## Return of Organization Exempt from Income Tax

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements For the 2002 calendar year, or tax year beginning 2002, and ending D Employer Identification Number Check if applicable Please use JRS label The Species Survival Network Address change 52-2133713 or print or type See specific instruc 2100 L Street, NW E Telephone number Name change Washington, DC 20036-8414 301-258-3142 Initial return Accounting Final return X Cash Accrua1 Amended return Other (specify) Application pending • Section 501(c)(3) organizations and 4947(a)(1) nonexempt H and I are not applicable to section 527 organizations charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ) H (a) Is this a group return for affiliates? H (b) If Yes, enter number of affiliates • Web site ► N/A H (c) Are all affiliates included? Organization type (If No attach a list See instructions) ► X 501(c) 3 (insert no ) (check only one H (d) is this a separate return filed by an Check here ▶ If the organization's gross receipts are normally not more than organization covered by a group ruling? \$25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data Enter 4 digit GEN Some states require a complete return. Check ► If the organization is not required to attach Schedule B (Form 990, 990 EZ, or 990 PF) Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12. **►** 193, 190. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions) Contributions, gifts, grants, and similar amounts received a Direct public support 178,450 1 a b Indirect public support 1Ь Government contributions (grants) 1 c Total (add lines | \$ la through 1c) (cash | \$ 178,450 noncash \$ 1 **d** 178,450 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 14,740 Membership dues and assessments 3 4 Interest on savings and temporary-cash investments 5 Dividends and interest from securities 6a Gross rents **b** Less rental expenses c Net rental income or (loss) (subtrect 6 c 7 Other investment income (describe 7 ecurities (B) Other 8a Gross amount from sales of as 8a than inventory 8 b b Less cost or other basis and sales expenses c Gain or (loss) (attach schedule) 8c d Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d 9 Special events and activities (attach schedule) a Gross revenue (not including of contributions reported on line 1a) 9 a b Less direct expenses other than fundraising expenses 96 9 c c Net income or (loss) from special events (subtract line 9b from line 9a) 10a Gross sales of inventory, less returns and allowances 10 a b Less cost of goods sold 105 c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a). 10 c 11 Other revenue (from Part VII, line 103) 11 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 193,190 210,550 13 Program services (from line 44, column (B)) 13 10,977 Management and general (from line 44, column (C)) 14 2,768 15 Fundraising (from line 44, column (D)) 15 16 Payments to affiliates (attach schedule) 16 Total expenses (add lines 16 and 44 column (A)) 17 224,295 -31,105Excess or (deficit) for the year (subtract line 17 from line 12) 18 84,083 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 20 Other changes in net assets or fund balances (attach explanation) 20 52,978 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

To give amounts reported on line (C) Management (C) Management

L	o not include amounts reported on line 6b, 8b 9b, 10b or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch)					<del></del>
	(cash \$		İ			j
	non-cash \$	22				i
23	Specific assistance to individuals (att sch)	23				
24	Benefits paid to or for members (att sch)	24				
25	Compensation of officers, directors, etc	25	_			
26	Other salaries and wages	26	36,717	33,045	2,938	734.
27	Pension plan contributions	27				<del></del>
28	Other employee benefits	28				
29	Payroll taxes	29				
30	Professional fundraising fees	30				
31	Accounting fees	31	650		650	
32	Legal fees	32				
33	Supplies	33	2,325	2,093	186	46.
34	Telephone	34	77	69	6.	2.
35	Postage and shipping	35	2,267.	2,040	182	45.
36	Occupancy	36				
37	Equipment rental and maintenance	37	5,048.	4,543	404	101
38	Printing and publications	38	21,104	18,994	1,688.	422
39	Travel	39	15,933	14,340	1,274.	319
40	Conferences, conventions, and meetings	40	48,715	48,219.	397.	99
41	Interest	41				<del></del>
42	Depreciation, depletion, etc (attach schedule)	42				
43	· · · · · · · · · · · · · · · · · · ·					
	See Statement 1	43 a	91,459	87,207	3,252_	1,000
	)	43b				
		43c				
•	<sup> </sup> <b>-</b> - <b>-</b>	43d			·	
44	; 	43e		<del></del>		
44	Total functional expenses (add lines 22 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15		22. 22.		10 000	0.760
		44	224,295	210,550.	10,977	2,768.
	t Costs Check Lif you are following				3) 0	► Yes X No
	any joint costs from a combined education es,' enter (i) the aggregate amount of thes					
\$			t to management and go	eneral S	mount allocated to prog , and (iv) th	e amount allocated
_	ndraising \$	iocatet	to management and go		, and (14) an	c amount anocated
	t III Statement of Program Serv	ice A	ccomplishments			
	t is the organization's primary exempt pur			on of endangered	d species	Program Service Expenses
						(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
cher	rganizations must describe their exempt parts served, publications issued, etc. Discusons and 4947(a)(1) nonexempt charitable	is achi trusts	evements that are not m must also enter the amo	neasurable (Section 50 ount of grants & allocation	l(c)(3) & (4) organ	4947(a)(1) trusts but optional for others )
	Program services provi					
	conferences, conventions,				l commercial	
	trade involving endangere					
				allocations \$	)	210,550.
- 1	)		<del> </del>			
					<b></b>	
			(Grants and	allocations \$	)	
•	:					
			(Grants and	allocations \$	)	
(	1					
			(Grants and	allocations \$	)	
	Other program services		•	allocations \$	)	
1	Total of Program Service Expenses (she	ould ec	jual line 44, column (B).	program services)	<u> </u>	210,550

Part IV Balance Sheets (See Instructions)

Note	Wh	ere required, attached schedules and amounts within thumn should be for end-of year amounts only	ne description	(A) Beginning of year		(B) End of year
	45	Cash - non interest bearing		84,083	45	52,978
	46	Savings and temporary cash investments			46	
	47 a	Accounts receivable 4	7a			
	ь	Less allowance for doubtful accounts		47 c		
	48 a	Pledges receivable 4	8a			
	ь	Less allowance for doubtful accounts	86		48 c	
	49	Grants receivable	Į.		49	
A S S E T S	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
S	51 a	Other notes & loans receivable (attach sch) 5	i1 a			
T	6		i1 b		51 c	
	52	Inventories for sale or use	<u> </u>		52	
	53	Prepaid expenses and deferred charges	T T	,	53	<del></del>
	54	Investments – securities (attach schedule)	► Cost FMV	<del></del>	54	
		·	55a			
	Ь	Less accumulated depreciation (attach schedule) 5	55 b		55 c	
	56	Investments — other (attach schedule).			56	
	57 a	Land, buildings, and equipment basis	7a			** <b>=</b> •
	Ь	Less accumulated depreciation (attach schedule) 5	7b		57 c	
	58	Other assets (describe >	)		58	
	59	Total assets (add lines 45 through 58) (must equal line	e 74)	84,083	59	52,978
	60	Accounts payable and accrued expenses	<u> </u>		60	
뉘	61	Grants payable	1		61	
À	62	Deferred revenue	1		62	
Į.	63	Loans from officers, directors, trustees, and key employees (attach so	chedule)		63	
LIABILITIES		Tax-exempt bond liabilities (attach schedule)			64a	
Ė	ь	Mortgages and other notes payable (attach schedule)			64 Ь	
5	65	Other liabilities (describe	)		65	
		Total liabilities (add lines 60 through 65)		0	66	0
ŽĘ (	Ərgan	izations that follow SFAS 117, check here ► and through 69 and lines 73 and 74	complete lines 67			
₹	67					
ş	67 68	Unrestricted Temporarily restricted			67	
V—III/OW⊅	69	Permanently restricted	-		68	
		- · · · · · · · · · · · · · · · · · · ·	X and complete lines	<u></u>	69	· · · · · · · · · · · · · · · · · · ·
R		70 through 74	M und complete titles			
FUND	70	Capital stock, trust principal, or current funds	<u> </u>		70	<u> </u>
	71	Paid-in or capital surplus, or land, building, and equipr	<b>⊢</b>		71	<del></del>
<u>}</u>	72	Retained earnings, endowment, accumulated income,	F	84,083	72	52,978
BALAZOUS		Total net assets or fund balances (add lines 67 throug 72, column (A) must equal line 19, column (B) must e		84,083	73	52,978
	74	Total liabilities and net assets/fund balances (add line	es 66 and 73)	84,083	74	52,978

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

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Form 990 (2002) The Species Surv			52-21337	13 Page 4
Part IV-A Reconciliation of Revenu Financial Statements with	า Revenue	Part IV-B Reconciliate Financial S	itatements with Exp	er Audited enses
per Return (See instruction	ons )	per Return		
a Total revenue, gains, and other support per audited financial statements.	a 193,190	<ul> <li>Total expenses and lo financial statements</li> </ul>	osses per audited a	224,295.
b Amounts included on line a but not on line 12, Form 990		b Amounts included on on line 17, Form 990	line a but not	
(1) Net unrealized gains on investments \$		(1) Donated serv ices and use of facilities \$_		
(2) Donated serv ices and use of facilities \$		(2) Prior year adjust ments reported on line 20, Form 990 \$_		
(3) Recoveries of prior year grants \$		(3) Losses reported on line 20, Form 990 \$		
(4) Other (specify)		(4) Other (specify)		
Add amounts on lines (1) through (4)		\$	through (4) b	
Add aniquing on mics (1) billough (4)	t 193,190	Add amounts on lines (1) t	through (4)	224, 295
d Amounts included on line 12, Form 990 but not on line a*	153,130	d Amounts included on Form 990 but not on	line 17,	224,233
(1) Investment expenses not included on line 6b, Form 990. \$		(1) Investment expenses not included on line 6b, Form 990. \$		
(2) Other (specify)		(2) Other (specify)		
\$				
Add amounts on lines (1) and (2)	d	Add amounts on line	s (1) and (2) d	
	e 193,190	e Total expenses per li 990 (line c plus line	d)	224,295
Part V List of Officers, Directors,		_		
(A) Name and address	(B) Title and average ho per week devoted to position	urs (C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
William Travers	President	0	0.	0
	1 hour			
John Coords	Wasa Dagas daga			
John Grandy	Vice President 1 hour	0	0.	0
Adam Roberts	Treasurer 1 hour	0	0	0
Wm Carroll Muffett 1101 14th Street, N W	Secretary 1 hour	0	0	0
Washington, DC 20005				
75 Did any officer, director, trustee, or ke than \$100,000 from your organization \$10,000 was provided by the related o	and all related organizatii rganizations?	gate compensation of more ons, of which more than	<b>-</b>	Yes X No
BAA	HOLIS			Form <b>990</b> (2002)

_	990 (2002) The Species Survival Network	52-213371	3	ρ	age 5					
Par	t VI Other Information (See instructions )			Yes	No					
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		76		X					
77	Were any changes made in the organizing or governing documents but not reported to the IRS	7	77		$\frac{\hat{x}}{x}$					
• •	If 'Yes,' attach a conformed copy of the changes									
78 z	78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?									
	of Yes, has it filed a tax return on Form 990-T for this year?	covered by this retain.	78 a 78 b	N	X 'A					
	·		700		-					
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes, attach a statement		79		X					
80 a	Is the organization related (other than by association with a statewide or nationwide organization	on) through common	-							
	membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization	nization?	80 a		X					
t	If Yes,' enter the name of the organization $\sim N/A$	<del></del>								
		mpt ornonexempt								
		31 a 0								
ī	Did the organization file Form 1120-POL for this year?		81 Ь		Х					
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities a substantially less than fair rental value?	at no charge or at	82 a		X					
ı	olf 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	20 L								
		N/A			ļ <b></b> _J					
	Did the organization comply with the public inspection requirements for returns and exemption	• •	83a	X	<del></del>					
	Did the organization comply with the disclosure requirements relating to quid pro quo contribut	ions?	83Ь	Х	<del></del>					
	Did the organization solicit any contributions or gifts that were not tax deductible?		84 a		X					
ŀ	If 'Yes,' did the organization include with every solicitation an express statement that such con not tax deductible?	tributions or gifts were			J					
0E			84 b	N.						
	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		85a	N.						
	Did the organization make only in house lobbying expenditures of \$2,000 or less?		85 ь	N	A					
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the waiver for proxy tax owed for the prior year	e organization received a			1					
		N/A			! ]					
		B5d N/A								
		B5e N/A								
	_***	B5f N/A								
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 q	N	/A					
			039		<del>'`</del>					
	of section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonal dues allocable to nondeductible lobbying and political expenditures for the following tax year?	DIE ESTIMATE OF	85 h	N,	/A					
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on	1								
_	<del>-</del>	86a N/A	i							
	· · · · · · · · · · · · · · · · · · ·	86b N/A								
87	501(c)(12) organizations Enter a Gross income from members or shareholders	B7a N/A								
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A								
88	At any time during the year, did the organization own a 50% or greater interest in a taxable co or an entity disregarded as separate from the organization under Regulations sections 301 770	rporation or partnership, 11 2 and 301 7701 3?								
00	If Yes, complete Part IX		88		<u> </u>					
<b>6</b> 98	section 4911 ► 0 , section 4912 ► 0 , section 4912 ► 0 , section 4910									
ŀ	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yexplaining each transaction.	benefit transaction	89 Ь		x					
	•		220							
•	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.	·			0_					
	Enter Amount of tax on line 89c, above, reimbursed by the organization	<u> </u>			0					
	List the states with which a copy of this return is filed None									
	Number of employees employed in the pay period that includes March 12, 2002 (See instruction		90Ь		0					
91	The books are in care of Teresa Telecky Telephone num				. <b>_</b>					
	Located at - Gaithersburg, MD	ZIP + 4 - 20879		. <b>_</b>						
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check I	1 1	N/I	A.	▶ ∐					
	and enter the amount of tax exempt interest received or accrued during the tax year	▶ 92			N/A					
BAA			Form	990 (	(2002)					

52-2133713

Form 990 (2002) The Species Survival Network

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, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Unrelated	d business income	Excluded by se	ection 512, 513, or 514	(E)
note Ent	er gross amounts unless indicated	(A)	(B)	(C)	(D)	Related or exempt
		Business code	Amount	Exclusion code	Amount	function income
	ogram service revenue					
a						
ь_	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
c						
d						
e						
f Mo	edicare/Medicaid payments					
g Fe	es & contracts from government agencies			<del></del>		
_	embership dues and assessments			3		14,740
	erest on savings & temporary cash invmnts			<del></del>		21,710
	vidends & interest from securities	<del></del>		<del>-  </del>		
	t rental income or (loss) from real estate					
	bt-financed property		-			
	t debt financed property	· -		<del></del>		
					<del></del>	
	t rental income or (loss) from pers prop	-		<del>-    </del>		
	her investment income		<del></del>			
100 Ga	ain or (loss) from sales of assets ner than inventory					
	t income or (loss) from special events	-		<del>-  </del>	<del></del>	
	pss profit or (loss) from sales of inventory					
	her revenue a					
b		-	_			
	<del></del>		<del></del>		<del></del>	
с	<del></del>					
e	(D) (D) (D)					
	btotal (add columns (B), (D), and (E))	=				14,740
	tal (add line 104, columns (B), (D),				<u> </u>	14,740
	e 105 plus line 1d, Part I should equ					
Part VIII	Relationship of Activities to	o the Acco	mplishment of	Exempt Purpose	es (See instructions)	
Line No		h income is re	eported in column (	(E) of Part VII contri	buted importantly to the	e accomplishment
	of the organization's exempt purp	oses (other th	an by providing fur	nds for such purpose	s)	
N/A						
_						
-		-			<del></del>	
	1	<del></del>		<del></del>	·	
Part IX	Information Regarding Tax	able Subci	diarios and Dis	regarded Entitie	E (Coo inclusions )	
ult ix			diantes and Dis			(F)
	(A)	(B)		(C)	(D)	(E)
	, address, and EIN of corporation,	Percentage	of Nature	e of activities	Total	End-of year
	rtnership, or disregarded entity	ownership in	<del></del>		ıncome	assets
N/A		<u> </u>	8		·	
			8			
	<u> </u>		<u>8</u>			
	<del>-</del>	<u> </u>	<b>%</b>			
Part X	Information Regarding Tra	nsfers Ass	ociated with Pe	ersonal Benefit (	Contracts (See instri	uctions)
a Did t	ne organization, during the year, receive any fu	inds, directly or in	idirectly, to pay premiur	ns on a personal benefit o	ontract?	Yes X No
	the organization, during the year, pa					Yes X No
	If 'Yes' to (b), file Form 8870 and Fo		-	,, po. oonia. bon	ve-moot	
. 1010				nving schedules and states	nenis, and in the best of mulks	nowledge and helief it is
	Under penalty of person in becare that has true correct and property Deplarates of pro-	parer inthe	officer) is based on all in	to mation of which prepare	r has any knowledge	remedy and bellef it is
Pleace	WHO THE	1///			1 5-7-03	3
			_		Date	-
			Pres id	lent		
			7 [ 3 [ 6 ]	uy.		
				Date .	i p	rer's SSN or PTIN (see
				i∪atë. /	Chart / Prepar	161 € JOHN UIF (1114 (5 <b>00</b>

## SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions )

2002

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

Name of the organization  The Space of Survivial Network			Employer identification 52-2133713	number
The Species Survival Network  Part I Compensation of the Five Higher (See instructions List each one if there	est Paid Employees Other	er Than Officers,		Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000		0		···
Part II Compensation of the Five Higher (See instructions List each one (whether	est Paid Independent Co er individuals or firms) If there	ntractors for Pro are none enter 'Non	fessional Servi e ')	ces
(a) Name and address of each independent contra	actor paid more than \$50,000	<b>(b)</b> Type	of service	(c) Compensation
None				
		-		
Total number of others receiving over		0		<u> </u>

	· You may use the worksheet in t				•			nung
	ndar year (or fiscal year							(e)
begı	nning in)	(a) 2001	<b>(b)</b> 2000	199	9	( <b>d)</b> 1998		Total
15	Gifts, grants and contributions received (Do not include unusual grants See line 28)			131	.,366.			131, 366
	Membership fees received							
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose							
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975							
19	Net income from unrelated business activities not included in line 18.							
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					_		
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.							
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets							
23	Total of lines 15 through 22			131	,366			131,366
	Line 23 minus line 17			131	, 366			131,366
	Enter 1% of line 23	<u> </u>		] 3	.,314			
	Organizations described on line		ter 2% of amount in			•	26 a	2,627
t	Prepare a list for your records to show th supported organization) whose total gifts return. Enter the total of all these excess	for 1998 through 2001 exce	tributed by each person (o eded the amount shown in	ther than a govern line 26a Do not	nmental unit or p file this list wit	ublicly h your	26 b	85,633
c	: Total support for section 509(a)(	1) test Enter line 24,	column (e)			▶	26 c	131,366
C	Add Amounts from column (e) f	<del></del> -		19		_		
		22		26 b	85,633	_	26 d	85,633
	Public support (line 26c minus li						26e	45,733
-1	Public support percentage (line Organizations described on line	26e (numerator) divi	ded by line 26c (den	ominator))			26 f	34 81 %
2,	For amounts included in lines 15 name of, and total amounts received amounts for each year	5. 16. and 17 that were	e received from a 'di m, each 'disqualified	squalified per person ' <b>Do</b> i	son,' prepare not file this lis	a list for your	our reco r <b>retur</b> n	ords to show the Enter the sum of
	(2001)	(2000)	_ <b></b> (1999) _		(1	998)		
	For any amount included in line 17 show the name of, and amount i \$5,000 (Include in the list organ computing the difference betwee (the excess amounts) for each y	received for each year sizations described in en the amount receive ear	r, that was more than lines 5 through 11, and and the larger amo	n the larger of is well as indi- ount described	f (1) the amo viduals ) <b>Do</b> i I in (1) or (2)	unt on line not file this , enter the s	25 for t list wit sum of	the year or (2) th your return After these differences
	(2001)	, <b>(2000)</b>	(1999) _	. – – – – –	(1	998)		
•	Add Amounts from column (e) f	or lines 15 _		16		_ ,	1 1	
_	(2001) Add Amounts from column (e) f 17 Add Line 27a total	20 _		21		<b>–</b> :	27 c	<u> </u>
	Public support (line 27c total mir	and lone 27d total)	na iine 27b totat				270	
•	Total support for section 509(a)(	nus line 27d lotal)			7 f		2/e	
	Public support percentage (line	•	·		7 1		27.5	9
	Investment income percentage		•		nominator))	▶	27 h	
	Unusual Grants For an organiza	ation described in line	10. 11. or 12 that re	eceived any u	nusual orants	during 199	8 throu	oh 2001 prepare a
	list for your records to show, for nature of the grant Do not file to	each year, the name	of the contributor, th	e date and ar	nount of the r	grant, and a	brief o	description of the

<u>Par</u>	Private School Questionnaire (See instructions )			
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
	ſ		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30				
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
		-		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement)	<u> </u>		
22	Dog the everytake montes the following			
	Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially			
,	nondiscriminatory basis?	32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
				ļ
	a Students' rights or privileges?	33 a		
	b Admissions policies?	33 b		
	c Employment of faculty or administrative staff?	33 c		
	d Scholarships or other financial assistance?	33 d		
	e Educational policies?	33 e		
	f Use of facilities?	33 f		
	g Athletic programs?	33 g		
	h Other extracurricular activities?	33 h	_	
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement)			
				]
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34 a		
	b Has the organization's right to such aid ever been revoked or suspended?	34 b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No ' attach an explanation	—		<u> </u>
	nondiscrimination? If 'No ' attach an explanation	35		

Par	t VI-A Lobbying Ex	xpenditures by Ele ed ONLY by an eligible	cting Public Chari organization that filed	<b>ities</b> (See inst Form 5768)	ructions)				N/A
Chec	ck 🕨 a 🔝 if the organi	zation belongs to an aff	filiated group Check	k ► b lify	ou checke	ed 'a' and '	'limited	contr	ol' provisions apply
		Limits on Lobbying	•			Affiliate	a)		(b) To be completed for ALL electing
36	- <del></del>	<del> •</del>	<del></del>	<del></del>	1 20				organizations
37	Total lobbying expendit Total lobbying expendit	· ·	• •	- <del>-</del> /	36 37				<del></del>
38	Total lobbying expendit	-	• •	oying)	38				<del></del> -
39	Other exempt purpose	·	37)		39				<u>_</u>
40	Total exempt purpose e	•	38 and 39)		40				<del></del>
41	Lobbying nontaxable ar			ble –	1				
	If the amount on line 40		lobbying nontaxable						
	Not over \$500,000		of the amount on line						
	Over \$500,000 but not over \$1	,000,000 \$100,	000 plus 15% of the excess	over \$500,000	-				
	Over \$1,000,000 but not over \$	\$1,500,000 \$175,	000 plus 10% of the excess	over \$1,000,000	- 41				
	Over \$1,500,000 but not over \$	\$17,000,000 \$225,	000 plus 5% of the excess o	ver \$1,500,000					
	Over \$17,000,000	\$1,0	000,000						
42	Grassroots nontaxable				42				
43	Subtract line 42 from lin				43				
44	Subtract line 41 from lin				44				
	Caution If there is an a	amount on either line 4.	3 or line 44, you must	file Form 4720					
	(Some organ	izations that made a se	Averaging Period ection 501(h) election for lie the instructions for lie	io not have to d	omplete.	(h) all of the fi	ve colu	ımns l	below
			Lobbying Expen	ditures During	4 -Year A	Averaging	Period		
	Calendar year (or fiscal year beginning in) ►	(a) 2002	<b>(b)</b> 2001	(c) 2000			(d) 999		<b>(e)</b> Total
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))								<del>-</del>
47	Total lobbying expenditures		40.*			<b></b>			
48	Grassroots non taxable amount								
49	Grassroots ceiling amount (150% of line 48(e))								
	expenditures							_	
Par	t VI-B Lobbying A	ctivity by Nonelect only by organizations th	ing Public Charition at did not complete Pa	<b>es</b> art VLA) (See in	nstruction	s )			N1 / N
Durir atten	ng the year, did the orgainst to influence public or	nization attempt to influ	ence national state or	local legislatio	n includi		Yes	No	N/A Amount
	Volunteers						$\vdash \vdash$		
	Paid staff or manageme	ent (Include compensati	on in expenses reporte	ed on lines citi	rough h	١			
	: Media advertisements	(	or an experience report		g.,	,	<del>                                     </del>		<del></del>
	Mailings to members, le	egislators, or the public					<del>     </del>	$\overline{}$	
	Publications, or publish		ents						
	Grants to other organiza								
9	Direct contact with legis	lators, their staffs, gove	ernment officials, or a	legislative body	,				
	Rallies, demonstrations			or any other me	eans				
ı	Total lobbying expenditi	•	•				L		
<del></del>	If 'Yes to any of the abov	re, also attach a statemer	nt giving a detailed desc	ription of the lob	bying acti				
BAA						Sche	edule A	(Fori	m <b>990</b> or 990 EZ) 2002

	(Form 990 or 990 EZ) 2	002 The	Species Survival Netw	ork	52-2133713	P	age 6
Part VII	Information Regard Exempt Organization		sfers To and Transactions and structions)	nd Relationships With I	Noncharitable		
51 Did th	ie reporting organization Code (other than section	directly or in n 501(c)(3) d	ndirectly engage in any of the follow organizations) or in section 527, reli	ing with any other organization	on described in sections	on 501	(c)
			o a noncharitable exempt organiza			Yes	No
(ı)C	ash				51 a (ı)		X
(ii)O	ther assets				a (II)		X
<b>b</b> Other	transactions						
<b>(</b> ()S	ales or exchanges of ass	ets with a n	oncharitable exempt organization		b (ı)		Х
(u)P	urchases of assets from	a noncharita	ible exempt organization		b (iı)		Х
(ni)R	ental of facilities, equipm	ent, or othe	r assets		b (ni)		Х
(iv)R	eimbursement arrangemi	ents			b (IV)		Х
	oans or loan guarantees				b (v)		Х
			ip or fundraising solicitations		<u>b (vi)</u>		Х
c Sharii d If the the go any tr	ng of facilities, equipmen answer to any of the abo pods, other assets, or ser ansaction or sharing arra	it, mailing lis ove is 'Yes,' rvices given angement, s	sts, other assets, or paid employees complete the following schedule. C by the reporting organization. If the how in column (d) the value of the	; olumn (b) should always show organization received less th goods, other assets, or servic	v the fair market value nan fair market value ses received	ue of	Х
(a) Line no	(b) Amount involved		(c) noncharitable exempt organization	Description of transfers, tran	(d)		ts
N/A							
			·				
			·				
				-			
				-			
			······································				
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	<del></del>	<del> </del>	<del></del>				
descr	rorganization directly or bed in section 501(c) of s, complete the following	the Code (o	filiated with, or related to, one or method than section 501(c)(3)) or in se	ore tax exempt organizations ection 527?	► ☐ Ye	s X	No
	(a) Name of organization		(b) Type of organization	Description	(c) n of relationship		
N/A							
				-			
	<del></del>		<del></del> -		<u> </u>		
			<del></del>	<del> </del>			
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2002	Federal S	itateme	nts		Page 1
·	The Species S	urvıval Net	twork		52-2133713
Statement 1 Form 990, Part II, Line 43 Other Expenses					
		(A) Total	(B) Program Services	(C) Management & General	(D)
Bank fees Computer Fee Consulting Contribution Copying		1,129 359. 52,183 1,000 -18.	359 52,183 -18	1,129	1,000
Insurance Miscellaneous Payroll fees Translation		1,377 1,353 746 33,330	1,353 33,330	1,377 746	
Hansiacion	Total 🖺	91,459	\$ 87,207	\$ 3,252.	\$ 1,000