# Form 990

Part I

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2021

Open to Public Inspection

 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Internal Revenue Service 20 2022 , 2021, and ending 9/30 For the 2021 calendar year, or tax year beginning 10/01 Check if applicable: GREATER YELLOWSTONE COALITION Address change E Telephone number 215 SOUTH WALLACE AVE Name change BOZEMAN, MT 59715 Initial return

D Employer identification number 81-0414042 406-586-1593

Final return/terminated 7,136,045. G Gross receipts \$ Amended return X No H(a) Is this a group return for subordinates? Yes F Name and address of principal officer: SCOTT CHRISTENSEN Application pending **H(b)** Are all subordinates included? If "No," attach a list. See instructions No Yes SAME AS C ABOVE 527 501(c) ( ) (insert no.) 4947(a)(1) or X 501(c)(3) Tax-exempt status: H(c) Group exemption number Website: ► GREATERYELLOWSTONE.ORG L Year of formation: 1983 M State of legal domicile: MT Other -Form of organization: X Corporation Trust Summary

Governance		SOLUTIONS TO PROTECT THE LANDS, WATERS, AND WILDLIFE OF ECOSYSTEM, NOW AND FOR FUTURE GENERATIONS.  Check this box F if the organization discontinued its operations or disposed of more			
١٥	2	Number of voting members of the governing body (Part VI, line 1a)		3	20
ا ا	3	Number of voting members of the governing body (Part VI, line 1b)		4	20
	4 5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)		5	30
ĚΙ	6	Total number of volunteers (estimate if necessary)		6	20
ACTIVITIES	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
⋖	/a	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
-		14ct difficiated business taxable meetic from the second from	Prior Year		Current Year
Revellue	8	Contributions and grants (Part VIII, line 1h)	4,209,9	38.	6,596,282.
	9	Program service revenue (Part VIII, line 2g)			
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	159,8	19.	274,211.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	39,4		36,918.
	12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,409,2	204.	6,907,411.
-	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3).	603,6	29.	108,716.
		Benefits paid to or for members (Part IX, column (A), line 4)			
	14	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,043,4	17.	2,479,435.
တ္က	15		270107		
Se.		Professional fundraising fees (Part IX, column (A), line 11e)		-11-2011-20	
Expenses	Ь	Total fundraising expenses (Part IX, column (D), line 25)  311,311.			
Ω	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	650,1	100.	1,242,988.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,297,1	46.	3,831,139.
	19	Revenue less expenses. Subtract line 18 from line 12	1,112,0	)58.	3,076,272.
- 2	13	Trotalida toda angantasa.	Beginning of Currer	nt Year	End of Year
ince	20	Total assets (Part X, line 16)	16,269,6		17,103,607.
Balan	21	Total liabilities (Part X, line 26)	1,290,4		1,273,888.
Ğ	1	Net assets or fund halances. Subtract line 21 from line 20.	14,979,2		15,829,719.

Briefly describe the organization's mission or most significant activities: GREATER YELLOWSTONE COALITION WORKS WITH ALL PEOPLE, BRINGING TOGETHER DIVERSE INTERESTS, TO DEVELOP INNOVATIVE

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.

complete. Declar	ation of preparer (other than officer) is c	ased on an intermediate of miles property.	2 Water Water		
	Signature of officer			3/21/24 Date	23
Sign Here	SCOTT CHRISTENSE  Type or print name and title	EN		EXECUTIVE DIR	•
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN POLECOSO 4
Paid	JUSTIN GERBER	JUSTIN GERBER		self-employed	P01522824
Preparer	Firm's name AMATICS		8 (8976		
Use Only	Firm's address > 45 DISCO		Firm's EIN ► 46-3057681		
	BOZEMAN,	Phone no. 40	Phone no. 406-404-1925		
May the IRS		reparer shown above? See instruction	ns		X Yes No

Form 990 (2021) GREATER YELLOWSTONE COALITION	81-0414042	Page <b>2</b>
Part III Statement of Program Service Accomplishments	01 0111012	
Check if Schedule O contains a response or note to any line in this Part III		
1 Briefly describe the organization's mission:		
GREATER YELLOWSTONE COALITION WORKS WITH ALL PEOPLE, BRINGING T	OGETHER DIVERSE	
INTERESTS, TO DEVELOP INNOVATIVE SOLUTIONS TO PROTECT THE LANDS	S, WATERS, AND W	ILDLIFE
OF THE GREATER YELLOWSTONE ECOSYSTEM, NOW AND FOR FUTURE GENERA	ATIONS.	
O Diddle and in Equation of the control of the cont		
2 Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?		V No
Form 990 or 990-EZ?	Yes	X No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Yes	X No
If "Yes," describe these changes on Schedule O.	scivices L	V NO
4 Describe the organization's program service accomplishments for each of its three largest program service.	ervices, as measured by	expenses.
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocat and revenue, if any, for each program service reported.	ions to others, the total e	expenses,
<b>4a</b> (Code: ) (Expenses \$ 2,114,402. including grants of \$ 97,216.)	(Revenue \$	```
LAND & WILDLIFE CONSERVATION - GREATER YELLOWSTONE'S PUBLIC AND		/ CTTTCU
TOGETHER A STUNNING TAPESTRY OF HABITAT FOR THE REGION'S CELEBRATER TOGETHER ASSESSMENT TO THE REGION OF TAPESTRY OF TABLET TAPESTRY.		
CONSERVES THE MOST CRITICAL PARTS OF THIS LANDSCAPE THROUGH ON-		
AND BUILDING PUBLIC SUPPORT FOR POLICIES THAT PROTECT KEY LANDS		
INCLUDE PROTECTING LANDS FROM PROPOSED GOLD MINES, SECURING NEW		
WILDLIFE MIGRATION CORRIDORS, AND SAFEGUARDING CORE GRIZZLY BEA		
PLAYS A LEAD ROLE IN CONSERVING THE REGION'S ICONIC WILDLIFE, W		
BEARS, BISON, AND MIGRATING UNGULATES LIKE ELK, MULE, DEER, AND		
SECURES FUNDING FOR NEW WILDLIFE HIGHWAY CROSSINGS, REDUCES CON	FLICTS BETWEEN	PEOPLE
AND CARNIVORES, ADVOCATES FOR SCIENCE-BASED WILDLIFE MANAGEMENT	, AND RESTORES	BISON
TO THEIR ANCESTRAL HOMELANDS ON TRIBAL AND SELECT PUBLIC LANDS.	<u>.</u>	
	<del></del>	
	(Revenue \$	)
CONSERVATION MOVEMENT HAS HISTORICALLY EXCLUDED AND IGNORED DIV		
	TO CHANGE THIS	
PARADIGM BY ACTIVELY PARTNERING WITH AND SUPPORTING TRIBES TO A PRIORITIES. TODAY, THOSE INCLUDE REVITALIZING THE BIG WIND RIVE		
WITHIN TRIBAL COMMUNITIES BY INVESTING IN INDIGENOUS LEADERSHIP		
CULTURAL AND ECOLOGICAL RESTORATION OF BUFFALO. GYC'S INDIGENOU		
THIS WORK FROM THE ORGANIZATION'S OFFICE ON THE WIND RIVER RESE	RVATION IN WEST	ERN
WYOMING.		
<u> </u>		
4c (Code: ) (Expenses \$ 317,009. including grants of \$	(Revenue \$	)
CLIMATE CHANGE & WATER PROTECTION - GREATER YELLOWSTONE'S STREA	AMS AND RIVERS A	RE THE
FOUNTAINHEAD OF THE WEST. GYC PROTECTS THE REGION'S WILD, FREE		
DAMS, DIVERSIONS, AND INDUSTRIAL POLLUTION. SINCE 2009, GYC HAS		
PROTECTIONS FOR NEARLY 500 MILES OF WILD RIVERS IN GREATER YELI		
GYC IS WORKING WITH A COALITION OF BUSINESSES, THOUSANDS OF CIT		
PARTNERS TO PROTECT OVER 350 MILES OF RIVERS IN MONTANA THROUGH		
GYC ALSO PARTNERS WITH SCIENTISTS, AGENCIES, TRIBES, AND LANDOW		
TO DEVELOP CUTTING EDGE CLIMATE SCIENCE AND INNOVATIVE PROJECTS		
BUILD GREATER RESILIENCY TO CLIMAGE CHANGE IMPACTS, WITH A FOCU		
AND SENSITIVE WILDLIFE HABITATS.		
4 d Other program services (Describe on Schedule O.)		
(Expenses \$ including grants of \$ ) (Revenue	\$	)
<b>4e</b> Total program service expenses ► 3,036,917.		

# Form 990 (2021) GREATER YELLOWSTONE COALITION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Χ	
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 l</i>	3		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		Х
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>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
k	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
C	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
C	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Χ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Χ	
Ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
k	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes.' complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
20a	Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	Х	_

# Form 990 (2021) GREATER YELLOWSTONE COALITION Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	X	
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	<b>d</b> Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i> .	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
	<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
	<b>b</b> A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<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>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1	<b>a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	· · · · · · · · · · · · · · · · · · ·			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
BAA	TEEA0104L 09/22/21	Form	1 <b>990</b> (	(2021

Form 990 (2021) GREATER YELLOWSTONE COALITION

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			res	NO
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b	olf 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
h	of If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d	I If 'Yes,' indicate the number of Forms 8282 filed during the year	7.0		
	2 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7 h		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14-		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.	.5		21
17	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If 'Yes,' complete Form 6069.			

Part VI Governance, Management, and Disclosure. For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 20 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 20 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? X a The organization's CEO, Executive Director, or top management official. SEE . SCHEDULE. . O. . . . . . 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a X **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

JEANA HENLEY 215 SOUTH WALLACE AVE BOZEMAN MT 59715 406-586-1593

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

Check if Schedule O contains a response or note to any line in this Part VII.....

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

		(C)								
(A) Name and title	(B) Average hours per	thar	one l both dire	box, an o ector/	unles fficer truste	,	on	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
	week (list any hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) SCOTT CHRISTENSEN	40									
EXECUTIVE DIR.	0			Χ				137,497.	0.	29,077.
(2) JANET OFFENSEND BOARD CHAIR	5	Х		Χ				0.	0.	0.
(3) MEI RATZ	2									
DIRECTOR	0	Χ						0.	0.	0.
(4) NANCY WATTERS	3									
VICE CHAIR	0	Х		Χ				0.	0.	0.
(5) ANDREW MOORE	3									
TREASURER	0	Χ		Χ				0.	0.	0.
(6) TOM WINSTON	3									
SECRETARY	0	Χ		Χ				0.	0.	0.
(7) PETE COPPOLILLO	2									
DIRECTOR	0	Х						0.	0.	0.
_(8)_ABI_DEVAN	2									
DIRECTOR	0	Х						0.	0.	0.
(9) MICHAEL GADSDEN	_ 2							_		_
DIRECTOR	0	X						0.	0.	0.
(10) BEA GORDON	2	.,						•		•
DIRECTOR	0	Χ						0.	0.	0.
(11) KITTY GRISWOLD	2	3.7						0	0	0
DIRECTOR	0	Χ						0.	0.	0.
<u>(12)</u> <u>THOMAS JALKUT</u> <u>DIRECTOR</u>	2	Х						0.	0.	0.
(13) CHRIS JOHNS	2									
DIRECTOR	0	Х						0.	0.	0.
(14) RICK JOHNSON	2									
DIRECTOR	0	Χ						0.	0.	0.

Part VII   Section	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
		(B)			((	•							
(A) Name and title		Average hours per	urs box, unless person is both er officer and a director/trust					h an	(D)  Reportable compensation from	(E)  Reportable compensation from	Estim	(F) lated am	ount
		week (list any hours for related organiza - tions	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compe the o ar	ensation organiza nd relate anizatio	tion d
		below dotted line)	rustee	trustee		ree	npensated						
(15) XAVIER R DIRECTOR		2	Х						0.	0.			0.
(16) DIANA SI DIRECTOR	MMONS	2	Х						0.	0.			0.
(17) JANE SPE	NCER	2 0	X										
(18) GEORGIE	STANLEY	2							0.	0.			0.
DIRECTOR (19) DAN VERM	ILLION	0 2	X						0.	0.			0.
DIRECTOR (20) DAN WENK		2	X						0.	0.			0.
DIRECTOR (21) JENNIFER		0 2	Х						0.	0.			0.
DIRECTOR (22)		0	Х						0.	0.			0.
(23)													
(24)													
(25)													
								<b>•</b>	137,497.	0.		29,	077.
d Total (add lin	ntinuation sheets to Part VII, Secti es 1b and 1c).							<b>&gt;</b>	0. 137,497.	0.			0. 077.
2 Total number of from the organ	of individuals (including but not limited nization • 1	I to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
3 Did Haraman					1			1-1				Yes	No
on line 1a? <i>If</i>	ization list any <b>former</b> officer, direct 'Yes,' complete Schedule J for suc	h individu	ıaİ		• • • •	· · · ·					. 3		Х
the organizati	dual listed on line 1a, is the sum of on and related organizations greated al	er than \$1	50,0	00?	If '	es,	' con	ıple	te Schedule J for		. 4	Х	
5 Did any person for services re	on listed on line 1a receive or accruendered to the organization? If 'Yes	e comper s,' comple	satio	n fr	om lule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	individual	. 5		Х
	pendent Contractors	antad ind		ام مام	٠		.4	م مالا	A veneixed may a				
compensation	s table for your five highest compen from the organization. Report comper	sation for	epen the c	alen	dar <u>j</u>	ntrac year	endi	tna ng v	vith or within the or	ganization's tax year			
	(A) Name and business add	ress							Description o	of services	Compe	<b>C)</b> ensatio	วท
	of independent contractors (including lacompensation from the organization		ited t	o tho	se l	ısted	abo	ve)	who received more	than			

		Check if Schedule O contains a response or note to any	y line in this Part V	III		
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	b c d e f	Federated campaigns	6,596,282.			
		Business Code	0,390,202.			
Program Service Revenue						
ш.	3	Investment income (including dividends, interest, and				
	4	other similar amounts)	277,345.			277,345.
	b	Royalties   Compare   C				
	d	Net rental income or (loss)	26,334.			26,334.
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses  Gain or (loss)				
	d	Net gain or (loss)	-3,134.			-3,134.
Other Revenue	b	Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18				
ō	С	Net income or (loss) from fundraising events ▶				
		Gross income from gaming activities. See Part IV, line 19				
		Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns and allowances				
		Net income or (loss) from sales of inventory				
N.		Business Code				
scellaneou Revenue	11 a b	MISCELLANEOUS	10,584.	10,584.		
Miscellaneous Revenue	-	All other revenue				
		Total. Add lines 11a-11d	10,584.			
	12	Total revenue. See instructions	6,907,411.	10,584.	0.	300,545.

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to any line in this Part IX										
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses						
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	108,716.	108,716.	•	·						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	,	,								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16										
4 5	Benefits paid to or for members	179,282.	138,944.	13,443.	26,895.						
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.						
7	Other salaries and wages	1,805,506.	1,367,661.	270,288.	167,557.						
-	Pension plan accruals and contributions	1,003,300.	1,307,001.	210,200.	107,337.						
8	(include section 401(k) and 403(b) employer contributions)	12,853.	9,663.	2,235.	955.						
9	Other employee benefits	334,103.	253,266.	49,230.	31,607.						
10	Payroll taxes	147,691.	112,081.	21,231.	14,379.						
11	Fees for services (nonemployees):		,	•	•						
ä	a Management										
	<b>b</b> Legal	26,211.	13,837.	9,052.	3,322.						
(	c Accounting	11,849.	6,280.	4,028.	1,541.						
	d Lobbying										
(	Professional fundraising services. See Part IV, line 17										
	Investment management fees	18,638.		18,638.							
	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule OSCH	593,103.	572,734.	13,825.	6,544.						
	Advertising and promotion	73,893.	71,572.	405.	1,916.						
13	Office expenses	16,988.	10,590.	3,221.	3,177.						
14	Information technology	78,789.	58,953.	13,070.	6,766.						
15 16	Occupancy.	07.204	77 (55	4 245	F 204						
17	Travel.	87,204. 63,807.	77,655. 56,041.	4,345. 4,761.	5,204. 3,005.						
18	<u> </u>	63,807.	36,041.	4,761.	3,005.						
19	Conferences, conventions, and meetings										
20 21	Interest	20,000.	20,000.								
22	Depreciation, depletion, and amortization	81,147.	63,291.	17,856.							
23	Insurance	28,888.	03,231.	28,888.							
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).	20,000.		20,000.							
ä	PRINTING AND PUBLICATIONS	56,456.	44,589.	1,159.	10,708.						
	SUPPLIES	29,672.	17,666.	3,840.	8,166.						
	EQUIPMENT	19,693.	16,837.	1,057.	1,799.						
	POSTAGE AND SHIPPING	15,261.	11,525.	539.	3,197.						
	All other expenses	21,389.	5,016.	1,800.	14,573.						
25	Total functional expenses. Add lines 1 through 24e	3,831,139.	3,036,917.	482,911.	311,311.						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ►  if following SOP 98-2 (ASC 958-720)										
DAA		<u> </u>		<u> </u>	F 000 (0001)						

		Check if Schedule O contains a response or note to	o any line	e in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing				1	
	2	Savings and temporary cash investments		<u> </u>	824,428.	2	1,335,923.
	3	Pledges and grants receivable, net	50,700.	3	445,400.		
	4	Accounts receivable, net				4	16,653.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	ner office I contribu	r, director, utor, or 35%		5	
	_			_		Э	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section		6			
	7	Notes and loans receivable, net				7	
ts	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			30,539.	9	95,315.
Ą	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D	10 a	3,177,848.			
		Less: accumulated depreciation		804,067.	2,421,438.	10 c	2,373,781.
	11	Investments – publicly traded securities			12,558,146.	11	12,691,970.
	12	Investments – other securities. See Part IV, line 11			, ,	12	, ,
	13	Investments – program-related. See Part IV, line 11.			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			384,441.	15	144,565.
	16	Total assets. Add lines 1 through 15 (must equal line	33)		16,269,692.	16	17,103,607.
	17	Accounts payable and accrued expenses	74,498.	17	110,843.		
	18	Grants payable				18	220/0101
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete Part	IV of Sch	nedule D		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	ficer, dire	ector, trustee, 35%		22	
ij	23	Secured mortgages and notes payable to unrelated the		_		23	
	24	Unsecured notes and loans payable to unrelated third	•	_	1,000,000.	24	1,000,000.
	25	' '			1,000,000.		1,000,000.
	26	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com <b>Total liabilities.</b> Add lines 17 through 25		<u>L</u>	215,981. 1,290,479.	25 26	163,045. 1,273,888.
S	20	Organizations that follow FASB ASC 958, check here			1,290,479.	20	1,2/3,000.
nces		and complete lines 27, 28, 32, and 33.		X _			
ala	27	Net assets without donor restrictions		H-	8,506,532.	27	8,264,954.
18	28	Net assets with donor restrictions			6,472,681.	28	7,564,765.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	eck here	<b>^</b> ⊔			
ō	29	Capital stock or trust principal, or current funds		<u> </u>		29	
ets	30	Paid-in or capital surplus, or land, building, or equipn	<u>L</u>		30		
\ss	31	Retained earnings, endowment, accumulated income				31	
116	32	Total net assets or fund balances		<u> </u>	14,979,213.	32	15,829,719.
ž	33	Total liabilities and net assets/fund balances			16,269,692.	33	17,103,607.
BA	Α		TEEA0111	L 09/22/21			Form <b>990</b> (2021)

BAA Form **990** (2021)

_	IVI B IVI (A) I A	00				
Pai	TXI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		•		111.
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u> 39.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	3	,07	6,2	272.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14	, 97	9,2	213.
5	Net unrealized gains (losses) on investments.	5	-2	, 22	5,7	766.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	15	, 82	9,7	719.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				'	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain					
	on Schedule O.					
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	ed on a				
	separate basis, consolidated basis, or both:	, a o a				
	Separate basis Consolidated basis Both consolidated and separate basis					
ı	Were the organization's financial statements audited by an independent accountant?		2	2 b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa	ite				
	basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,				3.7	l
	review, or compilation of its financial statements and selection of an independent accountant?		2	2 c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single					
3.	Audit Act and OMB Circular A-133?		\$	3 a		X
ı	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud	it				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3 b		l
BAA	TEEA0112L 09/22/21		Fo	orm !	990 (	(2021)

Form **990** (2021)

#### SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

vame	or the	organization					Employer identilic	auon number	
GRI	EAT	ER YELLOWSTONE COAI	LITION				81-041404	12	
Pai	tΙ	Reason for Public Cha	rity Status. (All o	rganizations must	comple	ete this	s part.) See instru	ctions.	
The	orga	nization is not a private found	lation because it is: (	For lines 1 through 12,	check o	nly one	box.)		
1		A church, convention of church	es, or association of ch	nurches described in sect	tion 1 <mark>70</mark> (	b)(1)(A)(	i).		
2		A school described in section	n <b>170(b)(1)(A)(ii).</b> (Att	ach Schedule E (Form	990).)				
3		A hospital or a cooperative h	ospital service organi	ization described in sec	tion 17	)(b)(1)(A	A)(iii).		
4		A medical research organizar name, city, and state:	tion operated in conju	unction with a hospital o	describe	d in <b>sec</b>	tion 170(b)(1)(A)(iii).	Enter the hospital's	
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle	ge or university owned	or oper	ated by	a governmental unit d	escribed in	
6		A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>							
7	X	An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	art of its support from a	governm	ental uni	t or from the general pu	ıblic described	
8		A community trust described		A)(vi). (Complete Part I	l.)				
9	П	An agricultural research organi			•	oniunctio	on with a land-grant coll	ege	
•	Ш	or university or a non-land-gran							
		university:							
10		An organization that normally from activities related to its investment income and unre June 30, 1975. See section 5	y receives (1) more the exempt functions, sub- lated business taxable	nan 33-1/3% of its supp ject to certain exceptio e income (less section	ns; and	(2) no r	nore than 33-1/3% of	its support from gross	
11		An organization organized ar	nd operated exclusive	ly to test for public safe	ety. See	section	1 509(a)(4).		
12		An organization organized ar or more publicly supported o lines 12a through 12d that de	rganizations describe	d in <b>section 509(a)(1)</b> d	r sectio	n 509(a)	)(2). See section 509(a	a)(3). Check the box on	
á	a 🗌	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervise gularly appoint or elect	d. or controlled by its sur	ported o	rganizati	ion(s), typically by giving	a the supported	
ŀ	) [	Type II. A supporting organiz management of the supporting must complete Part IV. Section	ation supervised or conganization vested in	ontrolled in connection the same persons that or	with its ontrol or	support manage	ed organization(s), by the supported organiza	having control or tion(s). <b>You</b>	
(	:	Type III functionally integrated organization(s) (see instructi	A supporting organizat	ion operated in connection	n with, aı Δ D an	nd functio	onally integrated with, its	supported	
(	<u> </u>	Type III non-functionally integrated. The of	r <b>ated.</b> A supporting org organization generally	anization operated in cor must satisfy a distribu	nection	with its s	supported organization(s	s) that is not	
•	· 🗌	instructions). <b>You must com</b> Check this box if the organiz	ation received a writte	en determination from t	the IRS	that it is	a Type I, Type II, Typ	oe III functionally	
4	Fn	integrated, or Type III non-futer the number of supported of							
		ovide the following information	3						
•	,	me of supported organization	(ii) EIN	(iii) Type of organization	(iva)	s the	(v) Amount of monetary	(vi) Amount of other	
			<b>(.7</b> =	(described on lines 1-10 above (see instructions))	organizat in your g docur	ion listed overning	support (see instructions)	support (see instructions)	
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
<u>-,</u>									

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	ı		ı	ı	ı	<u> </u>
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do Pot include any 'unusual grants.'). P.T. VI	4,021,620.	2,337,977.	3,717,848.	3,811,837.	6,596,282.	20,485,564.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	<b>Total.</b> Add lines 1 through 3	4,021,620.	2,337,977.	3,717,848.	3,811,837.	6,596,282.	20,485,564.
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)						6,712,911.
6	<b>Public support.</b> Subtract line 5 from line 4						13,772,653.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	(f) Total
7	Amounts from line 4	4,021,620.	2,337,977.	3,717,848.	3,811,837.	6,596,282.	20,485,564.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	162,933.	155,702.	201,045.	190,785.	303,679.	1,014,144.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	8,229.	21,469.				29,698.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	8,938.	29,743.	53,301.	8,537.	10,584.	111,103.
11	<b>Total support.</b> Add lines 7 through 10						21,640,509.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	1,166,384.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶
	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20		• • • • • • • • • • • • • • • • • • • •		•		63.64 %
15	Public support percentage from	2020 Schedule A,	Part II, line 14			15	65.57 %
16a	<b>33-1/3% support test—2021.</b> If t and <b>stop here.</b> The organization	he organization di qualifies as a pul	id not check the bolicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	3% or more, checl	k this box
b	<b>33-1/3% support test—2020.</b> If the and <b>stop here.</b> The organization	ne organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this I	box and stop here	e. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances to	nd-circumstances est. The organiza	test, check this l tion qualifies as a	pox and <b>stop here</b> publicly supporte	Explain in Part do organization.	VI how the ►
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions ►
	· · · · · · · · · · · · · · · · · · ·					<u> </u>	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	lar year (or fiscal year beginning in) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	<b>Public support.</b> (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						_
	dar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	(f) Total
	Amounts from line 6						
	similar sources						
	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Unrelated business taxable income (less section 511 taxes) from businesses						
c 11 12	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
11 12	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
11 12 13 14	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	stop here		third, fourth, or 1	fifth tax year as a	section 501(c)(3)	<b>&gt;</b> []
11 12 13 14 Sec	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	stop here blic Support F	Percentage				
11 12 13 14 Sec 15	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	stop hereblic Support F 21 (line 8, colum	Percentage n (f), divided by lir	ne 13, column (f)	))		%
11 12 13 14 Sec 15 16	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	stop hereblic Support F 121 (line 8, colum 2020 Schedule A	Percentage n (f), divided by lin , Part III, line 15.	ne 13, column (f)	))		
11 12 13 14 Sec 15 16 Sec	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)  First 5 years. If the Form 990 is organization, check this box and tion C. Computation of Pulpublic support percentage from a public support percentage from to the sale of computation of Investigation.	stop hereblic Support F 21 (line 8, colum 2020 Schedule A estment Incol	Percentage n (f), divided by lir , Part III, line 15 me Percentage	ne 13, column (f)	))		% %
11 12 13 14 Sec 15 16 Sec 17	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	stop hereblic Support F 21 (line 8, colum 2020 Schedule A estment Incor or 2021 (line 10c	Percentage  n (f), divided by lir , Part III, line 15.  me Percentage , column (f), divide	ne 13, column (f)	umn (f))		96 90
11 12 13 14 Sec 15 16 Sec 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	stop hereblic Support F 21 (line 8, colum 2020 Schedule A estment Incolor or 2021 (line 10c rom 2020 Schedu	Percentage  n (f), divided by lin , Part III, line 15.  me Percentage , column (f), divide	ne 13, column (f)	umn (f))	15 16 17 18	00 00 00 00
11 12 13 14 Sec 15 16 Sec 17 18 19a	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	blic Support F 21 (line 8, colum 2020 Schedule A estment Incor or 2021 (line 10c rom 2020 Schedu the organization of this box and sto	Percentage  n (f), divided by lin, Part III, line 15.  me Percentage , column (f), dividental line A, Part III, line bid not check the beyn here. The organ lid not check a bootst	ne 13, column (f) ed by line 13, col 17 box on line 14, ar ization qualifies a	umn (f))	15 16 17 18 than 33-1/3%, and orted organization 6 is more than 33-	% % % d line 17 ► [] 1/3%, and

81-0414042

### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

# Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	: Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI,</b> including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was			
	accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If 'Yes,' complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		
С	: Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI.</b>	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	1 <b>0</b> b		

Pa	rt IV	Supporting Organizations (continued)			
11	Llog i	the expenientian eccented a gift or contribution from any of the following persons?		Yes	No
		the organization accepted a gift or contribution from any of the following persons? rson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
		governing body of a supported organization?	11a		
	<b>b</b> A far	mily member of a person described on line 11a above?	11b		
		% controlled entity of a person described on line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .	11c		
Se	ction	B. Type I Supporting Organizations		I	T
1	or monormostice organical	the governing body, members of the governing body, officers acting in their official capacity, or membership of one lore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported inization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers the tax year.	1	Yes	No
2	that of the state	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such effit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Se	ction	C. Type II Supporting Organizations			
				Yes	No
1	Were	e a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ach of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the			
		porting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction	D. All Type III Supporting Organizations			
1	Did t	the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
·	orgai	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax , (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	orgai	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tir	eason of the relationship described on line 2, above, did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard.	3		
Se	ction	E. Type III Functionally Integrated Supporting Organizations			
1	Chec	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a $\square$ $\top$	The organization satisfied the Activities Test. Complete line 2 below.			
	b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c 🗌 T	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instri	uction	s).
2	Activ	vities Test. Answer lines 2a and 2b below.		Yes	No
	suppo orga respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported unizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted stantially all of its activities.	2a		
	more reas	the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or e of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the ons for the organization's position that its supported organization(s) would have engaged in these activities for the organization(s) involvement.	2b		
		for the organization's involvement.	20		
		ent of Supported Organizations. Answer lines 3a and 3b below.			
	<b>a</b> Did t each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If 'Yes' or 'No,' provide details in <b>Part VI.</b>	3a		
		he organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? <i>If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.</i>	3b		

Sch	edule A (Form 990) 2021 GREATER YELLOWSTONE COALITION		81-04	14042	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	aniza <sup>.</sup>	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on N	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.	
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Currer (optior	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6			
_ 7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Currer (option	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
- 6	Average monthly value of securities	1a			,
	Average monthly cash balances	1b			
(	Fair market value of other non-exempt-use assets	1c			
	d Total (add lines 1a, 1b, and 1c)	1d			
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C — Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

BAA Schedule A (Form 990) 2021

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Sec	Section D — Distributions							
1	Amounts paid to supported organizations to accomplish exempt purposes	1						
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2						
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3						
4	Amounts paid to acquire exempt-use assets	4						
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5						
6	Other distributions (describe in Part VI). See instructions.	6						
_ 7	Total annual distributions. Add lines 1 through 6.	7						
8	Distributions to attentive supported organizations to which the organization is responsive (provide details							
	in <b>Part VI</b> ). See instructions.	8						
9	Distributable amount for 2021 from Section C, line 6	9						
10	Line 8 amount divided by line 9 amount	10						

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
<b>b</b> Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

BAA Schedule A (Form 990) 2021

81-0414042

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### **PART II, LINE 1 - UNUSUAL GRANTS**

 2017	2018	2019	2020	2021	TOTAL
\$ 500,000.	\$ 0.	\$ 431,753.	\$ 398,100.	\$ 0.	\$ 1,329,853.

## **PART II, LINE 10 - OTHER INCOME**

NATURE AND SOURCE			2021		2020		2019		2018		2017
MISCELLANEOUS	TOTAL	\$ \$	10,584. 10,584.	\$ \$	8,537. 8,537.	\$ \$	53,301. 53,301.	\$ \$	29,743. 29,743.	\$ \$	8,938. 8,938.

BAA TEEA0408L 08/31/21 Schedule A (Form 990) 2021

#### SCHEDULE C (Form 990)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• 5	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III.			
	of organization	,		Employer identific	ation number
GRE	EATER YELLOWSTONE C	OALITION		81-041404	
		rganization is exempt under section			zation.
1		organization's direct and indirect political on of 'political campaign activities.'	ampaign activities in	Part IV.	
2	Political campaign activity ex	penditures. See instructions		<b>⊳</b> \$	
3	Volunteer hours for political	campaign activities. See instructions			
Par	rt I-B Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	<b>⊳</b> \$	0.
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
Ł	If 'Yes,' describe in Part IV.				
Par	rt I-C Complete if the or	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	1
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	on activities ►\$	
2		g organization's funds contributed to other			
3		ditures. Add lines 1 and 2. Enter here and		<b>►</b> \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the all so received that were promptly and directly del all action committee (PAC). If additional spanning the committee (PAC) is additional spanning the committee (PAC).	ivered to a separate po	olitical organization, such	as a separate
	<b>(a)</b> Name	(b) Address	<b>(c)</b> EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990) 2021

Part II-A Complete if section 501(	the organization	ı is exempt under sed	ction 501(c)(3) and	filed Form 5768 (el	ection under				
A Check ► if the filin	A Check ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name,								
address,	address, EIN, expenses, and share of excess lobbying expenditures).								
B Check ► if the filir	B Check ► ☐ if the filing organization checked box A and 'limited control' provisions apply.								
(The term	Limits on Lobby 'expenditures' mea	ing Expenditures ns amounts paid or incurr	red.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals				
1 a Total lobbying expenditu	ures to influence pu	blic opinion (grassroots lob	bying)	12,098.					
		egislative body (direct lobb		5,064.					
	•	nd 1b)		17,162.	0.				
	•	1 115		3,348,922.					
e Total exempt purpose e	xpenditures (add iir	nes 1c and 1d)		3,366,084.	0.				
		ount from the following tab		318,304.					
If the amount on line 1e, colu	umn (a) or (b) is:	The lobbying nontaxable	amount is:						
Not over \$500,000		20% of the amount on line 1e.							
Over \$500,000 but not over \$1,		\$100,000 plus 15% of the excess							
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess							
Over \$1,500,000 but not over \$ Over \$17,000,000		\$225,000 plus 5% of the excess of \$1,000,000.	iver \$1,500,000.						
		of line 1f)		79,576.	0				
~		s, enter -0		19,576.	0.				
		, enter -0		0.	0.				
		line 1h or line 1i, did the org		reporting	Yes No				
(Som	e organizations tha	4-Year Averaging Period L t made a section 501(h) el low. See the separate instr	ection do not have to o						
	Lobb	ying Expenditures During	4-Year Averaging Peri	od					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	(e) Total				
2 a Lobbying nontaxable amount	326,49	7. 326,975.	291,488.	318,304.	1,263,264.				
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					1,894,896.				
<b>c</b> Total lobbying expenditures	70,31	9. 19,206.	17,416.	17,162.	124,103.				
<b>d</b> Grassroots nontaxable amount	81,62	4. 81,744.	72,872.	79,576.	315,816.				
e Grassroots ceiling amount (150% of line 2d, column (e))					473,724.				
<b>f</b> Grassroots lobbying expenditures	3,89	4. 13,488.	11,398.	12,098.	40,878.				

BAA Schedule C (Form 990) 2021

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

(election under Section 501(n)).	(a	1)		(b	)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No		Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
a Volunteers?						
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c Media advertisements?						
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities?						
j Total. Add lines 1c through 1i.						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912						
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	c)(5)	, or				
					Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			_	1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			_	2		i
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the p				3		
Part III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) F answered 'Yes.'	art I	, or s II-A,	ectio line 3	n 50 }, is	1(c)	
1 Dues, assessments and similar amounts from members		1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
a Current year		2 a				
<b>b</b> Carryover from last year.		2b				
<b>c</b> Total		2 c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure part year?		1				

### Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

5 Taxable amount of lobbying and political expenditures. See instructions.....

BAA Schedule C (Form 990) 2021

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

GREATER YELLOWSTONE COALITION

					81-041	L4042	
Pai	rt   Organizations Maintaining Donor	Advised Funds or Other	Similar Fund	ds or A	ccounts.		
	Complete if the organization answe	red 'Yes' on Form 990, F	Part IV, line 6	5.			
		(a) Donor advised fur	nds	(b)	Funds and	other acco	ounts
1	Total number at end of year	(1)		<u> </u>			
2	Aggregate value of contributions to (during year)						
_							
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor are the organization's property, subject to the organization's	advisors in writing that the as ganization's exclusive legal co	sets held in dor	nor advise	ed funds	Yes	No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of	and donor advisors in writing the donor or donor advisor, o	that grant funds r for any other p	s can be u ourpose c	used only onferring	_ □Yes	 □ No
	impermissible private benefit?					162	INO
Pai							
	Complete if the organization answe			7.			
1	Purpose(s) of conservation easements held by the	ne organization (check all that	apply).				
	Preservation of land for public use (for example,	recreation or education)	Preservatio	n of a his	torically imp	ortant lan	d area
	Protection of natural habitat		Preservatio	n of a cei	rtified histor	ic structure	Э
	Preservation of open space						
2	<u> </u>	d a qualified conservation contrib	oution in the form	of a cons	ervation ease	ement on th	ne
	last day of the tax year.				Held at the	End of th	e Tax Year
	a Total number of conservation easements			2a	Ticia at tile	Liiu oi tii	c rax rear
	b Total acreage restricted by conservation easeme						
,	c Number of conservation easements on a certified	d historic structure included in	(a)	2c			
•	<b>d</b> Number of conservation easements included in ( structure listed in the National Register			2 d			
3	Number of conservation easements modified, transfetax year ►	erred, released, extinguished, or	terminated by the	e organiza	tion during th	ne	
4	Number of states where property subject to conserva	ation easement is located ►					
5	Does the organization have a written policy regar	rding the periodic monitoring,	inspection, hand	dling of vi	olations,		
	and enforcement of the conservation easements					Yes	No
6	Staff and volunteer hours devoted to monitoring, insp	pecting, handling of violations, a	nd enforcing con	servation (	easements d	uring the ye	ear ear
7	Amount of expenses incurred in monitoring, inspecti ►\$	ng, handling of violations, and e	nforcing conserva	ation ease	ments during	the year	
8	Does each conservation easement reported on li and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requ	irements of sec	tion 170(ŀ	n)(4)(B)(i)	Yes	No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to t conservation easements.						
Pai	Organizations Maintaining Collecti Complete if the organization answe	ions of Art, Historical Tr red 'Yes' on Form 990, I	reasures, or Gart IV, line 8	Other S 8.	imilar Ass	sets.	
1:	If the organization elected, as permitted under F, historical treasures, or other similar assets held Part XIII the text of the footnote to its financial s	for public exhibition, education	n, or research in	tement a	nd balance s	sheet work service, p	s of art, provide in
1	b If the organization elected, as permitted under F, historical treasures, or other similar assets held for p following amounts relating to these items:	ASB ASC 958, to report in its public exhibition, education, or re	revenue statem esearch in further	ent and b ance of pu	alance shee ublic service,	et works of provide the	art,
	(i) Revenue included on Form 990, Part VIII, lin	e 1					
	(ii) Assets included in Form 990, Part X						
2							
	a Revenue included on Form 990, Part VIII, line 1.						
	<b>b</b> Assets included in Form 990, Part X						10 000
	u mosets iliciuudu iii i viiii 330, Fait M						10,000.

Part III Organizations Maintain	ing Collections	of Art, Historica	al Treasures, or (	Other Similar Ass	ets (c	ontinu	ed)				
3 Using the organization's acquisition, a items (check all that apply):	accession, and other	records, check any of	the following that ma	ke significant use of its	collection	on					
a Public exhibition		d Loan or ex	change program								
<b>b</b> Scholarly research		e Other									
c Preservation for future generations											
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. SEE PART XIII											
5 During the year, did the organization to be sold to raise funds rather that	in to be maintained	as part of the organ	ization's collection?.		X Yes	L	No				
Part IV Escrow and Custodial A	mount on Form s	990, Part X, line	organization ansi	wered 'Yes' on Fo	rm 99	u, Par	t IV,				
1 a Is the organization an agent, truste	ee, custodian or othe	er intermediary for o	contributions or other	assets not included		_	_				
on Form 990, Part X?					Yes	L	No				
<b>b</b> If 'Yes,' explain the arrangement in	n Part XIII and comp	olete the following to	able:	г							
Denimalan kalansa					Amoun	<u>t</u>					
c Beginning balance											
<ul><li>d Additions during the year</li><li>e Distributions during the year</li></ul>											
f Ending balance				. 1f							
2a Did the organization include an am				<u> </u>	Yes		No				
<b>b</b> If 'Yes,' explain the arrangement in				- 1		_	- 110				
bit res, explain the arrangement in	TI all XIII. Officer in	ere ii tile explanatio	ii iias been provided	on an Am		· · · · · L	_				
Part V Endowment Funds. Co	mnlete if the ord	anization answe	ered 'Yes' on For	m 990 Part IV lir	ne 10						
Little Endownient unds oo	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back		Four years	s back				
<b>1 a</b> Beginning of year balance	4,100,556.	3,571,328.			_	,048,					
<b>b</b> Contributions	1,100,000.	0,011,020	0,021,030	. 0,200,001	<del>                                     </del>	<u>,                                    </u>					
a Nist in restress to somings and inc											
c Net investment earnings, gains, and losses	-761,000.	664,228.	357,233	. 140,744.	.	235,	153.				
<b>d</b> Grants or scholarships	·	·	,	·	1						
e Other expenditures for facilities					1						
and programs	135,000.	135,000.	110,000	. 100,000.							
f Administrative expenses											
<b>g</b> End of year balance	3,204,556.	4,100,556.			. 3	<u>,283,</u>	351.				
2 Provide the estimated percentage	-		i, column (a)) held a	S:							
a Board designated or quasi-endowmer		%									
<b>b</b> Permanent endowment ►	62.78 %										
	. <u>22</u> %	0/									
The percentages on lines 2a, 2b, and	i zc snouid equal 100	%.									
3a Are there endowment funds not in the	e possession of the or	ganization that are h	eld and administered f	or the	1	Yes	No				
organization by:  (i) Unrelated organizations					. 3a(i)	X	No				
(ii) Related organizations					3a(ii)		Х				
<b>b</b> If 'Yes' on line 3a(ii), are the related					3b						
4 Describe in Part XIII the intended in	-	· ·			. 30		<u> </u>				
Part VI Land, Buildings, and E		ation 5 on downlone is	JIIGO. DEL IMICI	XIII							
Complete if the organiz		'Yes' on Form 9	90 Part IV line	11a See Form 99	0 Par	rt X lir	ne 10				
Description of property						Book va					
Description of property		or other basis (lestment)	b) Cost or other basis (other)	(c) Accumulated depreciation	(a)	Book va	ilue				
<b>1 a</b> Land		<u> </u>	600,000.			600	,000.				
<b>b</b> Buildings			2,426,140.	704,738.		721,					
c Leasehold improvements			, -,	,		<u>, ==,</u>					
<b>d</b> Equipment			176,000.	123,621.		52.	,379.				
<b>e</b> Other			-24,292.	-24,292.			0.				
Total. Add lines 1a through 1e. (Column	(d) must equal Form	n 990, Part X, colur			2	2,373,	,781.				

BAA Schedule D (Form 990) 2021

Part VII Investments — Other Securities.		N/A	20 5 1 7 1: 10
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-	year market value
(1) Financial derivatives			
(2) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I) Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) •			
Part VIII Investments – Program Related.		N/A	
Complete if the organization answered	l 'Yes' on Form 990	), Part IV, line 11c. See Form 99	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> (7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶			
Part IX Other Assets. Complete if the organization answered	N/A N/As' on Form 990	Dart IV line 11d See Form 90	00 Part V line 15
	scription	7, 1 at 17, iiile 11a. 3ee 1 0iiii 3	(b) Book value
(1)	•		•
(2)			
(3)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
(10)	D) (i.e. 15.)		
Total. (Column (b) must equal Form 990, Part X, column (c) Part X Other Liabilities.	B) IINE 15.)	<b>&gt;</b>	
Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
	iption of liability	, ,	(b) Book value
(1) Federal income taxes			
(2) COMPENSATED ABSENCES			96,425.
(3) GIFT ANNUITY OBLIGATION (4) RETIREMENT CONTRIBUTIONS PAYABLE			65,258. 1,362.
(5)			1,302.
(6)			
(7)			
(8)			
(9)			
(10) (11)			
		<b>.</b>	163,045.
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)  2. Liability for uncertain tax positions. In Part XIII, provide the text of the form			
tax positions under FASB ASC 740. Check here if the text of the footnote has			
BAA	TEEA3303L 08/30/21		ule D (Form 990) 2021

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	1
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	4,664,721.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
<b>b</b> Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d.	2 e	-2,224,052.
3 Subtract line 2e from line 1.	3	6,888,773.
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		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	18,638.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		6,907,411.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	rn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	3,814,215.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	1,714.
3 Subtract line 2e from line 1	3	3,812,501.
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		
b Other (Describe in Part XIII.) 4b		
	10	10 (20
c Add lines 4a and 4b	4 c	18,638. 3,831,139.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

## PART III, LINE 4 - DESCRIPTION OF ORGANIZATION COLLECTIONS & HOW FURTHERS EXEMPT PURPOSE

THE ORGANIZATION RECEIVED A CONTRIBUTION OF A PAINTING DURING FY2021 AND ARE ATTEMPTING TO SELL THE ARTWORK.

#### PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

Part XIII Supplemental Information.

BAA

EARNINGS ON THE ENDOWMENT FUNDS MAY BE ALLOCATED TO FACILITATE THE GOALS AND OBJECTIVES AS OUTLINED IN GYC'S ARTICLES OF INCORPORATION, WHICH INCLUDE: TO DEVELOP A PUBLIC AWARENESS THAT THE GREATER YELLOWSTONE AREA CONSTITUTES AN INTACT ECOSYSTEM

OF IMMEASURABLE IMPORTANCE TO THE PEOPLE OF THE UNITED STATES; TO EDUCATE THE

Schedule D (Form 990) 2021

Part XIII Supplemental Information (continued)

#### PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND (CONTINUED)

NATIONAL PUBLIC ABOUT THREATS TO THE INTEGRITY OF THE ECOSYSTEM; TO COORDINATE
SUPPORT FOR THE PROTECTION AND PRESERVATION OF THE UNIQUE NATURAL, SCENIC AND
WILDLIFE RESOURCES IN THE AREA; TO SUPPORT RESPONSIBLE RESOURCE MANAGEMENT POLICIES
AND PROGRAMS FOR THE NATIONAL FOREST AND NATIONAL PARK LANDS; TO OPPOSE EXPLOITATION
AND DEVELOPMENT OF LANDS WHICH ARE INCOMPATIBLE WITH THE PROTECTION AND PRESERVATION
OF THE WILDLIFE, WILD LAND, SCENIC AND RECREATIONAL VALUES PRESENT ECOSYSTEM; AND TO
PROVIDE A MEANS WHEREBY PEOPLE AND ORGANIZATIONS WITH SIMILAR INTERESTS CAN
COORDINATE THEIR EFFORTS TO ACCOMPLISH THE ABOVE PURPOSES BY ASSOCIATING TOGETHER,
RAISING FUNDS TO ACCOMPLISH THESE PURPOSES, EDUCATING AGENCIES AND THE PUBLIC,
PETITIONING FOR LEGISLATIVE AND ADMINISTRATIVE ACTION OR REVIEW OF ACTION, AND
SEEKING JUDICIAL REDRESS IN APPROPRIATE CIRCUMSTANCES.

#### SCHEDULE I (Form 990)

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

20

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

GREATER YELLOWSTONE COALITI	ON					81-041404	42
Part I   General Information on Gr	ants and Assistar	тсе					
1 Does the organization maintain records t the selection criteria used to award th	o substantiate the amou e grants or assistance	unt of the grants or	assistance, the grantees'	eligibility for the grants	or assistance, and		X Yes No
2 Describe in Part IV the organization's pro	ocedures for monitoring	the use of grant fu	inds in the United States.				
Part II Grants and Other Assistan	nce to Domestic O	rganizations	and Domestic Gove	ernments. Comple	ete if the organizat	tion answered 'Y	'es' on
Form 990, Part IV, line 21,	for any recipient	that received i	more than \$5,000. F	Part II can be dupli	cated if additional	I space is neede	ed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TOM MINER BASIN ASSOC 527 TOM MINER CREEK ROAD							GRIZZLY CONFLICT
EMIGRANT, MT 59027	47-2837284		7,500.	0.	CASH VALUE		RESOLUTION
(2) CENTENNIAL VALLEY ASSOCIATION PO BOX 240077							GRIZZLY CONFLICT
DELL, MT 59724	20-2063285		7,500.	0.	CASH VALUE		RESOLUTION
(3) LEGACY PHILANTHROPY  521 SANTA BARBARA STREET  SANTA BARBARA, CA 93101	47-2584632		14,967.	0	CASH VALUE		ELK OCCUPANCY AGREEMENT
(4) HENRY'S FORK WILDLIFE PO BOX 725			,				SUPPORT FOR WILDLIFE
ASHTON, ID 83420	84-2154355		6,250.	0.	CASH VALUE		ADVOCACY
(5) NTHN ROCKIES CONSERV CO-OP 777 6TH ST SW SUITE 700 WASHINGTON, DC 20001	74-2441476		10,000.	0.	CASH VALUE		CLIMATE CHANGE IMPACTS
(6) CNTR FOR LARGE LANDSCAPE CONS PO BOX 1587 BOZEMAN, MT 59771	27-1226829		10,000.	0.	CASH VALUE		CLIMATE CHANGE IMPACTS
(7) PROPERTY & ENVIRONMENT  2048 ANALYSIS DR. STE A  BOZEMAN, MT 59718	81-0393444		25,000.	0	CASH VALUE		BISON RESTORATION PROJECT
(8) MOUNTAIN TIME ARTS	01 0333444		25,000.	0.	CITOII VIIIOD		1100001
222 E MAIN STREET STE 102							INDIGENOUS
BOZEMAN, MT 59715	82-2924553		10,000.		CASH VALUE		CONSERVATION
2 Enter total number of section 501(c)(3							6
3 Enter total number of other organizati	ons listed in the line 1	table					2

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III	
	can be duplicated if additional space is needed.	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
_ 5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

BAA Schedule I (Form 990) 2021

### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

**2021** 

Open to Public Inspection

GREATER YELLOWSTONE COALITION

Employer identification number 81-0414042

Par	t I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
_				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/ Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant   X   Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4 a		Χ
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4 b		Χ
c	Participate in or receive payment from an equity-based compensation arrangement?	4 c		Χ
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5 a		Х
b	Any related organization?	5 b		Χ
	If 'Yes' on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
а	The organization?	6 a		Χ
b	Any related organization?	6 b		Χ
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
J	to the initial contract exception described in Regulations section 53.4958-4(a)(3)?	_		
	If 'Yes,' describe in Part III	8		X
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	0		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2021

# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 a	nd/or 1099-MISC and/o	r 1099-NEC compensatio		(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
SCOTT CHRISTENSEN	(i)	137,497.	0.	0.	14,522.	14,555.	166,574.	0.
1 EXECUTIVE DIR.	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
2	(ii)						<del> </del>	
	(i)							
3	(ii)				T		T	
	(i)						L	
4	(ii)							
	(i)							
5	(ii)							
	(i)						L	
6	(ii)							
	(i)				<b> </b>		<b></b>	
7	(ii)							
_	(i)		 		<b> </b>		<b> </b>	
8	(ii)							
	(i)				<b></b>		<b></b>	
9	(ii)							
10	(j)				<b></b>		<del></del>	
10	(ii)							
11	(i)				<del> </del>		<del> </del>	
11	(i)							
12	(i) (ii)				+		+	
12	(i)							
13	(ii)				+		+	
13	(i)							
14	(i) (ii)		<del> </del>		<del> </del>		<del> </del>	
••	(i)							
15	(ii)				<del> </del>		<del> </del>	
···	(i)							
16	(ii)				<del> </del>		<del> </del> -	
DAA	<b>()</b>			1				VE 000\ 0001

BAA

TEEA4102L 10/27/21

Schedule J (Form 990) 2021

# Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

TEEA4103L 10/27/21

### **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Noncash Contributions** 

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

OMB No. 1545-0047

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

**Open to Public** Inspection

GREATER YELLOWSTONE COALITION

Employer identification number 81-0414042

Pai	t I Types of Property						
		(a) Check if applicable	(b)  Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	<b>(d)</b> od of determir contribution a	ning imounts
1	Art — Works of art		12	4,000.	FMV		
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		8	115,695.	FMV		
10	Securities - Closely held stock						
11	Securities – Partnership, LLC, or trust interests .						
12	Securities – Miscellaneous						
13	Qualified conservation contribution – Historic structures						
14	Qualified conservation contribution — Other					-	
15	Real estate – Residential						
16	Real estate – Commercial						
17	Real estate – Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► (OFFICE SUPPLIES )		3	881.	FMV		
26	Other ► ()						
27	Other ► ()						
28	Other ► ( )						
29	Number of Forms 8283 received by the organization de organization completed Form 8283, Part V, Donee				29		
						Yes	No
30°	During the year, did the organization receive by contril	hution any nr	onerty reported in Part I	lines 1 through 28 that			
300	it must hold for at least three years from the date						
	for exempt purposes for the entire holding period?					30 a	Х
b	If 'Yes,' describe the arrangement in Part II.						
31	Does the organization have a gift acceptance police	cy that requi	res the review of any r	nonstandard contributio	ns?	31	Х
32a	Does the organization hire or use third parties or r contributions?					32 a	Х
b	If 'Yes,' describe in Part II.				ŀ		
	If the organization didn't report an amount in column describe in Part II.	mn (c) for a	type of property for wh	nich column (a) is chec	ked,		

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

BAA TEEA4602L 11/4/21 Schedule M (Form 990) 2021

#### SCHEDULE O (Form 990)

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

GREATER YELLOWSTONE COALITION

Employer identification number 81-0414042

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE AUDIT COMMITTEE REVIEWS AND APPROVES THE FORM 990. THE AUDIT COMMITTEE CHAIR
THEN REPORTS TO THE BOARD OF DIRECTORS. UPON APPROVAL BY THE BOARD, THE FORM 990 IS
SIGNED BY AN OFFICER OF THE CORPORATION AND FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE ORGANIZATION'S POLICIES INCLUDE CONFLICT OF INTEREST SPECIFIC POLICIES FOR BOARD MEMBERS, STAFF AND VOLUNTEERS.

NEW BOARD MEMBERS ARE PROVIDED WITH CONFLICT OF INTEREST DOCUMENTS DURING A BOARD ORIENTATION SESSION. IN ADDITION, ALL BOARD MEMBERS ARE ANNUALLY PROVIDED WITH A MEMO EXPLAINING THE ORGANIZATION'S CONFLICT OF INTEREST POLICY ALONG WITH A FORM WHICH THEY SIGN ACKNOWLEDGING THEY HAVE READ THE PROVISIONS, THAT THEY HAVE AN AFFIRMATIVE DUTY TO DISCLOSE TO THE APPROPRIATE GYC BOARD AND/OR STAFF SHOULD THEY BECOME AWARE OF ANY ACTIVITY OR INTEREST WHICH REPRESENTS A MATERIAL OR PERCEIVED CONFLICT OF INTEREST IN THEIR ROLE WITH THE ORGANIZATION AND TO LIST THEIR KNOWN CONFLICTS OR POTENTIAL CONFLICTS OR TO STATE THAT THERE IS NO CONFLICT AT THE TIME. THE MEMO INCLUDES SEVERAL QUESTIONS TO PROVIDE ANSWERS NEEDED FOR THE IRS FORM 990, AND SPACE IS PROVIDED ON THE MEMO FORM TO DISCLOSE POSSIBLE CONFLICTS.

UPON HIRE ALL NEW EMPLOYEES ARE GIVEN A COPY OF THE PERSONNEL POLICIES AND PRACTICE DOCUMENT. THEY SIGN A STATEMENT ACKNOWLEDGING THEY HAVE READ AND UNDERSTAND THEM.

WHEN ANY CHANGES ARE MADE TO THE PERSONNEL POLICIES AND PRACTICES DOCUMENT (WHICH IS REVIEWED PERIODICALY). ALL EMPLOYEES ARE GIVEN A COPY OF THESE DOCUMENTS AND THE CHANGES ARE REVIEWED WITH THEM.

Page 2 Name of the organization Employer identification number 81-0414042 GREATER YELLOWSTONE COALITION

# FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE BOARD EXECUTIVE COMMITTEE MEETS AT LEAST ANNUALLY IN EXECUTIVE SESSION TO REVIEW THE EXECUTIVE DIRECTOR'S PERFORMANCE, SALARY AND BENEFITS, AND MAKES RECOMMENDATIONS FOR ANY CHANGES TO THE FULL BOARD OF DIRECTORS FOR THEIR APPROVAL IN AN EXECUTIVE IN DOING SO, THE COMMITTEE CONSIDERS DATA FROM CURRENT COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS, AND DATA FOR COMPARABLE POSITIONS WITH OTHER SIMILAR ORGANIZATIONS. COMPENSATION STUDIES ARE PERFORMED EVERY 2 OR 3 YEARS. THE BOARD'S DECISION IS DOCUMENTED IN GENERAL IN MINUTES OF THEIR MEETING, AND IN DETAIL IN A CONFIDENTIAL MEMO TO THE EXECUTIVE DIRECTOR'S PERSONNEL FILE, WHICH IS GIVEN TO THE FINANCE MANAGER FOR IMPLEMENTATION AND FILING. INCLUDED IN THE DOCUMENTATION ARE THE TERMS OF THE COMPENSATION ARRANGEMENT; THE DATE APPROVED, THE NAMES OF THE BOARD MEMBERS WHO WERE PRESENT DURING THE DISCUSSION AND WHO VOTED ON IT, AND THE DATA RELIED UPON IN MAKING THE DECISION.

#### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST IN THE FORM OF ELECTRONIC PDF COPIES OR HARD COPY. ADDITION, THE IRS DETERMINATION LETTER, AUDITED FINANCIAL STATEMENTS AND FORMS 990 ARE POSTED ON THE ORGANIZATION'S WEB SITE.

#### FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

		(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT <u>&amp; GENERAL</u>	(D) FUND- RAISING
COLLABORATIVE PROJECTS CONTRACTED SERVICES	TOTAL \$	293,516. 299,587. 593,103.	293,516. 279,218. \$ 572,734.	13,825. \$ 13,825.	6,544. \$ 6,544.