

**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.

**A For the 2008 calendar year, or tax year beginning JUN 1, 2008 and ending MAY 31, 2009**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C Name of organization</b> <b>BAT CONSERVATION INTERNATIONAL</b> Doing Business As _____ Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>PO BOX 162603</b> City or town, state or country, and ZIP + 4 <b>AUSTIN, TX 78716</b>		<b>D Employer identification number</b> <b>74-2553144</b>
		<b>F Name and address of principal officer: DAVE WALDIEN</b> <b>SAME AS C ABOVE</b>		<b>E Telephone number</b> <b>512-327-9721</b>
		<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( <b>3</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G Gross receipts \$</b> <b>3,065,865.</b>
		<b>J Website:</b> ▶ <b>WWW.BATCON.ORG</b>		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶ _____
<b>K Type of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> <b>1982</b>	
<b>M State of legal domicile:</b> <b>TX</b>				


**Part I Summary**

<b>1</b>		Briefly describe the organization's mission or most significant activities: <b>TO PROMOTE BAT CONSERVATION WORLDWIDE</b>	
<b>2</b>		Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b> <b>11</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b> <b>10</b>
	<b>5</b>	Total number of employees (Part V, line 2a)	<b>5</b> <b>50</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b> <b>45</b>
	<b>7a</b>	Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>7a</b> <b>0.</b>
	<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b> <b>0.</b>
	<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)
<b>9</b>		Program service revenue (Part VIII, line 2g)	<b>357,842.</b> <b>703,498.</b>
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>65,027.</b> <b>25,110.</b>
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>124,631.</b> <b>54,077.</b>
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>3,143,187.</b> <b>2,955,440.</b>
<b>Expenses</b>		<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>39,355.</b>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>1,807,300.</b> <b>1,969,161.</b>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>466,160.</b>	
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>1,465,346.</b> <b>1,281,611.</b>
<b>Net Assets or Fund Balances</b>	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>3,588,359.</b> <b>3,448,083.</b>
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>-445,172.</b> <b>-492,643.</b>
	<b>20</b>	Total assets (Part X, line 16)	Beginning of Year: <b>4,315,460.</b> End of Year: <b>3,790,961.</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<b>365,471.</b> <b>333,852.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>3,949,989.</b> <b>3,457,109.</b>	

**Part II Signature Block**

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

**Sign Here** ▶ **TAXPAYER'S COPY**  
 Signature of officer \_\_\_\_\_ Date \_\_\_\_\_  
 ▶ **DAVE WALDIEN, ACTING EXECUTIVE DIRECTOR**  
 Type or print name and title

**Paid Preparer's Use Only**  
 Preparer's signature:  Date: **4/5/09**  
 Check if self-employed  Preparer's identifying number (see instructions) \_\_\_\_\_  
 Firm's name (or yours if self-employed), address, and ZIP + 4: **PADGETT, STRATEMANN & CO., L.L.P.**  
**515 CONGRESS AVENUE, SUITE 1212**  
**AUSTIN, TX 78701**  
 EIN ▶ \_\_\_\_\_  
 Phone no. ▶ **(512) 476-0717**

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
PROMOTE BAT CONSERVATION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No [X]
If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No [X]
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 \$ 581,554. including grants of \$ 47,510. ) (Revenue \$ )
PUBLIC EDUCATION THROUGH PUBLIC LECTURES AND THE DEVELOPMENT AND DISTRIBUTION OF BOOKS, SLIDE SHOWS, VIDEOS AND EXHIBITS FOR THE PROTECTION OF BATS.

4b (Code: ) (Expenses \$ 2,127,713. including grants of \$ 149,801. ) (Revenue \$ )
CONSERVATION AND RESEARCH FOCUSING ON PROTECTION OF KEY BAT ROOSTS SUCH AS CAVES, MINES AND FORESTS.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses \$ 2,709,267. (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	X	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

**Part IV Checklist of Required Schedules** (continued)

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> .....	X	
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	X	
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X

Form 990 (2008)



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

**Section A. Governing Body and Management**

		Yes	No
<i>For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</i>			
<b>1a</b>	Enter the number of voting members of the governing body .....		11
<b>b</b>	Enter the number of voting members that are independent .....		10
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? .....	X	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .....		X
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? .....		X
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? .....		X
<b>6</b>	Does the organization have members or stockholders? .....		X
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? .....		X
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .....		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? .....	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body? .....	X	
<b>9a</b>	Does the organization have local chapters, branches, or affiliates? .....		X
<b>b</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? .....		
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 .....	X	
<b>11</b>	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O .....		X

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 .....	X	
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	X	
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done .....	X	
<b>13</b>	Does the organization have a written whistleblower policy? .....		X
<b>14</b>	Does the organization have a written document retention and destruction policy? .....		X
<b>15</b>	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:		
<b>a</b>	The organization's CEO, Executive Director, or top management official? .....	X	
<b>b</b>	Other officers or key employees of the organization? .....	X	
Describe the process in Schedule O. (see instructions)			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .....		X
<b>b</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? .....		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, CA, CT, FL, GA, IL, KS, KY, ME, MD**
- 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.  
 Own website     Another's website     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: **LINDA MOORE - 512-327-9721**  
**500 N CAPITAL OF TX HWY STE 200, AUSTIN, TX 78746**

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MERLIN D. TUTTLE PRESIDENT/EXECUTIVE DIRE	40.00	X		X			140,077.	0.	8,832.	
JONATHAN FRIEDMAN DIRECTOR OF DEVELOPMENT	40.00	X		X			83,049.	0.	5,508.	
LINDA MOORE DIRECTOR OF ADMIN/FINANC	40.00	X		X			76,677.	0.	5,215.	
EDWARD ARNETT CO-DIRECTOR OF PROGRAMS	40.00	X		X			69,828.	0.	6,725.	
ROBERT LOCKE DIRECTOR OF PUBLICATIONS	40.00	X		X			68,692.	0.	6,130.	
DAVID WALDIEN CO-DIRECTOR OF PROGRAMS	40.00	X		X			66,582.	0.	6,599.	
JEFF ACOPIAN TRUSTEE	1.00	X					0.	0.	0.	
ANNE-LOUISE BAND TRUSTEE	1.00	X					0.	0.	0.	
EUGENIO CLARIOND REYES TRUSTEE	1.00	X					0.	0.	0.	
BETTINA MATHIS TRUSTEE	1.00	X					0.	0.	0.	
THOMAS M READ TRUSTEE	1.00	X					0.	0.	0.	
WALTER SEDGWICK TRUSTEE	1.00	X					0.	0.	0.	
MARC WEINBERGER TRUSTEE	1.00	X					0.	0.	0.	
VERNE READ CHAIRMAN EMERITUS	1.00	X					0.	0.	0.	
JOHN D MITCHELL CHAIRMAN OF BD OF TRUSTE	1.00	X					0.	0.	0.	
BERT GRANTGES SECY OF BD OF TRUSTEES	1.00	X					0.	0.	0.	
MARSHALL T STEVES TREAS OF BD OF TRUSTEES	1.00	X					0.	0.	0.	



Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b	702,657.			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1470098.			
	g Noncash contributions included in lines 1a-1f: \$		52,000.			
	<b>h Total.</b> Add lines 1a-1f		<b>2,172,755.</b>			
Program Service Revenue	2 a <b>CONTRACT INCOME</b>	Business Code	582,277.	582,277.		
	b <b>EDUCATION AND WORKSHOP</b>		121,221.	121,221.		
	c					
	d					
	e					
	f All other program service revenue					
	<b>g Total.</b> Add lines 2a-2f		<b>703,498.</b>			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		25,110.		25,110.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		7,573.	7,573.		
	6 a Gross Rents	(i) Real	52,098.			
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)	52,098.			
	d Net rental income or (loss)		52,098.		52,098.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	104,831.				
b Less: cost of goods sold	b	110,425.				
c Net income or (loss) from sales of inventory		-5,594.	-5,594.			
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e <b>Total.</b> Add lines 11a-11d						
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		<b>2,955,440.</b>	<b>705,477.</b>	<b>0.</b>	<b>77,208.</b>	

**Part IX Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	124,161.	124,161.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	73,150.	73,150.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	543,913.	343,683.	96,782.	103,448.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,425,248.	1,190,805.	58,010.	176,433.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	306,326.	212,283.	54,170.	39,873.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	246,774.	169,447.	16,057.	61,270.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	109,291.	101,771.	3,342.	4,178.
23 Insurance				
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 <b>OTHER OPERATING EXPENSE</b>	336,436.	267,534.	39,598.	29,304.
b <b>PRINTING AND PUBLICATIO</b>	92,782.	61,252.	1,973.	29,557.
c <b>WORKSHOP</b>	61,331.	61,331.		
d <b>HABITAT PROJECTS</b>	53,802.	53,802.		
e <b>EDUCATIONAL MATERIALS</b>	44,631.	34,373.	485.	9,773.
f All other expenses	30,238.	15,675.	2,239.	12,324.
25 <b>Total functional expenses.</b> Add lines 1 through 24f	3,448,083.	2,709,267.	272,656.	466,160.
26 <b>Joint Costs.</b> Check here <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	488,301.	118,832.		369,469.

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	17,954.	1	40,150.
	2 Savings and temporary cash investments	1,033,441.	2	882,732.
	3 Pledges and grants receivable, net	734,718.	3	381,337.
	4 Accounts receivable, net	119,851.	4	192,048.
	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 Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	44,390.	8	28,227.
	9 Prepaid expenses and deferred charges	13,569.	9	54,469.
	10a Land, buildings, and equipment: cost basis	10a 2,971,262.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 844,864.		
		2,140,209.	10c	2,126,398.
	11 Investments - publicly traded securities	109,013.	11	
	12 Investments - other securities. See Part IV, line 11	102,315.	12	85,600.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	4,315,460.	16	3,790,961.	
Liabilities	17 Accounts payable and accrued expenses	101,692.	17	85,237.
	18 Grants payable	25,733.	18	33,709.
	19 Deferred revenue	65,699.	19	15,891.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	172,347.	25	199,015.
	26 <b>Total liabilities.</b> Add lines 17 through 25	365,471.	26	333,852.
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	2,455,126.	27	2,254,433.
	28 Temporarily restricted net assets	1,494,863.	28	1,202,676.
	29 Permanently restricted net assets		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	3,949,989.	33	3,457,109.	
34 Total liabilities and net assets/fund balances	4,315,460.	34	3,790,961.	

**Part XI Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?		X
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits?		



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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2095094.	2563338.	2650344.	2595687.	2246755.	12151218.
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 <b>Total.</b> Add lines 1 - 3	2095094.	2563338.	2650344.	2595687.	2246755.	12151218.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public Support.</b> Subtract line 5 from line 4.						12151218.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	2095094.	2563338.	2650344.	2595687.	2246755.	12151218.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	78,829.	91,314.	115,165.	110,853.	52,098.	448,259.
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.)		13,337.	14,348.	17,298.	7,573.	52,556.
11 <b>Total support.</b> Add lines 7 through 10						12652033.
12 Gross receipts from related activities, etc. (see instructions)					12	874,344.

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

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	96.04	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15		%

- 16a **33 1/3% support test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b **33 1/3% support test - 2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a **10% -facts-and-circumstances test - 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b **10% -facts-and-circumstances test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 - 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>	<input type="checkbox"/>					

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

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

**19a 33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

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

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ 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.

OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization

**BAT CONSERVATION INTERNATIONAL**

Employer identification number

**74-2553144**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure)       Preservation of an historically important land area

Protection of natural habitat       Preservation of certified historic structure

Preservation of open space

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

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? .....

Yes  No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ \_\_\_\_\_

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

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

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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

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

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

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

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

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

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

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

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

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

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

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

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		1,796,404.		1,796,404.
b Buildings		634,567.	340,728.	293,839.
c Leasehold improvements				
d Equipment		512,433.	476,278.	36,155.
e Other		27,858.	27,858.	0.
<b>Total.</b> Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				<b>2,126,398.</b>



<b>Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements</b>			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,955,440.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,448,083.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-492,643.
4	Net unrealized gains (losses) on investments	4	-237.
5	Donated services and use of facilities	5	
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	-237.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-492,880.

<b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>			
1	Total revenue, gains, and other support per audited financial statements	1	2,966,203.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-237.
b	Donated services and use of facilities	2b	11,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	10,763.
3	Subtract line 2e from line 1	3	2,955,440.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	2,955,440.

<b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>			
1	Total expenses and losses per audited financial statements	1	3,459,083.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	11,000.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	11,000.
3	Subtract line 2e from line 1	3	3,448,083.
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)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	3,448,083.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

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**Schedule F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization <b>BAT CONSERVATION INTERNATIONAL</b>	Employer identification number <b>74-2553144</b>
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**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

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

**2 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

**3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS	THE DEVELOPMENT OF ARTIFICIAL ROOSTS FOR TROPICAL FOREST RESTORATION; SPECIES ON	6,500.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS	THE EFFECT OF CLIMATE CHANGE ON THERMAL PHYSIOLOGY AND TORPOR IN LONG-EARED BATS	26,040.
EUROPE	0	0	GRANTS TO RECIPIENTS	HABITAT USE IN POND BAT MYOTIS DASYCNEME - POORLY STUDIED AND THREATENED EUROPEAN	9,460.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS	CONVERSION OF ABANDONED MILITARY BUNKERS ALONG THE JORDAN RIVER INTO BAT HOUSES; BATS OF THE	5,500.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS	THE EFFECT OF URBANIZATION ON PRAIRIE BATS; BAT MIGRATION AND THE CAUSES AND	14,250.
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS	BAT ROOSTING PATTERNS AND COMMUNITY STRUCTURE IN PRIMARY FOREST, SECONDARY FOREST,	1,000.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS	USE OF MEDIA IN COLLECTING AND SHARING INTO ABOUT BATS IN POKAHARA, NEPAL.	3,700.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS	CONTRIBUTION TO THE KNOWLEDGE OF FRUIT BATS OF SOUTHERN CAMEROON RAINFOREST: IMPLICATION	6,700.
<b>Totals</b> ▶					<b>73,150.</b>

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2008

SEE PART IV FOR COLUMN (E) DESCRIPTIONS



**Part III** Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CONSERVATION OF BARE-BACKED FRUIT BAT; RUBBER PLANTATION REVEALED BY ACOUSTIC TECHNIQUE; RADIO TRACKING OF DIVERSITY AND ECOLOGICAL FUNCTION OF BATS IN CHIAPAS; CONSERVATION AND HABITAT USE OF BANANA BAT; DIET OF SEASONAL AND SPATIAL VARIATION IN AMAZONIAN BAT ASSEMBLAGES: THE INFLUENCE OF CONTRASTING FLOODING	EAST ASIA AND THE PACIFIC	3	9,090.	WIRE TRANSFER	0.		CASH
	MEXICO	3	4,050.	WIRE TRANSFER	0.		CASH
	SOUTH AMERICA	1	500.	WIRE TRANSFER	0.		CASH
USE OF MEDIA IN COLLECTING AND SHARING INFO ABOUT BATS IN POKAHARA, NEPAL	SOUTH ASIA	1	3,700.	WIRE TRANSFER	0.		CASH
CONTRIBUTION TO THE KNOWLEDGE OF FRUIT BATS OF SOUTHERN CAMEROON RAINFOREST - IMPLICATION FOR SEED;	SUB-SAHARAN AFRICA	2	5,400.	WIRE TRANSFER	0.		CASH

**Part IV Supplemental Information**

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

SCHEDULE F, PART I, LINE 2: ALL BCI SCHOLARSHIPS WERE AWARDED TO STUDENTS VIA THEIR UNIVERSITIES. BCI REQUIRES THAT GLOBAL GRASSROOTS CONSERVATION FUND GRANT RECIPIENTS PROVIDE A FINAL REPORT DESCRIBING THE ACTIVITIES AND RESULTS OF THEIR PROJECT, PLUS 10 PHOTOS DOCUMENTING THE WORK.

PART I, LINE 3, COLUMN (E):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE DEVELOPMENT OF ARTIFICIAL ROOSTS FOR TROPICAL FOREST RESTORATION; SPECIES ON THE MENU: DIETARY RESOURCE PARTITIONING AMONG INSECTIVORES IN THE TROPICAL BAT COMMUNITY OF THE AREA DE CONSERVACION GUANACASTE (ACG) AND COMPARISONS TO ONTARIO INSECTIVOROUS BAT POPULATIONS; DETECTING ALTITUDINAL MIGRATION IN NEOTROPICAL BATS USING STABLE HYDROGEN ISOTOPES: IMPLICATIONS FOR RESERVE DESIGN.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE EFFECT OF CLIMATE CHANGE ON THERMAL PHYSIOLOGY AND TORPOR IN LONG-EARED BATS (NYCTOPHILUS); THE CONSERVATION CONSEQUENCES OF FOREST FRAGMENTATION ON BAT DISPERSAL BEHAVIOR: A COMPARISON OF CO-DISTRIBUTED TAXA IN PENINSULAR MALAYSIA; PHILIPPINE CAVE BATS; MEETING SPONSORSHIP; CONSERVATION OF BARE-BACKED FRUIT BAT; BAT DIVERSITY AND ACTIVITY LEVEL IN INTACT FOREST AND RUBBER PLANTATION REVEALED BY ACOUSTIC TECHNIQUE; RADIO TRACKING OF DAWN CAVE NECTAR BAT (EONYCTERIS SPELAEA, DOBSON 1871: PTEROPODIDAE) TO EXAMINE ITS EFFICIENCY AND EFFECTIVENESS IN POLLINATION OF DURIO ZIBETHINUS MURR AT SOUTHERN THAILAND.

REGION: EUROPE

**Part IV** Supplemental Information

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

(E) SPECIFIC TYPES OF SERVICES IN REGION: HABITAT USE IN POND BAT MYOTIS DASYCNEME - POORLY STUDIED AND THREATENED EUROPEAN TRAWLING SPECIES; THE INFLUENCE OF SIZE, ISOLATION AND STRUCTURE OF WOODLAND PATCHES ON BAT POPULATIONS WITHIN AGRICULTURAL LANDSCAPES; IMPACT OF ARTIFICIAL LIGHTING ON THE FORAGING AND COMMUTING BEHAVIOUR OF BATS IN THE UK, WITH A FOCUS ON LESSER HORSESHOE BATS (RHINOLOPHUS HIPPOSIDEROS) -IMPLICATIONS FOR CONSERVATION MANAGEMENT; IMPACT OF ARTIFICIAL LIGHTING ON THE FORAGING AND COMMUTING BEHAVIOUR OF BATS IN THE UK, WITH A FOCUS ON LESSER HORSESHOE BATS (RHINOLOPHUS HIPPOSIDEROS).

REGION: MIDDLE EAST AND NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CONVERSION OF ABANDONED MILITARY BUNKERS ALONG THE JORDAN RIVER INTO BAT HOUSES; BATS OF THE BOU HEDMA NATIONAL PARK: HABITAT USE AND CONSERVATION.

REGION: NORTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE EFFECT OF URBANIZATION ON PRAIRIE BATS; BAT MIGRATION AND THE CAUSES AND CONSEQUENCES OF MORTALITY AT WIND FARMS; HIBERNATION ENERGETICS OF LITTLE BROWN BATS(MYOTIS LUCIFUGIS); DIVERSITY AND ECOLOGICAL FUNCTION OF BATS IN THE COFFEE AGROECOSYSTEM OF CHIAPAS, MEXICO; FRUGIVORE BAT DIETS AND FOREST REGENERATION PROCEESS AT THE HUASTECA REGION OF SAN LUIS POTOS, MEXICO; CONSERVATION AND HABITAT USE OF THE BANANA BAT (MUSONYCTERIS HARRISONI) AND OTHER NECTAR-FEEDING BATS IN COLIMA, MEXICO; DIET OF TADARIDA BRASILIENSIS IN NORTHEAST AND SOUTHERN MEXICO WITH SPECIAL REFERENCE TO CORN INSECT PESTS; POLLINATION ECOLOGY OF IPOMOEA AMPULLACEA IN THE TROPICAL DRY FOREST OF CHAMELA-CUIXMALA; ECOMORPHOLOGICAL STRUCTURE AND PHENOLOGY IN THE USE OF FOOD RESOURCES OF A FRUGIVOROUS BATS ENSEMBLE IN

**Part IV** Supplemental Information

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

MIDDLE TROPICAL FOREST FRAGMENTS OF THE CENTER OF VERACRUZ; MEXICO; BAT SWARMING AND HIBERNATION IN ONTARIO.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: BAT ROOSTING PATTERNS AND COMMUNITY STRUCTURE IN PRIMARY FOREST, SECONDARY FOREST, EUCALYPTUS PLANTATIONS, AND LINEAR FOREST CORRIDORS IN NORTHEASTERN AMAZONIA, BRAZIL; SEASONAL AND SPATIAL VARIATION IN AMAZONIAN BAT ASSEMBLAGES: THE INFLUENCE OF CONTRASTING FLOODING REGIMES AND FOOD AVAILABILITY.

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CONTRIBUTION TO THE KNOWLEDGE OF FRUIT BATS OF SOUTHERN CAMEROON RAINFOREST: IMPLICATION FOR SEED DISPERSAL AND FOREST CONSERVATION; CONTRIBUTION TO THE KNOWLEDGE OF FRUIT BAT OF SOUTHERN CAMEROON RAINFOREST: IMPLICATION FOR SEED DISPERSAL AND FOREST CONSERVATION; PROTECTION OF BAT CAVE ROOSTS AND PEOPLE IN KENYA; DO MALAGASY FRUIT BATS CAUSE SIGNIFICANT DAMAGE TO LITCHI CROPS?; DIET, HABITAT USE AND ROOSTING ECOLOGY OF MYZOPODA NOV SP. IN WESTERN MADAGASCAR: CONSERVATION IMPLICATIONS.

PART III, COLUMN (A):

REGION: EAST ASIA AND THE PACIFIC

(A) TYPE OF GRANT OR ASSISTANCE: CONSERVATION OF BARE-BACKED FRUIT BAT; RUBBER PLANTATION REVEALED BY ACOUSTIC TECHNIQUE; RADIO TRACKING OF DAWN CAVE NECTAR BAT

REGION: MEXICO

(A) TYPE OF GRANT OR ASSISTANCE: DIVERSITY AND ECOLOGICAL FUNCTION OF

**Part IV** Supplemental Information

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

BATS IN CHIAPAS; CONSERVATION AND HABITAT USE OF BANANA BAT; DIET OF  
TADARIDA BRASILIENSIS; POLLINATION ECOLOGY OF OPOMOEA AMPULLACEA

REGION: SOUTH AMERICA

(A) TYPE OF GRANT OR ASSISTANCE: SEASONAL AND SPATIAL VARIATION IN  
AMAZONIAN BAT ASSEMBLAGES: THE INFLUENCE OF CONTRASTING FLOODING REGIMES  
AND FOOD AVAILABILITY

REGION: SUB-SAHARAN AFRICA

(A) TYPE OF GRANT OR ASSISTANCE: CONTRIBUTION TO THE KNOWLEDGE OF FRUIT  
BATS OF SOUTHERN CAMEROON RAINFOREST - IMPLICATION FOR SEED; PROTECTION  
OF BAT CAVE ROOSTS AND PEOPLE IN KENYA

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-0047

2008

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

**Open to Public  
Inspection**

Name of the organization

**BAT CONSERVATION INTERNATIONAL**

Employer identification number  
**74-2553144**

**Yes**  **No**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

**Part II** **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on 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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ▶

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
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION - 301 PETERSON SERVICE BLDG - LEXINGTON, KY 40506	61-6033693	501(C)(3)	20,462.	0.	CASH		NW BAT CO-OP: ROOST-SITE SELECTION AND ROOST MICROCLIMATES OF TREE ROOSTING BATS IN THE STUDYING IMMUNE COMPETENCE IN HEALTHY BATS AND BATS AFFECTED BY WHITE-NOSE SYNDROME.
BUCKNELL UNIVERSITY MARTS HALL LEWISBURG, PA 17837	24-0772407	501(C)(3)	5,883.	0.	CASH		
BOSTON UNIVERSITY 25 BUICK ST BOSTON, MA 02215	04-2103547		28,800.	0.	CASH		WHITE-NOSE SYNDROME IN BATS: DEATH BY STARVATION
MISSOURI STATE UNIVERSITY 901 S NATIONAL AVE SPRINGFIELD, MO 65897	44-6000308		6,600.	0.	CASH		WINTER ENERGETICS OF LITTLE BROWN BATS WITH WHITE-NOSE SYNDROME
BOSTON UNIVERSITY 25 BUICK ST BOSTON, MA 02215	04-2103547		6,404.	0.	CASH		ARE HIBERNATING BATS AFFECTED WITH WNS IMMUNOCOMPROMISED?
US FOREST SERVICE C/O CITIBANK, PO BOX 894183 LOS ANGELES, CA 90189			8,770.	0.	CASH		WIND - AUTOMATED ECHOLOCATION DETECTORS

**2** Enter total number of section 501(c)(3) and government organizations

**3** Enter total number of other organizations

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  
**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

**BAT CONSERVATION INTERNATIONAL**

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. 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

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

**SCHEDULE I, PART I, LINE 2: BCI SCHOLARSHIP RECIPIENTS WITHIN THE UNITED STATES RECEIVE 80 PERCENT OF THE AWARDED FUNDS UPON RECEIPT OF THE SIGNED CONTRACT AND THE REMAINING 20 PERCENT ONLY UPON RECEIPT OF A FINAL REPORT AND PHOTOS; TWO PROGRESS REPORTS ARE REQUIRED DURING THE ACADEMIC YEAR.**

**PART II, LINE 1, COLUMN (H):**

**NAME OF ORGANIZATION OR GOVERNMENT:**

**UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION**

**(H) PURPOSE OF GRANT OR ASSISTANCE: NW BAT CO-OP: ROOST-SITE SELECTION**

Name of the organization

**BAT CONSERVATION INTERNATIONAL**

Employer identification number  
**74-2553144**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
RENSELAER POLYTECHNIC INSTITUTE 110 EIGHTH STREET TROY, NY 12180	14-1340095		5,000.	0. CASH			A PROPOSAL TO DESIGN AN AUTOMATED BAT COUNTER
BOSTON UNIVERSITY 25 BUICK ST BOSTON, MA 02215	04-2103547		5,000.	0. CASH			A NOVEL BATCAM FOR CENSUSING MATERNITY COLONIES OF BATS IN REGIONS AFFECTED BY

**2** Enter total number of Section 501(c)(3) and government organizations

**3** Enter total number of other organizations

**Part IV** Supplemental Information

AND ROOST MICROCLIMATES OF TREE ROOSTING BATS IN THE CONIFEROUS FORESTS  
OF THE PACIFIC NORTHWEST

NAME OF ORGANIZATION OR GOVERNMENT: BOSTON UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: A NOVEL BATCAM FOR CENSUSING

MATERNITY COLONIES OF BATS IN REGIONS AFFECTED BY WHITE-NOSE SYNDROME



**SCHEDULE M  
(Form 990)**

**NonCash Contributions**

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

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

**2008**

Open to Public  
Inspection

▶ Attach to Form 990.

Name of the organization **BAT CONSERVATION INTERNATIONAL** Employer identification number **74-2553144**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art .....				
2	Art - Historical treasures .....				
3	Art - Fractional interests .....				
4	Books and publications .....				
5	Clothing and household goods .....				
6	Cars and other vehicles .....				
7	Boats and planes .....				
8	Intellectual property .....				
9	Securities - Publicly traded .....				
10	Securities - Closely held stock .....				
11	Securities - Partnership, LLC, or trust interests .....				
12	Securities - Miscellaneous .....				
13	Qualified conservation contribution (historic structures) .....				
14	Qualified conservation contribution (other) .....				
15	Real estate - Residential .....				
16	Real estate - Commercial .....				
17	Real estate - Other .....				
18	Collectibles .....				
19	Food inventory .....				
20	Drugs and medical supplies .....				
21	Taxidermy .....				
22	Historical artifacts .....				
23	Scientific specimens .....				
24	Archeological artifacts .....				
25	Other ▶ ( GIS SOFTWARE )	X	1	36,000	RETAIL VALUE OF IN-KIN
26	Other ▶ ( PHOTO EQUIPME )	X	1	16,000	ESTIMATED VALUE AT DAT
27	Other ▶ ( )				
28	Other ▶ ( )				

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

	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 used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? .....		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ 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.

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

BAT CONSERVATION INTERNATIONAL

Employer identification number

74-2553144

FORM 990, PART VI, SECTION A, LINE 2: VERNE READ, CHAIRMAN EMERITUS, IS FATHER TO THOMAS READ, TRUSTEE.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WAS REVIEWED BY THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD IMPLEMENTED A CONFLICT OF INTEREST POLICY WHICH IT MONITORS, ENFORCES AND REVIEWS.

FORM 990, PART VI, SECTION B, LINE 15: THE CEO/EXECUTIVE DIRECTOR'S COMPENSATION IS ESTABLISHED BY COMPENSATION SURVEY OR STUDY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AK, AZ, CA, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NM, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC ON WEBSITE AND AVAILABLE UPON REQUEST.

THE FINANCIAL STATEMENTS OF BAT CONSERVATION INTERNATIONAL AND BAT CONSERVATION INTERNATIONAL FOUNDATION WERE AUDITED AND WERE ON CONSOLIDATED BASIS ONLY.

THE OVERSIGHT PROCESS HAS NOT CHANGED.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ 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.

OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization

BAT CONSERVATION INTERNATIONAL

Employer identification number

74-2553144

**SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:**

**(A) NAME OF PERSON: MERLIN TUTTLE**

**(D) DESCRIPTION OF TRANSACTION: MERLIN TUTTLE PERMITS BAT CONSERVATION INC TO USE HIS PHOTOGRAPHIC IMAGES OF BATS TO PROMOTE BAT CONSERVATION AND RESEARCH. BAT CONSERVATION INC ALSO LEASES THE USE OF THESE IMAGES TO 3RD PARTIES FOR A FEE. BAT CONSERVATION INC PAYS MERLIN TUTTLE 75% OF THE FEES IT COLLECTS AND KEEPS 25% TO PAY FOR THE COST OF MAINTIANING THE COLLECTION AND TO PROMOTE BAT CONSERVATION AND RESEARCH. IN 2008 BAT CONSERVATION, INC. PAID MERLIN TUTTLE \$17,398.77 FOR THE USE OF HIS COLLECTION OF BAT PHOTOS. THIS PAYMENT WAS REPORTED SEPARATELY ON A 1099.**





**Part V** Transactions With Related Organizations

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

**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?

	Yes	No
<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to other organization(s)		X
<b>c</b> Gift, grant, or capital contribution from other organization(s)	X	
<b>d</b> Loans or loan guarantees to or for other organization(s)		X
<b>e</b> Loans or loan guarantees by other organization(s)		X
<b>f</b> Sale of assets to other organization(s)		X
<b>g</b> Purchase of assets from other organization(s)		X
<b>h</b> Exchange of assets		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		X
<b>n</b> Sharing of paid employees		X
<b>o</b> Reimbursement paid to other organization for expenses		X
<b>p</b> Reimbursement paid by other organization for expenses		X
<b>q</b> Other transfer of cash or property to other organization(s)		X
<b>r</b> Other transfer of cash or property from other organization(s)		X

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

	(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)	BAT CONSERVATION INTERNATIONAL FOUNDATION	C	47,566.
(2)			
(3)			
(4)			
(5)			
(6)			



**Depreciation and Amortization** 990  
 (Including Information on Listed Property)

**2008**  
 Attachment  
 Sequence No. 67

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return <b>BAT CONSERVATION INTERNATIONAL</b>	Business or activity to which this form relates <b>FORM 990 PAGE 10</b>	Identifying number <b>74-2553144</b>
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**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses .....	<b>1</b>	<b>250,000.</b>
2 Total cost of section 179 property placed in service (see instructions) .....	<b>2</b>	
3 Threshold cost of section 179 property before reduction in limitation .....	<b>3</b>	<b>800,000.</b>
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- .....	<b>4</b>	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions .....	<b>5</b>	
<b>6</b>		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29 .....	<b>7</b>	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 .....	<b>8</b>	
9 Tentative deduction. Enter the smaller of line 5 or line 8 .....	<b>9</b>	
10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 .....	<b>10</b>	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 .....	<b>11</b>	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 .....	<b>12</b>	
13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 .....	<b>13</b>	

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

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

14 Special depreciation for qualified property (other than listed property) placed in service during the tax year .....	<b>14</b>	
15 Property subject to section 168(f)(1) election .....	<b>15</b>	
16 Other depreciation (including ACRS) .....	<b>16</b>	<b>109,291.</b>

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

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2008 .....	<b>17</b>	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here .....	<input type="checkbox"/>	

**Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

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

**Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary** (See instructions.)

21 Listed property. Enter amount from line 28 .....	<b>21</b>	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. ....	<b>22</b>	<b>109,291.</b>
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs .....	<b>23</b>	



# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

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

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

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

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

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

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

<b>Type or print</b>	Name of Exempt Organization <b>BAT CONSERVATION INTERNATIONAL</b>	Employer identification number <b>74-2553144</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>PO BOX 162603</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>AUSTIN, TX 78716</b>	

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

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

**LINDA MOORE**

- The books are in the care of ▶ **500 N CAPITAL OF TX HWY STE 200 - AUSTIN, TX 78746**  
Telephone No. ▶ **512-327-9721** FAX No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **JANUARY 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year \_\_\_\_\_ or  
▶  tax year beginning **JUN 1, 2008**, and ending **MAY 31, 2009**.

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

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

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

LHA **For Privacy Act and Paperwork Reduction Act Notice, see Instructions.**

Form **8868** (Rev. 4-2009)

Form **8879-EO**

**IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2008, or fiscal year beginning JUN 1, 2008, and ending MAY 31, 2009

**2008**

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **See instructions.**

Name of exempt organization

Employer identification number

**BAT CONSERVATION INTERNATIONAL**

**74-2553144**

Name and title of officer

**DAVE WALDIEN  
ACTING EXECUTIVE DIRECTOR**

**Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, line 12)	1b	<b>2955440</b>
2a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

**Part II Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2008 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize PADGETT, STRATEMANN & CO., L.L.P. to enter my PIN 78716  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2008 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2008 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ TAXPAYER'S COPY Date ▶ \_\_\_\_\_

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 74622878701  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2008 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**ERO Must Retain This Form - See Instructions  
Do Not Submit This Form To the IRS Unless Requested To Do So**