTING GR					115	0 -	17т	Descrip 'H STREET NW SUIT			Co	mpeńsati	ion
	ASHINGTON	DC	2	00					CONSULTING				160	,509
2	Total number of independent comore than \$100,000 in compen		_				to th	lose	listed above) who received			1		

Pa	<u>rt V</u>	III Staten	<u>nent of Reve</u>	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s s	1a	Federated can	npaigns	1a						
ant	b	Membership d		1b						
₽,E	c	Fundraising ev		1c						
ifts ar a	q		zations	1d						
a,u Rig	٠ •		(contributions)	1e						
ons	f	All other contribution								
buti	·	and similar amounts		1f	6	182,551				
d d	a	Noncash contribution	ns included in lines 1a-	-	\$					
a Ō	9 h		es 1a–1f		Ψ		6,182,551			
Program Service Revenue Contributions, gifts, grants and other similar amounts		Total: /taa iiric	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Busn. Code	071027331			
eun	2a	. LEGAL S	יית אוד דייים			Duoiii Goud	1,173,517	1,173,517		
Rev	b		HIP LIST REN				12,970	12,970		
ce	C		ITY CONTRACT				5,780	5,780		
ervi	d						37700	37700		
n S	٠ •									
grai	f		am service rever							
Pro		. 0	es 2a-2f			u	1,192,267			
_	3		ome (including o				171727207			
			mounts)		-	•	69,622			69,622
	4		nvestment of tax-				07,022			07,022
	5			•	•					
		rtoyanioo	(i) Real			Personal				
	62	Gross Rents	(7 1 10 2		(-7 -					
	b	Less: rental exps.								
	C	Rental inc. or (loss)								
	d		me or (loss)			u				
		Gross amount from	(i) Securities		I	Other				
		sales of assets other than inventory	146		,					
	h	Less: cost or other	110	, , , , ,						
	_	basis & sales exps.	146	,792						
	c	Gain or (loss)		-91						
	q	` ,	ss)		l	u	-91	-91		
	8a	•	om fundraising ever	1			7-			
ine		(not including \$		11.5						
Ven			eported on line 1c)							
Re			18			328				
Other Revenue	b	Less: direct ex	penses	ъ		106				
ŏ			(loss) from fund		events		222	222		
			om gaming activities	- 1	ovonto .		222			
	Ju		19							
	b	Less: direct ex	penses	b						
			(loss) from gami		/ities	u				
			inventory, less	ng dou	7100					
	···		owances	а		5,664				
	h		owdnees			3,694				
			(loss) from sales		entory		1,970	1,970		
			ellaneous Revenue		oncory	Busn. Code	1,570	1,570		
	11a									
	b									
	C									
	d		ue							
		Total. Add line	. 44. 44.1			u				
			e. See instruction			u	7,446,541	1,194,368	0	69,622

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 6h, 70 of Committee Proceedings Procedure		All other organizations must		<u> </u>		<u> </u>
Contain and other assistance to governments and organizations in the U.S. See Part IV, line 2 25,850 25,850 25,850 26,850 26,850 27,000 2,000		•	(A) Total expenses	Program service	Management and	Fundraising
Comparation of the U.S. See Part V, line 22 1,000				expenses	general expenses	expenses
2 Grants and other assistance to individuals in the U.S. Sep Part IV, line 2 1 1,000 1,000 2,000 U.S. See Part IV, line 10 and 16 U.S. See Part IV, line 11 and 16 U.S. See Part IV, line 11 and 16 U.S. See Part IV, line 15 and 16 U.S. See Part IV, line 15 and 16 U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 16 and 16 U.S. See Part IV, lines 17 U.S. See Part IV, li	1		05 050	05 050		
## U.S. Save Part N. Inin 22 3 Grants and order assistance to governments, organizations, and individuals outside the U.S. Save Part N. Inine 15 and 16 4 Benefits paid to or for members 5 Compressation of current offices, directors, musters, and key employees 6 Corporation of current offices, directors, musters, and key employees 7 Compressation of current offices, directors, musters, and key employees 8 Person directors of the section 40(1) and person desident under section 498(5)(3)(8) 9 Corporation and winges 9 Person plan contributions (include section 40(1)) and socion 498(5)(3)(8) 9 Other comployee benefits 135,273 126,404 1,569 7,300 9 Other comployee benefits 297,515 264,986 15,694 16,835 17,626 18 Person plan contributions (include section 40(1)) and socion 498(5)(3)(8) 19 Person plan contributions (include section 40(1)) and socion 498(6)(3)(8) employee contributions (include section 40(1)) and socion 498(6)(4) employee contributions (include section 40(1)) and 40(1)			25,850	25,850		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	2		1 000	1 000		
U.S. Sae Part VI, lines 15 and 16 b 2,000 2,000			1,000	1,000		
U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current offices, directors, trustees, and key employees 6 Compensation for included actions, to disqualfied persons (se officing and persons) (as officing and persons	3	•				
4 Benefits paid to or for members 5 Compensation of current offices, diacetors, trustees, and key employees 395,922 385,368 5,277 5,277 5,277 6 Compensation of included above, in dispatified parsons (as officed under social most) (1987) (19		•				
S Compensation of current officers, directors, trustees, and key employees that persons (six defined under section 1988)(1) and persons tiscribled in section 498(0)(1) and section 498(0) and section 4			2,000	2,000		
Compensation not included above, to disqualified persons (so defined under section 4980(ff)) and persons described in section 4980(ff)) and section 4080(ff) and section 408	4					
6 Compensation mel included above. To disqualified persons of a statistic and variety of the persons of a statistic and the persons of a s	5	·	225 222	205 250		
persons (as defined under section 4988(01)) and persons described in section 4988(03(8)) 7 Other solarities and wages 8 Persion plan contributions (include section 401(k)) and section 401(k) employe contributions (include section 401(k)) and section 401(k) and			395,922	385,368	5,277	5,277
Persons described in section 4958(-)(0)(B) 2 , 482 , 496 2 , 237 , 432 71 , 162 173 , 902	6	·				
7 Other salaries and wages						
8 Person plan contributions (include section 401(k) and section 401(k) employer contributions) 9 Other employee benefits 297,515 264,986 15,694 16,835 10 Payroll taxes 250,034 222,428 9,980 17,626 18 Payroll taxes 250,034 222,428 9,980 17,626 18 Payroll taxes 250,034 222,428 9,980 17,626 18 Payroll taxes 12 Payments of travel or entertainment expenses for any deferal, state, or local public officials or larvest for any deferal, state, or local public officials or larvest so any and assessment or experted above. (Expenses shown on line 25 below.) 1 Payments to affiliates 23 Other expenses interior expenses not covered above. (Expenses shown on line 25 below.) 2 Post Payments of Taxel or entertainment expenses for any deferal, state, or local public officials or larvest to entertainment expenses for any deferal, state, or local public officials or larvest to entertainment expenses for any deferal, state, or local public officials or larvest to entertainment expenses for any deferal, state, or local public officials or larvest to entertainment expenses for any deferal, state, or local public officials or larvest to entertainment expenses for any deferal, state, or local public officials or larvest to entertainment expenses or larvest to entertainment expenses or larvest or entertainment expenses or entertainment exp			2 122 125	2 22 122	71 160	170 000
and section 403(b) employer contributions) 9 Other employee benefits 227,515 264,986 15,694 16,835 10 Payrol taxes 250,034 222,428 9,980 17,626 15 Fees for services (non-employees): a Management b Legal 122,217 118,139 4,078 6 Accounting 8,140 8,140 10 Lobbying Pricessional fundrating services. See Part IV, line 17 I Investment management fees 9 Other 282,009 208,988 73,021 73,021 74,750 75,082 9 Other 282,009 208,988 73,021 73,021 74,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,750 75,760	7		2,482,496	2,237,432	71,162	173,902
9 Other employee benefits 297,515 264,986 15,694 16,835 10 Payroll taxes 250,034 222,428 9,980 17,626 11 Fees for services (non-employees): a Management	8		105 050	105 101		
10 Payroll taxes 250,034 222,428 9,980 17,626 11 Fees for services (non-employees): a Management b Legal 122,217 118,139 4,078 c Accounting 8,140 215,082 215,082 d Lobbying 215,082 215,082 215,082 g Other 282,009 208,988 73,021 12 Advertising and promotion 37,950 35,130 2,820 30 Office expenses 39,876 24,053 13,382 2,441 14 Information technology 15 Royalites 174,121 164,579 4,952 4,590 17 Travel 17 Travel 174,121 164,579 4,952 4,590 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 174,121 164,579 4,952 4,590 18 Payments to affiliates 20 20 20 20 20 20 20 2						
11 Fees for services (non-employees): a Management	9					
a Management b Legal c Accounting d Lobbying e Professional fundraining services See Part IV, line 17 f Investment management fees g Other 20,009 208,988 73,021 204,049 215,082 215,0	10		250,034	222,428	9,980	17,626
b Legal	11	` ' ' '				
C Accounting S	а	Management				
d Lobbying e Professional fundrising services. See Part IV, line 17 f Investment management fees g Other 282,009 208,988 73,021 2 Advertising and promotion 37,950 35,130 2,820 30 Office expenses 39,876 24,053 13,382 2,441 Information technology 15 Royalties Cocupancy 205,318 199,188 1,634 4,496 17 Travel 174,121 164,579 4,952 4,590 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 40,500 36,624 1,680 2,196 Interest 19 Payments to affiliates 20 Depreciation, depletion, and amortization 80,487 69,919 5,006 5,562 10 Insurance 177,582 10,717 5,568 1,297 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 POSTAGE 230,505 227,330 3,175 c FINDRAISING EXPENSES 213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 SOP 98-2 Complete this line only if the organization combined eductional expenses and month in combined eductional expenses and month in combined eductional expenses and month in combined eductional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648				118,139		
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other 282,009 208,988 73,021 73,021 74 Advertising and promotion 37,950 35,130 2,820 75 30 flice expenses 39,876 24,053 13,382 2,441 75 16 Occupancy 205,318	С	Accounting	8,140		8,140	
Foundation Content C	d	, , , , , , , , , , , , , , , , , , , ,				
g Other	е		215,082			215,082
12 Advertising and promotion 37,950 35,130 2,820 13 Office expenses 39,876 24,053 13,382 2,441 14 Information technology	f					
12 Advertising and promotion 37,950 35,130 2,820	g	Other				
14	12	Advertising and promotion				
15 Royalties 205,318 199,188 1,634 4,496 17 Travel	13	Office expenses	39,876	24,053	13,382	2,441
16 Cocupancy 205,318 199,188 1,634 4,496 17 Travel 174,121 164,579 4,952 4,590 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 40,500 36,624 1,680 2,196 20 Interest 2 Payments to affiliates 2 Depreciation, depletion, and amortization 80,487 69,919 5,006 5,562 21 Insurance 17,582 10,717 5,568 1,297 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 POSTAGE 236,960 229,345 7,615 b PRINTING 230,505 227,330 3,175 c FUNDRAISING EXPENSES 213,044 4 4 4 4 4 4 4 4 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 4 4 4 806 5 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and some combined educational campaign and combined educational campaign and some combined educational campaign and campaign	14					
17 Travel 174,121 164,579 4,952 4,590	15					
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 40,500 36,624 1,680 2,196	16	Occupancy				
for any federal, state, or local public officials Conferences, conventions, and meetings 40,500 36,624 1,680 2,196 Interest Payments to affiliates Depreciation, depletion, and amortization 80,487 69,919 5,006 5,562 Insurance 17,582 10,717 5,568 1,297 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 POSTAGE PRINTING 230,505 2213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaion and	17		174,121	164,579	4,952	4,590
19 Conferences, conventions, and meetings 40,500 36,624 1,680 2,196	18	·				
20 Interest						
Payments to affiliates Depreciation, depletion, and amortization 80,487 69,919 5,006 5,562	19	Conferences, conventions, and meetings	40,500	36,624	1,680	2,196
Depreciation, depletion, and amortization 80,487 69,919 5,006 5,562	20	Interest				
17,582 10,717 5,568 1,297	21	Payments to affiliates	00.405	50.010	= 006	
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.) 236,960 229,345 7,615 a POSTAGE 230,505 227,330 3,175 c FUNDRAISING EXPENSES 213,044 213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and solutions and solutions. 5,755,126 4,807,534 277,944 669,648	22					
Covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a POSTAGE 236,960 229,345 7,615 b PRINTING 230,505 227,330 3,175 c FUNDRAISING EXPENSES 213,044 213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and X if tollowing and X if tollowing combined educational campaign and X if tollowing X if toll	23	Insurance	17,582	10,717	5,568	1,297
Covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a POSTAGE 236,960 229,345 7,615 b PRINTING 230,505 227,330 3,175 c FUNDRAISING EXPENSES 213,044 213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and X if tollowing and X if tollowing combined educational campaign and X if tollowing X if toll						
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5% of total expenses shown on line 25 below.) a POSTAGE		\				
a POSTAGE 236,960 229,345 7,615 b PRINTING 230,505 227,330 3,175 c FUNDRAISING EXPENSES 213,044 213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and All other expenses 669,648		•				
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c FUNDRAISING EXPENSES 213,044 213,044 d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following soop 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	а					
d TELEPHONE AND INTERNET 98,616 97,231 1,385 e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and 755,126 4,807,534 277,944 669,648	b			227,330	3,1/5	012 044
e INTERNET ORGANIZING 93,674 93,674 f All other expenses 68,955 27,149 41,806 25 Total functional expenses. Add lines 1 through 24f 5,755,126 4,807,534 277,944 669,648 26 Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				07 021	1 205	213,044
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 Total functional expenses. Add lines 1 through 24f Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and 					41 000	
Joint costs. Check here u X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and						660 640
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and			5,755,126	4,807,534	277,944	669,648
organization reported in column (B) joint costs from a combined educational campaign and	26					
from a combined educational campaign and						
, , , , , , , , , , , , , , , , , , ,		from a combined educational campaign and	1 068 500	414 (20)		CEO 000
fundraising solicitation 1,067,538 414,638 652,900	DAA	tundraising solicitation	1,06/,538	414,638		652,900 Form 990 (2009)

Р	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			797,579	1	1,548,001
	2	Savings and temporary cash investments			5,360,490	2	5,135,988
	3	Pledges and grants receivable, net			349,290	3	1,461,805
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors,	trustees, key				
		employees, and highest compensated employees. Com	plete Part II of				
		Schedule L		L		5	
	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		L		6	
Assets	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use			10,872	8	10,497
⋖	9	Prepaid expenses and deferred charges			17,182	9	19,659
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	529,781			
	b	Less: accumulated depreciation	10b	387,185	214,010	10c	142,596
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			20,778	15	18,756
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)		6,770,201	16	8,337,302
	17	Accounts payable and accrued expenses			157,836	17	183,522
	18	Grants payable				18	
	19	Deferred revenue		L		19	
	20	Tax-exempt bond liabilities		L		20	
S	21	Escrow or custodial account liability. Complete Part IV of	of Schedule D	L		21	
Liabilities	22	Payables to current and former officers, directors, truste	es, key				
Ē		employees, highest compensated employees, and disqu	ualified				
Ë		persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third	d parties			23	
	24	Unsecured notes and loans payable to unrelated third p			150,000	24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25	<u></u>		307,836	26	183,522
Š		Organizations that follow SFAS 117, check here \boldsymbol{u}	X and				
ဋ		complete lines 27 through 29, and lines 33 and 34.					
Balances	27	Unrestricted net assets			1,943,395	27	3,445,114
ñ	28	Temporarily restricted net assets			4,518,970	28	4,708,666
Fund	29	Permanently restricted net assets				29	
교		Organizations that do not follow SFAS 117, check h	ere u				
		and complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current funds				30	
Se	31	Paid-in or capital surplus, or land, building, or equipmen				31	
As	32	Retained earnings, endowment, accumulated income, o			32		
Net Assets or	33	Total net assets or fund balances			6,462,365	33	8,153,780
Z	34	Total liabilities and net assets/fund balances			6,770,201	34	8,337,302

Form **990** (2009)

Pa	int XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	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:			
	X 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?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990	(2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

 ${\bf u}$ Attach to Form 990 or Form 990-EZ. ${\bf u}$ See separate instructions.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CENTER FOR BIOLOGICAL DIVERSITY INC.

Employer identification number 85-0420285

			CHNIER FOR E	TODOCICAL DIVERS	<u> </u>	T11C			0.5	012	0205			
Pa	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this p	art.) S	ee ins	tructio	ns.			
The	orgar	nization is not	a private foundation because	it is: (For lines 1 through 11, che	ck only or	ne box.)								
1		A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A	۸)(i).							
2	П	A school des	cribed in section 170(b)(1)(A	(Attach Schedule E.)										
3	П	A hospital or	a cooperative hospital service	e organization described in section	on 170(b)	(1)(A)(iii).								
4	П	•	·	in conjunction with a hospital de:				(A)(iii).	Enter th	ne hospi	tal's name	_		
•	ш	city, and state		serijanenen man a neophan ae				(, ,/().		.ооор.		,		
5	\Box	-		a college or university owned or	operated	by a gove		t de		in				
J	Ш				operateu	by a gove	- IIIIII CIIIC	ar uriit ue	SCIDEU					
•	\Box	-	b)(1)(A)(iv). (Complete Part I	,	470/									
6	37		•	vernmental unit described in sec	•									
7	X	-		ubstantial part of its support from	a governi	mental un	it or from	n the gei	neral pu	plic				
	$\overline{}$		section 170(b)(1)(A)(vi). (Co	•										
8	Н	A community	trust described in section 17	'0(b)(1)(A)(vi). (Complete Part II	.)									
9	Ш	An organization	on that normally receives: (1)	more than 33 1/3 % of its support	ort from co	ontribution	s, memb	ership fe	es, and	gross				
		receipts from	activities related to its exemp	t functions—subject to certain ex	ceptions,	and (2) no	o more t	han 33 1	/3 % of	its				
		support from	gross investment income and	I unrelated business taxable inco	me (less s	section 51	1 tax) fr	om busii	nesses					
		acquired by the	ne organization after June 30,	1975. See section 509(a)(2). (Complete	Part III.)								
10	Ш	An organization	on organized and operated ex	clusively to test for public safety	. See sec	tion 509(a	a)(4).							
11		An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the f	functions (of, or to	carry ou	t the					
		purposes of o	one or more publicly supporte	d organizations described in sec	tion 509(a)(1) or se	ction 509	9(a)(2). S	See sec	tion				
		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												
е		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 a	nd other than one or more public	cly suppor	ted organ	izations	describe	d in sec	tion				
		509(a)(1) or s	section 509(a)(2).	·		-								
f		. , . ,	, , , ,	nination from the IRS that it is a	Type I. Ty	pe II. or T	vpe III s	upporting	נ					
•			check this box		- , - , - ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,					
a		-		on accepted any gift or contribution	on from an	ov of the								ш
g		following per		on accepted any girt of contribute	on nom a	ly of the								
				strala aithar alana ar tagathar wi	th naraana	doooribo	d in (ii)					ſ	Yes	No
			•	ntrols, either alone or together with	•						11	~/i)	163	NO
		, ,	pelow, the governing body of									g(i)		
			member of a person describe	"								g(ii)		
		` '	ontrolled entity of a person de								Ш	lg(iii)		
<u>h</u>			ollowing information about the		Tax .		<u> </u>			. 1				
(i)		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9	(iv) Is the o		(v) Did y	ou notify nization in	(vi) l organizati	s the		Amo suppo	unt of	
	org	ariizatiori		above or IRC section	governing	,	col. (i)			zed in the		зиррс	,,,	
				(see instructions))	<u> </u>		supp	oort?	U.:	S.?				
					Yes	No	Yes	No	Yes	No				
							1							
							1							
	_													

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

Schedule A (Form 990 or 990-EZ) 2009

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.)

Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) u	(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.")	2,406,281	3,502,252	5,295,401	7,825,898	6,182,551	25,212,383
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,406,281	3,502,252	5,295,401	7,825,898	6,182,551	25,212,383
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)						0 115 (02
							8,115,683
Sec	Public support. Subtract line 5 from line 4 etion B. Total Support						17,096,700
	lendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	2,406,281	3,502,252	5,295,401	7,825,898	6,182,551	25,212,383
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	44,483	56,575	97,902	68,970	69,622	337,552
	sources	44,403	30,373	97,902	08,970	09,022	337,332
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.)						
11	Total support. Add lines 7 through 10						25,549,935
12	Gross receipts from related activities, etc. (•					3,980,147
13	First five years. If the Form 990 is for the	-		•		•	, —
800	organization, check this box and stop here stion C. Computation of Public Su	nnort Porcente					P
	-		_	0)		144	
14	Public support percentage for 2009 (line 6,						66.91 %
15	Public support percentage from 2008 Sched						72.47 %
16a	33 1/3 % support test—2009. If the organi						▶ [▽]
	and stop here. The organization qualifies a						▶ 🏻
b	33 1/3 % support test—2008. If the organi				s 33 1/3 % or more	e, check this	. □
47.	box and stop here. The organization qualifi						▶ ⊔
17a	10%-facts-and-circumstances test—2009						
	more, and if the organization meets the "fa			-	•	/ how the	. □
_	organization meets the "facts-and-circumsta	-	•		-		▶ ⊔
b	10%-facts-and-circumstances test—2008	ŭ					
	more, and if the organization meets the "fa			-	•	/ how the	
	organization meets the "facts-and-circumsta	-	•		-		▶ -
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see in	structions	▶ ⊔

Schedule A (Form 990 or 990-EZ) 2009

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.)

Sec	tion A. Public Support						
Cal	lendar year (or fiscal year beginning in) u	(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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cal	lendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	-	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)	_
	organization, check this box and stop here						.
	tion C. Computation of Public Su						T
15	Public support percentage for 2009 (line 8,						%
16 Coo	Public support percentage from 2008 Sched						%
	tion D. Computation of Investme					l	
17 40	Investment income percentage for 2009 (lin					1.0	%
18 10-	Investment income percentage from 2008						%
19a	33 1/3 % support tests—2009. If the organ						. □
b	17 is not more than 33 1/3 %, check this bo 33 1/3 % support tests—2008. If the organ		-				🟲 🗀
b	line 18 is not more than 33 1/3 %, check thi						▶□
20	Private foundation If the examination did	•	•		,		······ 【⊢

Schedule A (F	Form 990 or 990-EZ) 2009	CENTER FOR	R BIOLOGICA	<u>AL DIVERSITY</u>	INC 85-042	20285	Page 4
Part IV	Supplemental Info Part II, line 17a or	ormation. Complete	te this part to p	rovide the explana	tions required by F	art II, line 10;	
	rait ii, iiile i ra oi	17b, and rait iii,	iiile 12. Flovide	any other addition	iai iiiioiiiiaiioii. Sei	e instructions.	
• • • • • • • • • • • • • • • • • • • •							
• • • • • • • • • • • • • • • • • • • •							
• • • • • • • • • • • • • • • • • • • •							

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ${\bf u}$ Complete if the organization is described below.

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

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nar	ne of organization			Employer identific					
	CENTER FOR BIOLOGICA			85-042028					
Par	t I-A Complete if the organization is exe	mpt under section 501(c)	or is a section	n 527 organization) .				
1	Provide a description of the organization's direct and indire	ect political campaign activities in l	Part IV.						
2	Political expenditures			u \$					
3	Volunteer hours								
Par	t I-B Complete if the organization is exe		•						
1	Enter the amount of any excise tax incurred by the organization								
2	Enter the amount of any excise tax incurred by organization	on managers under section 4955		u\$_					
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No				
4a	Was a correction made?				Yes No				
<u>b</u>	If "Yes," describe in Part IV.								
Pai	t I-C Complete if the organization is exe	mpt under section 501(c)	, except section	on 501(c)(3).					
1	Enter the amount directly expended by the filing organization	'							
	activities			u\$_					
2	Enter the amount of the filing organization's funds contribu	•							
	527 exempt function activities			u\$					
3	Total exempt function expenditures. Add lines 1 and 2. En	,							
	line 17b								
4	Did the filing organization file Form 1120-POL for this year	r?			. Yes No				
5	Enter the names, addresses and employer identification n		· ·						
	were made. For each organization listed, enter the amoun			•					
	contributions received that were promptly and directly deliv	• •		separate segregated					
	fund or a political action committee (PAC). If additional sp	ace is needed, provide information	in Part IV.						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political				
				filing organization's funds. If none, enter -0	contributions received and promptly and directly				
				Turido. Il Tiorio, oricor o .	delivered to a separate				
					political organization. If				
					none, enter -0				
			l						

Sche	dule C (Form 990 or 990-EZ) 2009 CEN	TER FOR	BIOLOGICAL	DIVERSITY	INC	85-04202	285	Page 2
Pai	rt II-A Complete if the organiz	ation is exe	mpt under sectio	n 501(c)(3) and	filed Fo	rm 5768 (ele	ction	
	under section 501(h)).							
A (Check $ {f u} igcap $ if the filing organization	on belongs t	o an affiliated gro	up.				
B (Check u if the filing organization	on checked	box A and "limited	control" provisi	ons app	oly.		
	Limits on Lob	bying Expe	nditures		(a	ı) Filing	(b) Affiliated	i
	(The term "expenditures" r			.)	organiz	ation's totals	group totals	i
1a	Total lobbying expenditures to influence pub	lic opinion (gras	s roots lobbying)			4,457		
b	Total lobbying expenditures to influence a le	gislative body (d	lirect lobbying)			4,602		
С	Total lobbying expenditures (add lines 1a an	d 1b)	, 0,	· · · · · · · · · · · · · · · · · · ·		9,059		
d	Other exempt purpose expenditures				5	,076,419		
е					5	,085,478		
f	Lobbying nontaxable amount. Enter the amount							
_	columns.		_			404,274		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount is:					
	Not over \$500,000	20% of the amo	unt on line 1e.					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 1	5% of the excess over \$50	0,000.				

\$175,000 plus 10% of the excess over \$1,000,000.

\$225,000 plus 5% of the excess over \$1,500,000.

i Subtract line 1f from line 1c. If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. If zero or less, enter -0-

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

Over \$17,000,000

Yes

101,069

0

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

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total					
2a Lobbying non-taxable amount	328,153	379,180	421,128	404,274	1,532,735					
b Lobbying ceiling amount (150% of line 2a, column(e))					2,299,103					
c Total lobbying expenditures	148,870	14,831	11,920	9,059	184,680					
d Grassroots nontaxable amount	82,038	94,795	105,282	101,069	383,184					
e Grassroots ceiling amount (150% of line 2d, column (e))					574,776					
f Grassroots lobbying expenditures	80,801	3,993	4,633	4,457	93,884					

Schedule C (Form 990 or 990-EZ) 2009

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? **b** Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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 Other activities? If "Yes," describe in Part IV j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? **b** If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? ... Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year **b** Carryover from last year 2b Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbving and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedul	le C (For	m 990 or 990-E	Z) 2009	CENTE	R FOR	BIOLOGIC	CAL DIV	ERSITY	INC	85-0420285	Page 4
Part	: IV	Suppleme	ntal Info	rmation	(continue	ed)					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

u Attach to Form 990. u See separate instructions.

2009
Open to Public Inspection

Name of the organization Employer identification number CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285 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 Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year _____ 4 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ${f u}$ __ _ _ _ Number of states where property subject to conservation easement is located **u** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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. 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 u \$_ _ _ _ (ii) Assets included in Form 990, Part X 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 ______ u \$_____ **b** Assets included in Form 990, Part X

	art III Organizations Maintaining (Collections of Art, H					sets (c	ontin	ued		jc =
3										,	
а	Public exhibition	d Loan o	r exchange program	s							
b	Scholarly research	e Other									
С	Preservation for future generations	<u>—</u>					_				
4	 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 										
5											No
Pa	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?										
	IV, line 9, or reported an amo	ount on Form 990, P	art X, line 21.								
1a	Is the organization an agent, trustee, custodian	or other intermediary for co	ontributions or other	assets not							
	included on Form 990, Part X?							\Box	Yes		No
b	If "Yes," explain the arrangement in Part XIV and							_			
								Amount			
С	Beginning balance					1c					
d	Additions during the year					1d					
	Distributions during the year					1e					
f	Ending balance					1f					
2a	Did the organization include an amount on Form	990, Part X, line 21?						Yes No			— No
	If "Yes," explain the arrangement in Part XIV.							_			
Pa	art V Endowment Funds. Comple	te if organization and	swered "Yes" to	Form 990, Par	t IV, li	ne 10	Э.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Th	ree yea	rs back	(e) Fo	our yea	ars ba	ack
1a	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains,										
	and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g											
2	Provide the estimated percentage of the year er										
а	Board designated or quasi-endowment u	%									
b	Permanent endowment u %										
С	Term endowment u %										
3a	Are there endowment funds not in the possession	on of the organization that	are held and admini	stered for the							
	organization by:								Ye	es l	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations lis	sted as required on Schedu	ıle R?					3b			
4	Describe in Part XIV the intended uses of the or	rganization's endowment fu	ınds.								
Pa	art VI Investments—Land, Buildin	gs, and Equipment.	See Form 990), Part X, line 10							
	Description of investment	(a) Cost or other basis	(b) Cost or ot	her (c) Ac	cumulate	d		(d) Bo	ok valu	ue	
		(investment)	basis (other) dep	reciation						
1a	Land										
b	Buildings										
С	Leasehold improvements			,752		,606	_			,14	
	Equipment		412	,029	323,	, 579)		88	, 4!	50
	Other										

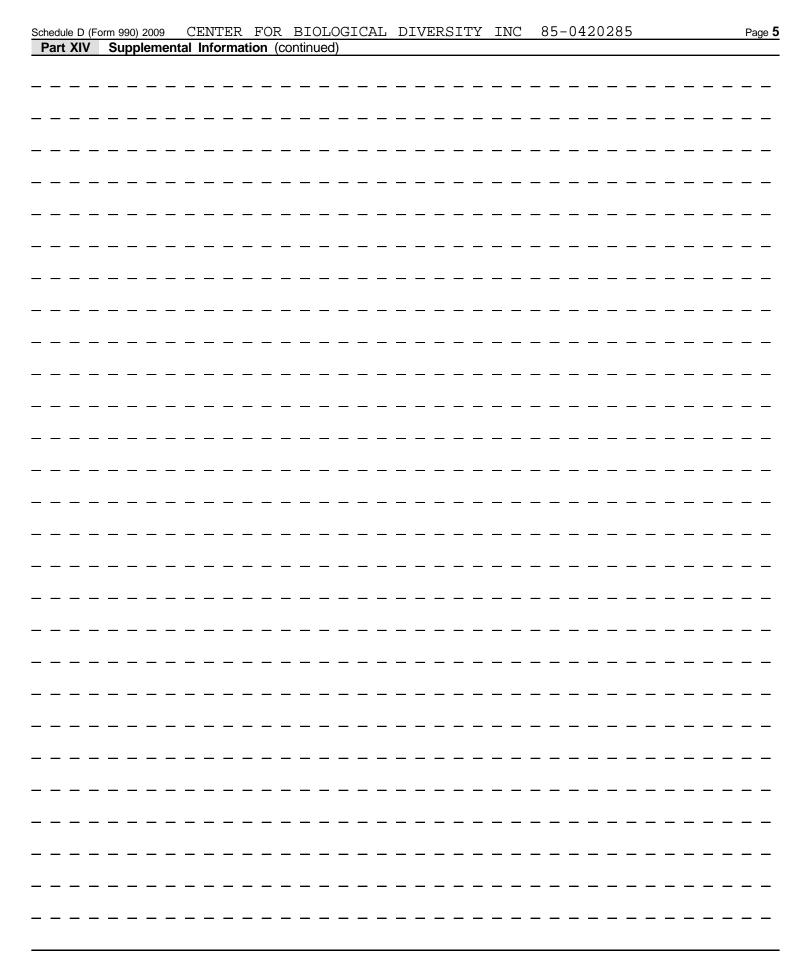
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2009

Part VII	Investments—Other Securities. See Form 990). Part X. line 12.		
	(a) Description of security or category	(b) Book value	(c) Method o	f valuation:
	(including name of security)		Cost or end-of-ye	
Financial deriv				
Closely-held e	ratives quity interests			
Other	quity intorcolo			
Total (Column	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related. See Form 99	0 Part X line 13		
· are viii	(a) Description of investment type	(b) Book value	(c) Method o	f valuation:
	(-)	(0) = 000 1000	Cost or end-of-ye	
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description			(b) Book value
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 15.)		u	
Part X	Other Liabilities. See Form 990, Part X, line 25	5,		
1.	(a) Description of liability	(b) Amount		
Federal incom	e taxes			
"				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 25.) u			

nd 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete									
part to provide any additional information.									

Schedule D (Form 990) 2009



SCHEDULE G (Form 990 or 990-EZ)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities
Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open To Public Inspection

CENTER FOR BIOLOGI	CAI. DIVER	יידי	<i>7</i> т	NC	85-042028	
Fundraising Activities Complete in						
Part I Form 990-EZ filers are not required				100 100 1010	000, 1 0.111,0	
1 Indicate whether the organization raised funds through a				eck all that apply.		
a X Mail solicitations	e X Solicitation	of non	-aove	ernment grants		
b X Internet and email solicitations	f Solicitation		•	· ·		
7.7		-		•		
c A Phone solicitations	g Special fund	draisin	g eve	ents		
d X In-person solicitations						
2a Did the organization have a written or oral agreement wi or key employees listed in Form 990, Part VII) or entity in						X Yes No
b If "Yes," list the ten highest paid individuals or entities (futo be compensated at least \$5,000 by the organization.	ındraisers) pursuant	to agr	eeme	nts under which the fun-	draiser is	
(i) Name of individual	(ii) Activity	(iii) _. Dic		(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
or entity (fundraiser)		raiser custo		from activity	(or retained by)	(or retained by)
		contribu			fundraiser listed in col. (i)	organization
		Yes			ooi. (i)	
AVALON		103	140			
	CONSULTANT		Х	865,536	160,509	705,027
TELEFUND				,	,	•
	MBRSHIPS		Х	50,512	33,743	16,769
OUTREACH ASSOCIATES						
	MBRSHIPS		Χ	31,788	20,830	10,958
	<u> </u>					
	<u> </u>					
	1					
Total	<u></u>		. ▶	947,836	215,082	732,754
3 List all states in which the organization is registered or lic	ensed to solicit fund	s or h	as be	en notified it is exempt f	rom	
registration or licensing. ALABAMA, ALASKA, ARIZONA, ARKANSA	S CALTEORN	Δ T Τ	COI	ORADO CONNE	CTTCIT	
DIST OF COLUMBIA, FLORIDA, HAWAI						AND .
MASSACHUSETTS, MICHIGAN, MISSISS						
NEW MEXICO, NEW YORK, NORTH CAR						
SOUTH CAROLINA, SOUTH DAKOTA, T						
WEST VIRGINIA, WISCONSIN						

P	art I		vents. Complete if the orga ,000 on Form 990-EZ, line				r repo	orted	
		more than \$10	(a) Event #1	(b) Event #2	(c) Other events	(d)) Total e	throug	J h
Revenue	1 2 3	Gross receipts Less: Charitable contributions Gross revenue (line 1	(event type)	(event type)	(Otal Humber)				
		minus line 2)							
	5	Cash prizes							
suses	6	Rent/facility costs							
Direct Expenses	7	Food and beverages							
D	9	Other direct expenses							
	10 11	Direct expense summary. Net income summary. Co	Add lines 4 through 9 in column (d) mbine line 3, column (d), and line 10) 	>	(
P	art I	II Gaming. Com	olete if the organization ansi	wered "Yes" to Form 990, F	Part IV, line 19, or repo	rted m	ore		
une		than \$15,000 c	on Form 990-EZ, line 6a. (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	٠,	otal gami	• •	
Revenue	1	Gross revenue							
≅xpenses	2	Cash prizes							
Direct Expe	3	Noncash prizes Rent/facility costs							
Dir	5	Other direct expenses							
	6	Volunteer labor	Yes% No	Yes % No	Yes % No				
	7 8		Add lines 2 through 5 in column (d) nary. Combine line 1, column d, and			(
	•	Net garning income sumin	ary. Combine line 1, column d, and	Time 7	·············			Yes	No
9 a b	ls t		e organization operates gaming activ operate gaming activities in each of				9a		
		· · · · · · · · · · · · · · · · · · ·					10a		
10a b		Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? If "Yes," Explain:							
11 12		es the organization operate	e gaming activities with nonmembers beneficiary or trustee of a trust or a	s?			11		
		•	e gaming?	•	•		12		

Sche	edule G (Form 990 or 990-EZ) 2009 CENTER FOR BIOLOGICAL DIVERSITY INC 85-042028	5	Р	age 3
13 a	Indicate the percentage of gaming activity operated in: The organization's facility 13a %		Yes	No
b 14	An outside facility			
	Name u Address u			
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
b	revenue? If "Yes," enter the amount of gaming revenue received by the organization u \$ and the amount of gaming revenue retained by the third party u \$ If "Yes," enter name and address of the third party:	15a		
	Name u			
	Address u			
16	Gaming manager information:			
	Name u			
	Gaming manager compensation u \$			
	Description of services provided u			
	Director/officer Employee Independent contractor			
17	Mandatony distributions:			

a Is the organization required under state law to make charitable distributions from the gaming proceeds to

in the organization's own exempt activities during the tax year **u** \$

retain the state gaming license? **b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent

Schedule G (Form 990 or 990-EZ) 2009

17a

SCHEDULE I (Form 990)

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

OMB No. 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

u Attach to Form 990.

Name of the organization						er identification num	ber	
CENTER FOR BIOLOGIC		ITY I	NC		85-	0420285		
Part I General Information on Grants and								
 Does the organization maintain records to substantiate the the selection criteria used to award the grants or assistance Describe in Part IV the organization's procedures for monit 	e?			gibility for the grants or a	assistance, and		Yes	X No
Part II Grants and Other Assistance to Go	vernments and	d Organi	zations in the Un					
Form 990, Part IV, line 21, for any re Part IV and Schedule I-1 (Form 990)	ecipient that red if additional sp	eived mace is n	ore than \$5,000. (eeded	Check this box if n	o one recipi	ent received moi	re than \$5,000. Use	_u [
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuati (book, FMV, apprais other)	on al, (g) Description of non-cash assistance	(h) Purpose of grant or assistance	
SAN DIEGO COASTKEEPER								
2825 DEWEY ROAD SUITE 200							MITIGATION SR 12	25
SAN DIEGO CA 92106	33-0647946	3	10,000					
U O F A POETRY CENTER							ADEL C. EGOLOGY, GE	DIEG
1508 E. HELEN STREET FUCSON AZ 85721	86-6050388	3	8,000				ART & ECOLOGY SE	RIES
10C50N AZ 037Z1	80-0030388	٥	8,000					
• • • • • • • • • • • • • • • • • • • •								
•								
						+		
2 Enter total number of section 501(c)(3) and government or	ganizations		•			•	u_2	
3 Enter total number of other organizations							u 0	

Part III Grants and Other Assistance Use Part IV and Schedule I-1			nplete if the organizat	ion answered "Yes" to Forn	n 990, Part IV, line 22.								
(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance								
	recipients	cash grant	non-cash assistance	assistance FMV, appraisal, other)									
Part IV Supplemental Information. C	omplete this part to p	rovide the informatio	n required in Part I, li	ne 2, and any other additio	nal information.								
PART I, LINE 2 - PROCEDURE	S FOR MONITOR	ING THE USE C	OF GRANT FUNDS	3									
GRANTEES ARE REQUIRED TO S	BUBMIT AN INTE	RIM REPORT, U	JSUALLY HALF V	NAY									
THROUGH THE GRANT PERIOD,	AND A FINAL R	EPORT AT THE	END OF THE GF	RANT									
PERIOD. THE REPORTS INCLUD	DE A SUMMARY C)F ACCOMPLISHN	MENTS WITH DET	CAILS WHEN									
SPECIFICS ARE REQUIRED. TH	Œ INTERIM REP	ORTS ARE REVI	EWED TO ENSUR	RE THE									
REQUIREMENTS OF THE GRANT	ARE BEING ACC	OMPLISHED AND	TO ASSIST TH	IE GRANTEES									
IF ANY CONCERNS ARE IDENTI	FIED. IN SOME	CASES GRANTI	EES PARTICIPAT	E IN									
MONTHLY PHONE CONFERENCES	THAT REVIEW T	HE OVERALL PR	OGRESS OF THE	PROJECT.									

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

u Complete if the organization 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.

OMB No. 1545-0047 Open To Public Inspection

u Attach to Form 990 or Form 990-EZ. u See separate instructions. Name of the organization

Employer identification number

	CENTER FOR BIOLOG							85-	042	1028	35			
Part I	Excess Benefit Transactions (section	,	, , ,				-	•						
	Complete if the organization answered "Yes" of	n Form	990,	Part IV, I	line 25a	or 25b, or	Form 990-E	Z, Part V, line	40b.					
1	(a) Name of disqualified person						(b) Description	on of transaction					Correct	
												Yes	+	No
												\vdash	+	
													+	
2 Enter t	he amount of tax imposed on the organization ma	nagers	or dis	qualified	persons	s during the	e year							
under	section 4958													
	he amount of tax, if any, on line 2, above, reimbur			ganizatio	n				u \$					
Part II	Loans to and/or From Interested F Complete if the organization answered "Yes" of			Part IV, I	line 26,	or Form 9	90-EZ, Part \	/, line 38a.						
	(a) Name of interested person and purpose	(b) ∟	oan to	((c) Origin	al	(d) Ba	lance due	(e) In (default?	(f) Ap	proved	(g) W	/ritten
	(,	or fro	m the		ncipal am		(, , ,		()		by bo	ard or	agreer	
			zation?								comm	ittee?		
		To	From						Yes	No	Yes	No	Yes	No
												$\vdash\vdash$		
												\vdash		
												ш		
=							<u> </u>							
Total Part III	Grants or Assistance Benefitting					u S	<u> </u>							
i ait iii	Complete if the organization answered "Yes" of													
	(a) Name of interested person					nship betwee	en interested p	erson and the	(c)	Amour	t and t	ype of	assista	nce
	()				,	•	anization		()					
Part IV	Business Transactions Involving	Intere	sted	Perso	ns.				I					
	Complete if the organization answered "Yes" of					, 28b, or 2	.8c.							
	(a) Name of interested person	(b)	Relatio	nship betv	veen	(c) A	mount of	(d) Desci	ription (of trans	saction			haring
	Cy communication policies		ested p	person and			saction	(2, 2300)	۲۰.۰				of rever	org. nues?
			orga	nization									Yes	No
LYDIA M	ILLET	OFF	CR S	SPOUSI	Ξ		36,000	COMPENSA	ATIC	N				Х
		ļ				ļ								

SCHEDULE M (Form 990)

Noncash Contributions

2000

2009

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization CENTER FOR BIOLOGICAL DIVERSITY INC 85-0420285 **Types of Property** (a) (b) (c) (d) Check if Number of Contributions Method of determining Revenues reported on applicable Form 990, Part VIII, line 1g revenues Art—Works of art 1 Art—Historical treasures 2 Art—Fractional interests 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities—Publicly traded 787 Χ 11 MARKET VALUE 9 Securities—Closely held stock 10 Securities—Partnership, LLC, 11 or trust interests Securities—Miscellaneous 12 13 Qualified conservation contribution—Historic structures Qualified conservation 14 contribution—Other Real estate—Residential 15 Real estate—Commercial 16 Real estate—Other 17 18 Collectibles Food inventory 19 20 Drugs and medical supplies 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 667 MARKET 25 Other u (AIRLINE TICKETS) Χ VALUE 626 26 Other **u**(REFRESHMENTS) 27 Other $\mathbf{u}($ 28 Other **u** (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 Yes No 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? Χ If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 Χ 31 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Χ b If "Yes." describe in Part II. 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.

Schedule M (For	m 990) 2009	CENTER	FOR	BIOLOGICA	L DIVE	ERSITY	INC	85-	0420285		Page 2
Part II	Supplen	nental Info	rmation.	Complete this this part for a	s part to p	provide the	e inform	nation	required by	Part I, lines 3	0b,
•											

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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.

u Attach to Form 990.

2009 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CENTER FOR BIOLOGICAL DIVERSITY INC

 $\begin{array}{c} \textbf{Employer identification number} \\ 85 - 0420285 \end{array}$

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS	
THE CENTER'S OCEANS PROGRAM WORKS TO PROTECT GLOBAL MARINE	
BIODIVERSITY AND PREVENT THE EXTINCTION OF ANY MARINE	
SPECIES SUBJECT TO U.S. JURISDICTION. PRIORITIES INCLUDE SECU	RING
ENDANGERED SPECIES ACT LISTINGS AND HABITAT DESIGNATIONS FOR	IMPERILED
MARINE LIFE, AND ADVOCATING FOR REFORM OF HARMFUL FISHING PRA	CTICES, NOISE
POLLUTION, CLIMATE CHANGE AND OTHER DAMAGING PRACTICES	
AFFECTING THE OCEANS' ENVIRONMENT.	
THE URBAN WILDLANDS PROGRAM AIMS TO PROTECT WILDLIFE,	
NATURAL AREAS AND QUALITY OF LIFE AT THE URBAN INTERFACE	
THROUGH CONSERVATION PLANNING, POLICY ADVOCACY AND	
GRASSROOTS MOBILIZATION.	
THE INTERNATIONAL PROGRAM AIMS TO PROTECT GLOBAL	
BIODIVERSITY WHERE U.S. AND INTERNATIONAL LAWS CAN BE	
APPLIED AND SUCCESSFULLY HOLD THE U.S. GOVERNMENT	
ACCOUNTABLE FOR ITS ACTIONS THREATENING SPECIES AROUND THE	
GLOBE.	
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATI	ONAL DOCUMENTS
IN 2009, THE ORGANIZATION'S BYLAWS WERE AMENDED TO:	
(1) CREATE AN EXECUTIVE DIRECTOR	
(2) RESTATE THE DUTIES OF THE TREASURER	
(3) DELETE ALL REFERENCES TO CHAIRPERSON AND VICE-CHAIRPERSON.	· · · · · · · · · · · · · · · · · · ·
FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIE	W FORM 990

Page 2

Name of the organization Employer identifica

CENTER FOR BIOLOGICAL DIVERSITY INC

Employer identification number 85-0420285

AN ELECTRONIC COPY OF THE FINAL VERSION OF FORM 990 IS PROVIDED TO EACH VOTING MEMBER OF THE BOARD OF DIRECTORS BEFORE IT IS FILED WITH THE IRS.

IN ADDITION, A COPY OF THE FINAL VERSION OF FORM 990 WILL BE PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO FILING. THE AUDIT COMMITTEE OVERSEES THE FINANCIAL REPORTING PROCESS OF THE ORGANIZATION AND WILL CONDUCT A REVIEW OF FORM 990 BEFORE THE END OF THE 2010 CALENDAR YEAR.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

NO CONFLICTS OF INTEREST AROSE DURING THE 2009 REPORTING YEAR. THE

ORGANIZATION HAS A STANDARD CONFLICT OF INTEREST POLICY. UNDER THE

ORGANIZATION'S CONFLICT OF INTEREST POLICY, ANY OFFICER, DIRECTOR OR

COMMITTEE MEMBER MUST IMMEDIATELY DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT

OF INTEREST TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD

DELEGATED POWERS THAT MIGHT CONSIDER ANY PROPOSED TRANSACTION OR

ARRANGEMENT.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND

AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE LEAVES THE

GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT

OF INTEREST IS DISCUSSED AND VOTED UPON BY THE REMAINING BOARD OR COMMITTEE

MEMBERS. THEREAFTER, THE GOVERNING BOARD OR COMMITTEE INVESTIGATES

ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT AND DETERMINES

WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE

ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD

NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION

OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING

A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE DETERMINES BY A

MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR

CENTER FOR BIOLOGICAL DIVERSITY INC

85-0420285

ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT,
AND WHETHER IT IS FAIR AND REASONABLE.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

FOR THE 2009 REPORTING YEAR, PURSUANT TO ITS EXECUTIVE COMPENSATION POLICY,

THE BOARD OF DIRECTORS APPROVED THE ANNUAL COMPENSATION OF THE EXECUTIVE

DIRECTOR AND ALL OTHER EMPLOYEES WHOSE COMPENSATION IS REQUIRED TO BE

REPORTED ON THE IRS FORM 990, INCLUDING THAT OF OFFICERS AND KEY EMPLOYEES.

COMPENSATION WAS APPROVED BY ONLY INDEPENDENT MEMBERS OF THE BOARD OF

DIRECTORS, BASED ON PROPER COMPARABILITY OF COMPENSATION DATA. THE DECISION

OF THE BOARD OF DIRECTORS WAS THEN CONTEMPORANEOUSLY DOCUMENTED IN THE

WRITTEN MINUTES OF THE BOARD OF DIRECTORS' MEETING.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

FOR THE 2009 REPORTING YEAR, PURSUANT TO ITS EXECUTIVE COMPENSATION POLICY,

THE BOARD OF DIRECTORS APPROVED THE ANNUAL COMPENSATION OF THE EXECUTIVE

DIRECTOR AND ALL OTHER EMPLOYEES WHOSE COMPENSATION IS REQUIRED TO BE

REPORTED ON THE IRS FORM 990, INCLUDING THAT OF OFFICERS AND KEY EMPLOYEES.

COMPENSATION WAS APPROVED BY ONLY INDEPENDENT MEMBERS OF THE BOARD OF

DIRECTORS, BASED ON PROPER COMPARABILITY OF COMPENSATION DATA. THE DECISION

OF THE BOARD OF DIRECTORS WAS THEN CONTEMPORANEOUSLY DOCUMENTED IN THE

WRITTEN MINUTES OF THE BOARD OF DIRECTORS' MEETING.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

ON OUR WEBSITE, THE ORGANIZATION MAKES AVAILABLE ITS ANNUAL REPORT

CONTAINING A STATEMENT OF ACTIVITIES AND THE FORM 990. GOVERNING DOCUMENTS

AND ITS CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

 OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization $ {\tt CENTER} \ \ {\tt FOR} \ \ {\tt BIOLOGICAL} \ \ {\tt DIVERSITY} \ \ {\tt INC} $				Employe 85-04	identification number
Part I Identification of Disregarded Entities (Complete if the or	rganization answere	ed "Yes" to Form 99	90, Part IV, line 33.)		
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations (Control had one or more related tax-exempt organizations during	omplete if the orgar the tax year.)	nization answered "	Yes" to Form 990, F	Part IV, line 34 bed	ause it
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
SOUTHWEST ACTION 85-0422394 TUCSON AZ 85702	INACTIVE	NM	501C4		N/A

scneaule	R (Form 990) 2009 CENTER FOR BIOLOGIC											Pag	je .
Part II	Identification of Related Organization because it had one or more related o	ns Taxable as roanizations tre	a Par	tnership (Con as a partnersh	nplete if the orginal the tax	anization answei x vear.)	ed "Yes" to Form	990,	Pa	rt IV, line	34		
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	(g) Share of end-of-year assets	Dis port all	h) spro- ionate oc.?	(i) Code \ amount in Schedu (Form	/—UBI box 20 of lle K-1	Gene mana partr	eral agin ner?
			couriny)		512-514)			Yes	No			Yes	No
Part I	line 34 because it had one of more re	elated organiza	a Cor	reated as a co	orporation or true	st during the tax	year.)	to F			1		
	(a) Name, address, and EIN of related organization	(b) Primary activity		(c) Legal domicile (state or preign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	end-	Sha	g) re of ar assets	(h) Percent owners	tage	

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

Tailed Trailed Trail Tolated Cigamizations (Complete in the organization and tolated to the organization and the o	,				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		Х
b Gift, grant, or capital contribution to other organization(s)			1b		Х
c Gift, grant, or capital contribution from other organization(s)			1c		Χ
d Loans or loan guarantees to or for other organization(s)			1d		Х
e Loans or loan guarantees by other organization(s)			1e		Х
f Sale of assets to other organization(s)			1f		X
g Purchase of assets from other organization(s)			1g		Х
h Exchange of assets			1h		Х
i Lease of facilities, equipment, or other assets to other organization(s)			1i		Х
j Lease of facilities, equipment, or other assets from other organization(s)			1j		Х
k Performance of services or membership or fundraising solicitations for other organization(s)			1k		Х
I Performance of services or membership or fundraising solicitations by other organization(s)			11		Х
m Sharing of facilities, equipment, mailing lists, or other assets			1m		Χ
n Sharing of paid employees			1n		Х
o Reimbursement paid to other organization for expenses			10		Х
p Reimbursement paid by other organization for expenses			1p		Х
q Other transfer of cash or property to other organization(s)			1q		Х
r Other transfer of cash or property from other organization(s)			1r		Х
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transactions.	tion thresholds.	•	•	•	
(a)	(b)		(c)		
Name of other organization	Transaction	Amou	unt invo	lved	
	type (a-r)				
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all sect 501(partners tion c)(3)	(e) Share of end-of-year assets	(f Dispropo allocat	ortionate	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		
			Yes	No		Yes N		No		No

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

	TOT THE LOCE O	ulcilani	year, or tax year beginning	, 2006,	and ending			, 20	
ВС	Check if applicable:	Please	C Name of organization Center for Biologic	al Diversity, I	nc.	D	Employe	r identification nu	ımber
	Address change	use IRS label or	Doing Business As				85	0420285	
-	Name change	print or	Number and street (or P.O. box if mail is not delivered	to street address)	Room/suite	E	Telephon	e number	
	nitial return	type. See	PO Box 710		1	1	520)	623-5252	,
-		Specific					787		_
Contract Con	ermination	Instruc- tions.	Tucson, AZ 85702			c	Gross rece	ipts \$ 9,186	e nen
_	mended return	F Nan	me and address of principal officer:						1117
A	application pending							r affiliates? Yes	
	Total control of the		n Suckling	1				cluded? LYes	
_	Tax-exempt status		501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐	527				st. (see instruction	s)
			logicaldiversity.org	Therese	114 1 1 1 1 1 1	H(c) Group exer			
_			oration ☐ Trust ☐ Association ☐ Other ▶	L Yea	r of formation:	1993 M	State of le	egal domicile: NM	1
Pa	rti Summ	ary							
Activities & Governance	The Cer	iter for	the organization's mission or most sign Biological Diversity works through so or small, hovering on the brink of exti	ience, law, an				iture for all	***
0	2 Check this	box ▶	if the organization discontinued its operation	ns or disposed of	more than 2	5% of its asset	s.		
9	3 Number	of votin	ng members of the governing body (Part	VI, line 1a)			3		5
Se			pendent voting members of the governing		VI line 1b)		4		2
¥			f employees (Part V, line 2a)				5		81
cti							6		15
4			elated business revenue from Part VIII, li		(0)	3 4 4 4	7a		0
			usiness taxable income from Form 990-		(C)		7b		0
	D NOT OTHE	ateu bi	diffess taxable medite from 1 orm 550-	1, 11116 04	· · · · ·	Prior Year	1 10	Current Year	_
			7 - 18 A 100 B - 100		-		2004		
e le			nd grants (Part VIII, line 1h)		1 1 1	5,325		7,651	
Revenue	100 May 100 Ma		그 보다 그 아니라 걸 이번 살이를 먹었다. 그런 보이 없는데 그리는 이번 바라를 하는데 그리고 있다.				5,365	1,454	
Be			me (Part VIII, column (A), lines 3, 4, and				7,092		,677
~			Part VIII, column (A), lines 5, 6d, 8c, 9c,				5,149		,335
_	12 Total reve	enue-a	dd lines 8 through 11 (must equal Part VIII	, column (A), lin	e 12)	5,974	1,407	9,178	
	13 Grants a	nd simi	lar amounts paid (Part IX, column (A), lir	nes 1-3)		81	,065	68	3,557
	14 Benefits	paid to	or for members (Part IX, column (A), lin	e 4)					
se	15 Salaries,	other co	empensation, employee benefits (Part IX, co	olumn (A), lines	5-10)	2,605	5,039	3,643	,734
Expenses	16a Professio	nal fund	draising fees (Part IX, column (A), line 11e)		106	5,531	114	,081
EX			expenses (Part IX, column (D), line 25) >		488				
			(Part IX, column (A), lines 11a-11d, 11f-			2,303	3,543	2,244	.951
			Add lines 13-17 (must equal Part IX, co		25)	5,096	5,178	6,071	,323
- 1			THE COURT OF SEA ONLY OF THE SEA				3,229	3,107	
s or						Beginning of Y		End of Year	
lan	20 Total ass	ate /Pa	rt X, line 16)	10		3,510	1.198	6,770	201
00			Part X, line 26)				,191		,836
E E			and balances. Subtract line 21 from line	20		3,355		6,462	
	A STATE OF	ature l				0,000	1001	OHOL	1000
Sigi Her	Under pe and belie	nalties of f, it is true ature of o eran Su	perjury, I declare that I have examined this return, in e, correct, and complete. Declaration of preparer (o						
_	-		100111 m (M. 11110)	Date	Check	cif p	narar'a id	tifuing number	
aid	Preparer's signature			Date	self-	11.0	parer s iden	ntifying number ns)	
	Firm's na		ours		4	EIN >			
lse (Only if self-em address,		4			Phone no.			_
	audiess,		return with the preparer shown above?	Service Annual Control of the		Triloite ilu.	1 1		

Pa	rt III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: The Center for Biological Diversity works through science, law, and creative media to secure a future for all species, great or small, hovering on the brink of extinction.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$1,792,385 including grants of \$62,297) (Revenue \$0) The Center's Public Lands Program aims to ensure that our public lands and waters are protected, restored, and managed for the maximum benefit to our nation's wildlife and ecosystems.
4b	(Code:) (Expenses \$ 1,194,428 including grants of \$0) (Revenue \$0) The goal of the Center's Climate, Air, and Energy Program is to reduce U.S. greenhouse gas emissions and air pollution to protect biological diversity and the environment. Specific objectives include securing protections for species threatened by the impacts of global warming, ensuring compliance with applicable law in order to reduce green house gas emissions, and educating and mobilizing the public on global warming issues.
4c	(Code:) (Expenses \$1,064,090 including grants of \$2,500_) (Revenue \$0_) The Center's Biodiversity and Endangered Species Program works to protect and recover imperiled plants and animals and their habitat. This is accomplished through a variety of tools including scientific research, policy and legal advocacy, and grassroots organizing.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 1,073,390 including grants of \$ 0) (Revenue \$ 0)
4-	Total measurement and the state of the state

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	1	
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	5		
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	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
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	9		1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		V
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	11	1	
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	12	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a		14a		V
ь	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	14b		1
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	15		1
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	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	-	1
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	21	1	-
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	22	V	-
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25.	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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	25b		1
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	26		1
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 I. Part III.	27		1

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:			
а	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)? If "Yes," complete Schedule L, Part IV	28a		1
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b	1	
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? If "Yes," complete Schedule L, Part IV.	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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	34	1	
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	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1

Form 990 (2008)

	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	. 프로그램 중에서 경험하다 및 10명이 있다면 보다 보다 있다면 되었다. 그리고 있다면 보다 보다 보다 되었다면 보다 되었다면 보다 되었다면 보다 보다 보다 되었다면 보다 되었다면 보다	10		V
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		-
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	10		·
	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?	5a		1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a	1	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75?	7a	1	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	1	-
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?.	7h	1	
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?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?.	9b		
0	Section 501(c)(7) organizations, Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:	3		
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.)			
2a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			

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

	ction A. Governing Body and Management		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the		100	110
	circumstances, processes, or changes in Schedule O. See instructions.		1	
12	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ľ
_		2		1
3	any other officer, director, trustee, or key employee?			
0	Did the organization delegate control over management duties customarily performed by or under the direct	-		1
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		4
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		4
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	-	4
6	Does the organization have members or stockholders? ,	6		Y
7a	and the state of t	3.		1
	of the governing body?	7a	-	٧.
b		7b		V
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9a	Does the organization have local chapters, branches, or affiliates?	9a		1
b	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?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	6.	TU	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	1	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	1		
2 1 1	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		1
Sec	tion B. Policies			
16.74	AND THE RESERVE OF THE PARTY OF	2200	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	4	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1 5 5 1		
12		12c	1	
13	describe in Schedule O how this is done	12c	1	1
	describe in Schedule O how this is done Does the organization have a written whistleblower policy?	77	1	1
14	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	13	1	1
14 15	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	13	1	V
14	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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:	13	1	V
14 15 a	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official?	13 14 15a	1	/
14 15 a	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	13	/	1
14 15 a b	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	13 14 15a	1	/
14 15 a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	13 14 15a 15b	1	1
14 15 a b	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	13 14 15a	1	/
14 15 a b	describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	13 14 15a 15b	/	1
14 15 a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	13 14 15a 15b	4	1
14 15 a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure	13 14 15a 15b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1
14 15 a b 16a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ and CA	13 14 15a 15b	y y	1
14 15 a b 16a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ and CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)	13 14 15a 15b	√ √	1
14 15 a b 16a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? List the states with which a copy of this Form 990 is required to be filed AZ and CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply.	13 14 15a 15b	y y	1
14 115 a b 116a b Sec 17	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ and CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request	13 14 15a 15b 16a 16b		1
14 15 a b 16a b	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ and CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict or	13 14 15a 15b 16a 16b		1
14 115 a b 116a b Sec 17	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ and CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request	13 14 15a 15b 16a 16b	erest	1

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 c (A)	(B)	(C)					-	(D)	(E)	(F)	
Name and Title	Average hours per week	Position (check all that apply)						Reportable	Reportable	Estimated	
Peter J. Galvin		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
	50						1	04.022		22.74	
Director	50	1						94,922	0	11,740	
Marcey Olajos Chairperson	2	1						0	0	0	
Katherine Meyer Director	2	1		Ĭ				0	0	0	
Todd D. Schulke Treasurer	50	1		1				51,500	0	13,601	
Robin D. Silver	SE P	1		12							
Secretary	50	1		1			2 //	81,500	0	15,702	
Dan Coleman	2							0			
Treasurer	-	1		1				0	0	0	
Kieran F. Suckling Executive Director	50			1				104,313	0	11,658	
Michael Finkelstein Executive Director	50			1				13,167	0	2,295	
			I								
			Ī								
							1				
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90000000000000000000000000000000000000											
				1	1		+				

Part VII Section A. Officers, Directors, Tru (A)	(B)			(6	C)			(D)	(E)		(F)
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MIS	comp comp comp fro orga and	timated ount of other pensation om the anization related nizations
***************************************			I								
			Ĭ								
			J								
		1									
								1 7			
				Ĭ.							
***************************************					I						
1b Total	450						•	345,402			54,996
2 Total number of individuals (including those organization ▶ 1				H							om the
3 Did the organization list any former office employee on line 1a? If "Yes," complete So	r, director chedule J I	or tru or su	iste ch i	e, k indiv	ey i vidu	emplo al .	oyee	, or highest c	ompensated	3	1
4 For any individual listed on line 1a, is the s the organization and related organizations	greater tha	n \$15	0,0	00?	If "	Yes,"	con	plete Schedu	le J for such		Ν,
 individual. 5 Did any person listed on line 1a receive services rendered to the organization? If ") 	or accrue	comp	ens	atio	n f	rom a	any	unrelated orga	anization for	4	1
Section B. Independent Contractors	es, comp	iete c	SCITE	euui	60	101 5	ucii	person		5	٧
Complete this table for your five highest co- compensation from the organization.	mpensate	d inde	eper	nder	nt c	ontra	ctor	s that received	d more than \$	100,000	of
(A) Name and business add	ress							(B) Description of se	ervices	(C) Compensi	ation
None											(
2 Total number of independent contractors (compensation from the organization ► 0	including to	hose	in 1) wi	no r	eceiv	ed r	more than \$10	0,000 in		

Par	t VI	Statement of Re	evenue					T age
		Statement of the	venue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ants	1a	Federated campaigns		4,426		revenue		312, 313, 01 314
gifts, gra	b d	Membership dues Fundraising events . Related organizations	1c	6,486				
e Contributions, gifts, grants and other similar amounts	f g h	All other contributions, gifts, and similar amounts not include Noncash contributions include Total. Add lines 1a-1f	grants, uded above 1f ed in lines 1a-1f: \$		7,651,774			
a e	1	Cont management for any live	and the state of t	Business Code				
eve	2a	III of Astronomy II I I I		9.4.6.4.6.6	1,398,161	1,398,161		
ervice R	c	Contract work for progr	ams	900099	2,178 54,556	2,178 54,556		
Program Service Revenue	e f	0.411141114111111111111111111						
F .	g	Total. Add lines 2a-2f			1,454,895			
	3 4 5	Investment income (income similar amounts) Income from investment of	of tax-exempt bond	proceeds	68,970			68,970
	3	Royalties	(i) Real	(ii) Personal				
	b	Gross Rents Less: rental expenses Rental income or (loss)						
		Net rental income or (lo	(i) Securities					
	7a	Gross amount from sales of assets other than inventory	(i) Securities 58,524	(ii) Other				
	li iii	Less: cost or other basis and sales expenses .	58,817					
Н	d	Gain or (loss) Net gain or (loss)	-293	>	-293			-293
r Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18	1,125.	3,575				
Other Re		Less: direct expenses Net income or (loss) fro		875 ents >	2,700			2,700
	9a	Gross income from gam See Part IV, line 19	ing activities.					2,700
		Less: direct expenses. Net income or (loss) fro	b	ies ▶				
	ь	Gross sales of inverteurns and allowances Less: cost of goods sol Net income or (loss) from	a	7,129 6,494	625	625		
		Miscellaneous Reve		Business Code	635	635		
	11a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	200 (000 000 000 000 000 000 000 000 000					
	100							

		All other revenue						
		Total. Add lines 11a-11				3.0		
	12	Total Revenue. Add lin 9c, 10c, and 11e	es 1h, 2g, 3, 4, 5	5, 6d, 7d, 8c,	9,178,681	1,455,530		71,377

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, b, 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	58,211	58,211		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	6,586	6,586		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	3,760	3,760		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	401,956	388,768	6,594	6,594
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	2,539,882	2,312,246	79,984	147,652
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	120,101	112,317	3,029	4,755
9	Other employee benefits	322,057	290,386	15,660	16,011
10	Payroll taxes	259,738	230,871	15,247	13,620
11	Fees for services (non-employees):				
	Management	74.000	00.707	4.000	
	Legal	74,660	69,737	4,923	
C	Accounting	7,870		7,870	
d	Lobbying	444.004			444.004
1.5	Professional fundraising services. See Part IV, line 17	114,081			114,081
f	Investment management fees	207,724	166511	41,213	
	Other	80,883	77,217	3,666	
12	Advertising and promotion	298,601	230,613	59,215	8,773
13	Office expenses	44,856	43,922	619	315
14 15	Information technology	11,000	10,022	0.0	313
16	Royalties	213,708	205,557	4,939	3,212
17	Travial	290,854	276,484	5,616	8,754
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	45,595	29,940	14,995	660
20	Interest				
21	Payments to affiliates ,				
22	Depreciation, depletion, and amortization .	79,734	67,582	5,663	6,489
23	Insurance	26,255	13,312	12,943	
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	Internet organizing	23,069	23,069		
b	Publications	161,756	161,756		
C	Fundraising	648,549	322,984		325,565
d	Miscellaneous	3,436	2,849	147	440
e	Dues and subscriptions	30,881	23,095	1,219	6,567
	All other expenses Contributions	6,520	6,520	1442 014	2017 1011
25	Total functional expenses. Add lines 1 through 24f	6,071,323	5,124,293	283,542	663,488
26	Joint Costs. Check here ▶ ☑ 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	707,717	280,968	6,030	420,719

			(A) Beginning of year		End	(B) of yea	ır
	1	Cash—non-interest-bearing , , , , , , , , , , , ,	234,179	1		79	7,579
	2	Savings and temporary cash investments	2,429,620	2		5,36	0,490
	3	Pledges and grants receivable, net	573,175	3		34	9,29
	4	Accounts receivable, net	13,530	4			
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		6			
co.	7	Part II of Schedule L		7			-
Assets	8	Notes and loans receivable, net	19,154			1	0,872
As	9	Prepaid expenses and deferred charges	61,052				7,182
	10a	Land, buildings, and equipment: cost basis 10a 547,858	011002				1,102
	b						
		Part VI of Schedule D	155,125	10c		21	4,010
	11	Investments—publicly traded securities		11			-
	12	Investments—other securities. See Part IV, line 11		12			
	13	Investments—program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	24,363	15		2	0,778
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,510,198	16		6,77	0,201
	17	Accounts payable and accrued expenses . , . ,	155,191	17		15	7,836
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
ies	21	Escrow account liability. Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		22			
		persons. Complete Part II of Schedule L		23			
	23	Secured mortgages and notes payable to unrelated third parties		24		15	0,000
	25	Unsecured notes and loans payable		25		101	0,000
	26	Total liabilities. Add lines 17 through 25	155,191	26		30	7,836
ances		Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.	700,101			50	1,000
and	27	Unrestricted net assets	1,242,615	27		1.94	3,395
	28	Temporarily restricted net assets	2,112,392	28			8,970
P	29	Permanently restricted net assets	72.74	29		.,-,-	7,014
Net Assets or Fund Ba	2.5	Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.					
ts.	30	Capital stock or trust principal, or current funds		30			
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32			
Vet	33	Total net assets or fund balances	3,355,007	33		6,462	2,365
	34	Total liabilities and net assets/fund balances	3,510,198	34			0,201
Pa	rt XI	Financial Statements and Reporting					
1	Acco	ounting method used to prepare the Form 990; Cash Accrual	Other			Yes	No
		e the organization's financial statements compiled or reviewed by an inde		?	2a		1
b		e the organization's financial statements audited by an independent acco			2b	1	
		es" to lines 2a or 2b, does the organization have a committee that assumes r		sight of			
17		audit, review, or compilation of its financial statements and selection of an inc			2c	1	
3a		result of a federal award, was the organization required to undergo an a					17
	the S	Single Audit Act and OMB Circular A-133?		4 4	За		1
b	If "Y	es," did the organization undergo the required audit or audits?	a la		3b		

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Center for Biological Diversity, Inc. 0420285 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/4 % 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 331/3 % 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) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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. b Type II c Type III-Functionally integrated e D 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(iii) Provide the following information about the organizations the organization supports. (i) Name of supported (iii) Type of organization (ii) EIN (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support above or IRC section col. (i) of your governing document? (i) organized in the (see instructions)) U.S.? support? Yes Yes No No Yes No

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.)

	ction A. Public Support							
Ca	alendar 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.")	2,515,704	2,406,281	3,502,252	5,295,401	7,825,898	21,545,536	
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 1-3	2,515,704	2,406,281	3,502,252	5,295,401	7,825,898	21,545,536	
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)						5,724,896	
_	tion B. Total Support			1			15,820,640	
	llendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
7	Amounts from line 4	2,515,704	2,406,281	3,502,252	5,295,401	7,825,898	21,545,536	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,646	44,483	56,575	97,902	68,970	283,576	
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 .					100	21,829,112	
12	Gross receipts from related activities, etc.					12	3,548,836	
13	First five years. If the Form 990 is for toganization, check this box and stop her	he organization	n's first, second	d, third, fourth,	or fifth tax ye	ear as a section	501(c)(3)	
Sec	tion C. Computation of Public Sup	port Percen	tage					
14	Public support percentage for 2008 (line 6	, column (f) div	ided by line 11,	column (f))		14	72.47 %	
15	Public support percentage from 2007 Sch					15	62.51 %	
16a	331/3 % support test - 2008. If the organiz and stop here. The organization qualifies	as a publicly su	apported organi	zation			> 🗸	
b	33% % support test-2007. If the organization qualities box and stop here. The organization qualities	ation did not ch	neck a box on li	ne 13 or 16a, a	nd line 15 is 3	31/3 % or more,	check this	
17a	10%-facts-and-circumstances test – 200 more, and if the organization meets the "facts-and-circums"	cts-and-circum	stances" test, c	heck this box a	nd stop here.	Explain in Part I	V how the	
b 18	10%-facts-and-circumstances test—2007. more, and if the organization meets the "facts-and-circumstanter organization meets the "facts-and-circumstanter organization did in the organization did in th	cts-and-circums nces" test. The o	tances" test, ch rganization quali	eck this box an	d stop here. It supported org	Explain in Part II anization	V how the	

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.)

C	alendar 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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						4=
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)			100000			
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) >	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	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.)						
4	First five years. If the Form 990 is for the organization, check this box and stop h	ne organizatio		nd, third, fourth		year as a section	on 501(c)(3)
Sec	tion C. Computation of Public Sup				A PER PER		1 10 10
5	Public support percentage for 2008 (line	-		e 13, column ((f))	15	%
6 Sec	Public support percentage from 2007 Ston D. Computation of Investment	chedule A, Pa	art IV-A, line 27			16	%
7	Investment income percentage for 2008			by line 13, co	olumn (f)) .	17	%
8	Investment income percentage from 200	7 Schedule A	A, Part IV-A, lin	e 27h		18	%
19a	33½ % support tests—2008. If the orgal 17 is not more than 33½ %, check this bo	x and stop he	re. The organiz	zation qualifies	as a publicly	supported orga	anization >
b	33\% % support tests - 2007. If the organization 18 is not more than 33\% %, check this	zation did not	check a box on here. The organ	line 14 or line	19a, and line	16 is more than	33⅓ %, and
0	Private foundation. If the organization of						

200		-
Pac	le	4

	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)

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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number 85 0420285 Center for Biological Diversity, Inc. To be completed by all organizations exempt under section 501(c) and section 527 organizations. Part I-A See the instructions for Schedule C for details. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Part I-B To be completed by all organizations exempt under section 501(c)(3). See the instructions for Schedule C for details. Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 . > If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No b If "Yes," describe in Part IV. To be completed by all organizations exempt under section 501(c), except section 501(c)(3). Part I-C See the instructions for Schedule C for details. Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (d) Amount paid from (e) Amount of political (a) Name filing organization's contributions received and promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

Pa		nizations exempt under section 501(c)(3) t 1(h)). See the instructions for Schedule C for		68			
	Check ► ☐ if the filing organization In Check ► ☐ if the filing organization of	belongs to an affiliated group. Checked box A and "limited control" provision	ons apply.				
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals			
1a	Total lobbying expenditures to influence	4,633					
b	Total lobbying expenditures to influence	사하다 살아보다 시간 아이들이 다 경기나 되었다. 이 그들은 그는 것으로 가게 됐어요!!!!!! 그렇게 되었다.	7,287				
C	(B. T. B. B. M. B.	la and 1b)	11,920				
d			5,422,555				
e		d lines 1c and 1d)	5,434,475				
f		amount from the following table in both	421,128				
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e.					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.					
- 1	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.					
_1	Over \$17,000,000	\$1,000,000.		_			
q	Grassroots nontaxable amount (enter 25	5% of line 1f)	105,282				
h	Subtract line 1g from line 1a. Enter -0-	0					
i	Subtract line 1f from line 1c. Enter -0- i	0					
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?						

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

	Lobb	ying Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a	Lobbying non-taxable amount	286,022	328,153	379,180	421,128	1,414,483
b	Lobbying ceiling amount (150% of line 2a, column(e))					
C	Total lobbying expenditures	143,767	148,870	14,831	7,287	314,755
d	Grassroots non-taxable amount	71,506	82,038	94,795	105,282	353,621
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures	69,920	80,801	3,993	4,633	159,347

_	5768 (election under section 501(h)). See the instructions for Schedule C for	T			(h)	
		Yes	No		(b) moun	t
		103		100	iiouii	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of: Volunteers?					
a	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
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?					
q	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?	5.11				
i	Other activities? If "Yes," describe in Part IV	7.1		7		
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	500				
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					_
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			1/51		
Pai	To be completed by all organizations exempt under section 501(c)(4), section 501(c)(6). See the instructions for Schedule C for details.	tion	507(c)(5), o	r	
_	Section 30 1(0)(0). See the instructions for Schedule of for details,		-		Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?			1		.,,,
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		987	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
	To be completed by all organizations exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" question 3 is answered "Yes." See Schedule C instructions for details.	OR	if Pa	rt III-A		
2	Dues, assessments and similar amounts from members	s of				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	00	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion o excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	3.6	5			
Pai	t IV Supplemental Information				_	
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, complete this part for any additional information.	line 5;	and	Part II-l	B, line	e 1i.
****					•••••	24-12
****				بتعابيه		
****		*****	بنيون			
165						
100		*****			*****	-51-5
		*****	*****	*******	100011	, 22.121

Annual Control of the	orm 990 or 990-EZ) 2008	Page 4
Part IV	Supplemental Information (continued)	

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2008

Open to Public Inspection

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.

	e of the organization		Emp	loyer identification number
	nter for Biological Diversity, Inc.		85	0420285
Pa	Organizations Maintaining Don the organization answered "Yes	nor Advised Funds or Other Similar F " to Form 990, Part IV, line 6.	Funds o	r Accounts. Complete if
		(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 funds are the organization's property, subj			
6	Did the organization inform all grantees, do used only for charitable purposes and not impermissible private benefit?	for the benefit of the donor or donor advise	or or oth	er
Da		olete if the organization answered "Yes" i	to Form	Yes No
_	The second secon			990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held Preservation of land for public use (e.g. Protection of natural habitat Preservation of open space Complete lines 2a–2d if the organization held	., recreation or pleasure)	n of an hi n of cert	storically important land area ified historic structure conservation easement
	on the last day of the tax year.			
				Held at the End of the Year
а	Total number of conservation easements.			2a
b	Total acreage restricted by conservation ea	asements		2b
C	Number of conservation easements on a c	ertified historic structure included in (a) .		2c
d	Number of conservation easements include	ed in (c) acquired after 8/17/06		2d
3	Number of conservation easements modified the taxable year ▶	ed, transferred, released, extinguished, or t	erminate	d by the organization during
4	Number of states where property subject to	o conservation easement is located >		***
5	Does the organization have a written policy enforcement of the conservation easement			
6	Staff or volunteer hours devoted to monito	ring, inspecting, and enforcing easements	during th	e year ▶
7	Amount of expenses incurred in monitoring	, inspecting, and enforcing easements duri	ing the y	ear▶ \$
8	Does each conservation easement reported $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$?		ts of sec	ion Yes . No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the the organization's accounting for conservations.	ne text of the footnote to the organization's	nue and s financia	expense statement, and I statements that describes
Pai		ections of Art, Historical Treasures, or vered "Yes" to Form 990, Part IV, line 8.	Other S	imilar Assets.
1a	If the organization elected, as permitted un art, historical treasures, or other similar asse provide, in Part XIV, the text of the footnote	ts held for public exhibition, education, or re	esearch in	furtherance of public service,
b	If the organization elected, as permitted un historical treasures, or other similar assets provide the following amounts relating to the	held for public exhibition, education, or res nese items:	search in	furtherance of public service,
	(i) Revenues included in Form 990, Part V			
	(ii) Assets included in Form 990, Part X .			. > \$
2	If the organization received or held works following amounts required to be reported	under SFAS 116 relating to these items:		12-03-37-17-17
а	Revenues included in Form 990, Part VIII, I			. > \$
b	Assets included in Form 990, Part X			, > \$

Sche	dule D (Form 990) 2008	TLL I					Page 2
Pai	t III Organizations Maintainin	g Collections of Art	, Histori	cal Treasure	es, or (Other Similar As	sets (continued)
3	Using the organization's accession a items (check all that apply):	nd other records, che	ck any o	f the following	that a	re a significant us	e of its collection
а	Public exhibition		d 🗌	Loan or excl	hange p	orograms	
b	Scholarly research		е 🗌				************
c	Preservation for future generation	ons					
4	Provide a description of the organiza Part XIV.	tion's collections and	explain h	ow they furth	er the o	organization's exer	mpt purpose in
5	During the year, did the organization so assets to be sold to raise funds rather	olicit or receive donation than to be maintained a	ns of art, as part of	historical treas the organization	ures, or on's col	other similar lection?	Yes No
Pai	Trust, Escrow and Custo Part IV, line 9, or reported				ion ans	swered "Yes" to I	Form 990,
	Is the organization an agent, trustee, included on Form 990, Part X?				itions o	r other assets not	☐ Yes ☐ No
b	If "Yes," explain the arrangement in F	Part XIV and complete	the follo	wing table:		Λ	nount
	A real factor of the control of the				10	_	iount
	Beginning balance				10		
	Additions during the year				16		
e	Distributions during the year Ending balance				11		
	Did the organization include an amou	ent on Form 990 Part		12			Yes No
b	If "Yes," explain the arrangement in I	Part XIV.	λ, ιιιο 2		0.00		103 110
Pai	t V Endowment Funds. Com	plete if organization	answei	ed "Yes" to	Form	990, Part IV, line	10.
		(a) Current year (b)	Prior year	(c) Two year	rs back	(d) Three years back	(e) Four years back
1a	Beginning of year balance ,						
b	Contributions						
C	Investment earnings or losses						
d	Grants or scholarships		_		_		
е	Other expenditures for facilities and programs						
f g	Administrative expenses End of year balance						
2	Provide the estimated percentage of	the year end balance	held as:				
а	Board designated or quasi-endowme	nt ▶%					
b	Permanent endowment ▶	%					
C	Term endowment ▶%						
3a	Are there endowment funds not in the organization by:	possession of the orga	anization	that are held a	and adn	ninistered for the	Yes No
	(i) unrelated organizations , , .			en en en la de			3a(i)
	(ii) related organizations			e de ce de le			3a(ii)
-	If "Yes" to 3a(ii), are the related organ				7 7		3b
4	Describe in Part XIV the intended use				7-4-W	E 10	
Par	t VI Investments—Land, Buil				Laboration To		TANA WARRANTO A VICTOR
	Description of investment	(a) Cost or other basi (investment)		Cost or other asis (other)	(c)	Depreciation	(d) Book value

Part VII Investments – Other Securities.	See Form 990, Part X	. line 12.	rage
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	luation: narket value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
		11.	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments-Program Related	J. See Form 990, Part X	(, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	lluation: narket value
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Par	t X, line 15.		
	(a) Description		(b) Book value
Deposits			20,778
			+
Total. (Column (b) should equal Form 990, Part X, col.	(B) line 15.)		
Part X Other Liabilities. See Form 990, F	Part X, line 25.		
(a) Description of liability	(b) Amount		
Federal income taxes			

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Sche	dule D (Form 990) 2008			Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		9,178,681
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		6,071,323
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		3,107,358
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		0
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net). Add lines 4–8	9		0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10		3,107,358
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue	1		
1	Total revenue, gains, and other support per audited financial statements	1	-	9,214,681
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments			
b	Donated services and use of facilities	0		
C	Recoveries of prior year grants	-		
d	Other (Describe in Part XIV)	-		
е	Add lines 2a through 2d	20	-	20 000
3	Subtract line 2e from line 1	-	-	36,000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b			
b	Other (Describe in Part XIV)	4		
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	-	9,178,681
-	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses			
1	Total expenses and losses per audited financial statements	1	-	6,107,323
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		8 -	
a	Donated services and use of facilities	0		
b	Prior year adjustments			
c	Losses reported on Form 990, Part IX, line 25			
d	Other (Describe in Part XIV)			
	Add lines 2a through 2d	2	e	36,000
3	Subtract line 2e from line 1	3	1	6,071,323
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIV)			
C	Add lines 4a and 4b	4	3	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5		6,071,323
Pai	t XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.			. 4
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Schedule D (For	m 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	

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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, Department of the Treasury Internal Revenue Service 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Employer identification number Name of the organization 0420285 Center for Biological Diversity, Inc. 85 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants a Mail solicitations **Email solicitations** Solicitation of government grants Special fundraising events c Phone solicitations d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Ves Do b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table. (iii) Did fundraiser have (v) Amount paid to (vi) Amount paid to (i) Name of individual (ii) Activity (iv) Gross receipts (or retained by) or entity (fundraiser) custody or control of contributions? from activity (or retained by) fundraiser listed in col. (i) organization Yes No 25,000 Rene Simi Consultant 279,096 Telephone 40,395 23,329 Telefund Consultant 155,419 44,387 Avalon Hazen Consultant 22,754 12,000 Total . 497,664 25,000 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK,

	more than \$15,000 on F				55,000.		
		(a) Event #1	(b) Event #2	(c) Other Events	(Add col	tal Events . (a) through	
		(event type)	(event type)	(total number)	CC	ol. (c))	
Revenue							
sve	1 Gross receipts						
ř	2 Less: Charitable						
	contributions				1		
	3 Gross revenue (line 1 minus line 2)						
7							
	4 Cash prizes						
0							
Se	5 Non-cash prizes				-		
per							
Û	6 Rent/facility costs						
Direct Expenses	7 Other direct expenses						
۵	Tourist amost emponess 1. 1.						
	8 Direct expense summary. Ad				(
0	 9 Net income summary. Comb rt III Gaming. Complete if t 				or ropo	rtad m	250
Pa	rt III Gaming. Complete if t than \$15,000 on Form	ne organization ans 990-FZ, line 6a.	wered tes to roim	990, Fart IV, line 19	, or repo	area iii	ore
m	man project on rom	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Tota	al gaming	(Add
ng l		(4) = 1.3+	bingo/progressive bingo	147 9 20 20 20 20 20		through co	
Revenue	to a series						
Œ.	1 Gross revenue				-		
,,	A AND AND AND AND AND AND AND AND AND AN						
ses	2 Cash prizes						
ber	3 Non-cash prizes						
Щ	3 Non-cash prizes						
Direct Expenses	4 Rent/facility costs						
ā							
-	5 Other direct expenses .	П «	П.,	П			_
	No team Association	☐ Yes% ☐ No	☐ Yes%	☐ Yes%			
	6 Volunteer labor , , .	□ NO	□ NO	I LI NO			
	7 Direct expense summary. Ad	d lines 2 through 5 in	column (d)		(1
1	7 Direct expense summary. Ad	a lines z tillough o in i	solutilit (a)				
	8 Net gaming income summary	. Combine lines 1 and	7 in column (d) , , .				
						Yes	No
9	Enter the state(s) in which the o						
a	Is the organization licensed to o	perate gaming activities	es in each of these state	es?		9a	
b	If "No," Explain:						
					Contract to the second		
(Oa	Were any of the organization's g					10a	
	If "Yes," Explain:	January mountains	sa, seepended of termin				
1	.,						
						44	
11	Does the organization operate g	aming activities with r	nonmembers?			11	
2	Is the organization a grantor, be		a trust or a member of	a partnership or other		12	

					á
-	4	-	-	140	•
P	а	а	е		٠

			/es	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility			
Ь	All outside facility			
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 ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor		- 1	
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	7	
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 > \$			

(Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ➤ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection 2008

Center for Biological Diversity, Inc. Name of the organization Employer identification number 0420285

_ ;	stance to Go	vernments and	Organizations in t	he United States.	Complete if the orga	nization answered	"Yes" on
Fart III Grants and Other Assistance to Governments and Organizations in the United States. Complete it the organization ariswered the States of Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part IV and Schedule I-1 (Form 990) if additional space is needed	stance to Go 21, for any red 1 (Form 990) i	vernments and spient that rece f additional spa	organizations in the lived more than \$5,0 ce is needed	00. Check this box	if no one recipient r	no one recipient received more than \$5,000. Use	\$5,000. Use
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Grand Canyon Wildlands Council PO Box 1594, Flagstaff, AZ 86002	86-0894042	501(c)(3)	7,600				Off road vehicles
Wildlands CPR PO Box 7516, Missoula, MT 59807	81-0512261	501(c)(3)	35,000				Off road vehicles
Santa Fe Media and Education PO Box 427, Santa Fe, NM 87504	85-0483952	501(c)(3)	5,000				San Pedro Video
		Control of the Contro					

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Use Schedule I-1 (Form 990) if additional space is needed.	ditional space is ne	eded.	ilpicio il ule organi	ובמווסוו מוופשפופט ופס	Use Schedule I-1 (Form 990) if additional space is needed.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ORV Reform Campaign work	_	5,000			
ORV Reform Campaign work	_	1,000			
ORV Reform Campaign work	_	586			
Part IV Supplemental Information. Complete this part to provide the information required in Part I	plete this part to pr	ovide the information	on required in Part	line 2,	and any other additional information.
Part Line 2 Grant monitoring procedures					
Grantees are required to submit an interim report, usually half way through the grant period, and a final report at the end of the grant period. The reports include a	ort, usually half way	through the grant pe	riod, and a final rep	ort at the end of the grant	t period. The reports include a
summary of accomplishments with details when specifics are required. The interim reports are reviewed to	en specifics are requ	ired. The interim rep	orts are reviewed to	ensure the requirements of the grant are being	s of the grant are being
accomplished and to assist the grantees if any concerns are identified.	concerns are identif				in monthly phone conferences that review the overall
progress of the project			In some cases grantees participate	in monthly phone confe	

SCHEDULE L (Form 990 or 990-EZ)

To be completed by on Department of the Treasury Internal Revenue Service Type Treasury Type Treasu

Transactions With Interested Persons

► 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.

OMB No. 1545-0047

2008

Open To Public

Name of the organization

Center for Biological Diversity, Inc.

Employer identification number 85 0420285

A CARLON CONTRACTOR OF THE CARLON CONTRACTOR O			1.71							(c) Cor	rected
(a) Name of disqualified person		_	(b)	Description of	transaction					Yes	No
		-						_			
	C. Branco					interior					1
 Enter the amount of tax imposed on under section 4958 Enter the amount of tax, if any, on line 							Sup 6				
Part II Loans to and/or From Interes To be completed by organization	ested Perso	ons.						V lin	e 38a		
(a) Name of interested person and purpose	(b) Loan to o	or from	(c) Original principal amount	(d) Balan		(e) In d		(f) App		1777	/ritten
	To F	rom				Yes	No	Yes	No	Yes	No
							-				
-1.1			. 6								
	itting Intere	ested Per	▶ \$								
otal	itting Intere	sted Per	rsons.		V, line 27	7.					
Part III Grants or Assistance Benefi	itting Intere tions that ar	ested Per nswered onship bety	rsons.	990, Part I	7000	7.	of grant	t or typ	e of as	ssistand	ce
Part III Grants or Assistance Benefi To be completed by organiza	itting Intere tions that ar	ested Per nswered onship bety	rsons. "Yes" on Form ween interested pers	990, Part I	7000	- 57 Bud	of grant	t or typ	e of as	ssistano	ce
Part III Grants or Assistance Benefi To be completed by organiza	itting Intere tions that ar	ested Per nswered onship bety	rsons. "Yes" on Form ween interested pers	990, Part I	7000	- 57 Bud	of grant	t or typ	e of as	ssistanc	ce
Part III Grants or Assistance Benefi To be completed by organiza	itting Intere tions that ar	ested Per nswered onship bety	rsons. "Yes" on Form ween interested pers	990, Part I	7000	- 57 Bud	of grant	t or typ	e of as	ssistano	ce
Grants or Assistance Benefi To be completed by organiza (a) Name of interested person	itting Intere tions that ar (b) Relation	ested Per nswered ionship betw	rsons. "Yes" on Form ween interested persorganization	990, Part I	7000	- 57 Bud	of grant	t or typ	e of as	ssistand	ce
Part III Grants or Assistance Benefi To be completed by organiza	(b) Relations that ar	ested Pernswered conship between Constitution Consti	rsons. "Yes" on Form ween interested persorganization	990, Part I	(c) A	mount o			e of as	ssistand	ce
Part III Grants or Assistance Benefi To be completed by organiza (a) Name of interested person Part IV Business Transactions Invol	(b) Relations that are (b) Relations that (b)	ested Pernswered conship between Constitution Consti	rsons. "Yes" on Form ween interested persorganization rsons. "Yes" on Form	990, Part I	(c) A	mount o	b, or	28c.		(e) Sha	aring zation
Grants or Assistance Benefic To be completed by organization (a) Name of interested person Part IV Business Transactions Involution To be completed by organization (a) Name of interested person	itting Interestions that ar (b) Relations that ar (b) Relations that ar (b) Relations that ar	sted Pernswered steel Pernswered Pernswered tionship bet diperson arganization	rsons. "Yes" on Form ween interested persorganization rsons. "Yes" on Form tween (c) Ar	990, Part I	(c) A/	mount o	b, or a	28c.	on	(e) Sha	aring zation
Part III Grants or Assistance Benefi To be completed by organiza (a) Name of interested person Part IV Business Transactions Invol To be completed by organiza	(b) Relations that are (b) Relations that (b)	sted Pernswered steel Pernswered Pernswered tionship bet diperson arganization	rsons. "Yes" on Form ween interested persorganization rsons. "Yes" on Form tween (c) Ar	990, Part I	(c) A	mount o	b, or a	28c.	on	(e) Sha organiz rever	aring gratior nues?
Grants or Assistance Benefic To be completed by organization (a) Name of interested person Part IV Business Transactions Involution To be completed by organization (a) Name of interested person	itting Interestions that ar (b) Relations that ar (b) Relations that ar (b) Relations that ar	sted Pernswered steel Pernswered Pernswered tionship bet diperson arganization	rsons. "Yes" on Form ween interested persorganization rsons. "Yes" on Form tween (c) Ar	990, Part I	(c) A/	mount o	b, or a	28c.	on	(e) Sha organiz rever	aring zation nues'

SCHEDULE M (Form 990)

NonCash Contributions

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

OMB No. 1545-0047 Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

Center for Biological Diversity, Inc. 0420285 Part I Types of Property (a) (b) (c) Check if Number of contributions Method of determining Revenues reported on applicable Form 990, Part VIII, line 1g revenues 1 Art-Works of art 2 Art-Historical treasures . . 3 Art—Fractional interests . . Books and publications . . 5 Clothing and household goods Cars and other vehicles . . Boats and planes 7 Intellectual property 8 58,524 9 Securities-Publicly traded . Market value Securities-Closely held stock . 10 11 Securities-Partnership, LLC, or trust interests 12 Securities—Miscellaneous 13 Qualified conservation contribution (historic structures) Qualified conservation contribution (other) Real estate-Residential . . 15 16 Real estate-Commercial . . Real estate-Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies . 21 Historical artifacts 22 23 Scientific specimens . . . Archeological artifacts . . . 24 Other ▶ (.Software....) 3,672 Fair market value 25 Other ▶ (.Supplies....) 1,029 Fair market value 26 27 Other ▶ (.....) 28 Other ▶ (.....) 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 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a 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 31 ************* contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a 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.

		Page 2
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.	
	·	

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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Center for Biological Diversity, Inc.	85 0420285
Form 990 Part III Line 4d	
(Code:) (Expenses \$ 537,357 including grants of \$) (Re	evenue \$ None)
The Center's Oceans Program works to protect global marine biodivers	sity and prevent the extinction of any marine species
subject to the U.S. jurisdiction. Priorities include securing Endangered	Species Act listings and habitat designations
for imperiled marine life, and advocating for reform of harmful fishing	practices, noise pollution, climate change, and
other damaging practices affecting the ocean's environment.	***************************************
(Code:) (Expenses \$ 328,603 including grants of \$) (Reve	nue \$ None)
The Urban Wildlands Program aims to protect wildlife, natural areas, and	nd quality of life at the urban interface through
conservation planning, policy advocacy, and grassroots mobilization.	
(Code:) (Expenses \$ 207,430 including grants of \$) (Revenue	\$ None)
The International program aims to protect global biodiversity where U.S	S. and international laws can be applied, and
successfully hold the U.S. government accountable for its actions three	atening species around the globe.
Part VI Section A Line 10	
An electronic copy of the final version of Form 990 was provided to each	ch voting member of the Board of Directors
before it was filed with the IRS.	
In addition, a copy of the final version of Form 990 was provided to the	Audit Committee of the Board of Directors prior
to filing. The Audit Committee oversees the financial reporting process	s of the organization and will conduct a review
of Form 990 before the end of the 2009 calendar year.	
Part VI Section B Line 12	·····
No conflicts of interest arose during the 2008 reporting year. The organ	nization has a standard Conflict of Interest Policy.
Under the organization's Conflict of Interest Policy, any officer, director	r, or committee member must immediately disclose
any actual or potential conflict of interest to the directors and members	of committees with governing board delegated
powers that might consider any proposed transaction or arrangement.	***************************************
After disclosure of the financial interest and all material facts, and after	any discussion with the interested person he/she
leaves the governing board or committee meeting while the determinati	on of a conflict of interest is discussed and voted

Schedule O (Form 990) 2008		Page
Name of the organization	Employer is	dentification number
Center for Biological Diversity, Inc.	85	0420285
upon by the remaining board or committee members. Thereafter, the governing board or	r committee	investigates
alternatives to the proposed transaction or arrangement and determines whether the org	janization c	an obtain with
reasonable efforts a more advantageous transaction or arrangement from a person or er	ntity that wo	ould not give rise to
a conflict of interest.		
If a more advantageous transaction or arrangement is not reasonably possible under cir	cumstances	not producing a
conflict of interest, the governing board or committee then determines by a majority vote	e of the disi	nterested directors
whether the transaction or arrangement is in the organization's best interest, for its own	benefit, and	d whether it is fair
and reasonable.		••••••
Part VI Section C Line 19		
On its website, the organization makes available its Annual Report (archived) containing	a Statemen	t of Activities.
Governing documents and its conflict of interest policy are available upon request.		***************************************
AMENDMENT		
The amendment is due to a clerical error on form 990 Part III and the continuation of prog	gram expens	ses in Schedule O.
The program expenses reported included donated rent that should have been excluded.	The total pr	rogram expenses have
also been corrected.	*************	

	43.77/3.003/2	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions.

OMB No. 1545-0047

20**08**

Inspection Employer Identification number

Part II Name of the organization Southwest Action----Center for Biological Diversity, Inc. Identification of Disregarded Entities Identification of Related Tax-Exempt Organizations (A) Name, address, and EIN of related organization (A) Name, address, and EIN of disregarded entity Inactive Primary activity Primary activity 8 0 (C) Legal domicile (state or foreign country) (C) Legal domicile (state or foreign country) Z (D) Exempt Code section (D) Total income 501(c)(4) (E) Public charity status (if section 501(c)(3)) (E) End-of-year assets 85 Direct controlling Direct controlling 0420285 entity Î Î

9	of Bolistod Own						1			Page 2
Part III Identification	Identification of Related Organizations Taxable as a Partnership	anization	s Taxable as a	Partnership						
(A) Name, address, and EIN of related organization	(B) Primary activity	Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations?		Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?
							Yes 1	No.		Yes No
										H
								-		
								-		
								1		1

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp. S corp. or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

art V
Transactions W
ith Related
Organizations

(6)	(5)	(4)	(3)	(2)	3		N	20	0	0	3	3	_	× -		_	_	9	-	a	, (2 0		ם ז	-	Z
			· ·			(A) Name of other organization(s)	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	1000	Reimbursement paid by other organization for expenses		n Sharing of paid employees	m Sharing of facilities, equipment, mailing lists, or other assets	Performance of services or membership or fundraising solicitations by other organization(s)	Lease of facilities, equipment, or other assets from other organization(s) (Performance of services or membership or fundraising solicitations for other organization(s)		Lease of facilities, equipment, or other assets to other organization(s)	Exchange of assets		Sale of assets to other organization(s)	Loans or roan guarantees by other organization(s)					During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	Note. Complete line 1 if any entity is listed in Parts II. III. or IV
						(B) Transaction type (a-r)	relationships and transa								9							*******		****	in Parts II-IV?	
						Amount	action t	+ 4	10	10	1	1m		÷ =:			=	19	#	le			16	ia		
						(C) Amount involved	hresho										ij									Yes
							ds.	5	<	1	1	4		44		1	4	1	4	1	Y	1	1	1		No

Part VI Unrelated Organizations Taxable as a Partnership

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

(A) Name, address, and EIN of entity Primary activity									
(C) Legal domicile (state or foreign country)									
(D) Are all partners section 501(c)(3) organizations?	Yes No								
(E) Share of end-of-year assets									
(F) Disproportionate allocations?	Yes No								
(G) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									
(H) General or managing partner?	Yes No								