For	m 99	90								OMB No. 1545-0047	
1 01		•			-	ation Exempt				2020	
			Under se	• • •		(1) of the Internal Reven	• •	•	ndations)	Open to Public	
Dep: Inter	artment o nal Reve	of the Treasury enue Service	►	► Do not en Go to www	nter social secur v.irs.gov/Form99	ity numbers on this form 0 for instructions ar	i as it may be n I d the latest	iade public. informatio	n.	Inspection	
A	For th	e 2020 calendar					20, and end			, 20 2021	
В	Check if	f applicable: C							D Employer iden	tification number	
	Add				ONE COAL	ITION			81-0414		
	Nar		L5 SOUTH DZEMAN,						E Telephone num	hber	
	Init	tial return BC	JZEMAN,	MI 5971	.5				406-586	5-1593	
	Fina	al return/terminated							-	L	
		nended return							G Gross receipts	-/	
	App	1	Name and add		al officer: SCO	IT CHRISTENSE	Ν	. ,	a group return for su	103 1	lo No
-	Tax		ME AS C 501(c)(3))◀ (in:	sert no.) 4947(a)(1) or 527	If "No,"	subordinates include attach a list. See in	structions	10
ı J			TERYELL	501(c) (, ,	sert no.) 4947(a)(1) 01 527		eveneties sumber		
ĸ			Corporation	Trust	Association	Other ►	L Year of form		2 M State of	legal domicile: MT	
-	art I	Summary	Corporation	Trust	Association	Other					
			the organiza	ation's miss	sion or most s	ignificant activities:(REATER	YELLOWS	TONE COAL	TION WORKS	
a		WITH ALL P	EOPLE, I	BRINGIN	G TOGETH	ER DIVERSE IN	TERESTS,	TO DEV	ELOP INNO	VATIVE	
anc		SOLUTIONS	TO PROTI	ECT THE	LANDS, V	WATERS, AND W	ILDLIFE	OF THE	GREATER Y	ELLOWSTONE	_
Governance		ECOSYSTEM,									_
No So	2					ed its operations or o Part VI, line 1a)				i	
						rning body (Part VI,					21 21
Activities &						ar 2020 (Part V, line					<u>. 1</u> 37
ivit											.0
Act	7a ⁻	Total unrelated b	ousiness rev	enue from	Part VIII, colu	umn (C), line 12			7a		
	- La 1	Net unrelated bu	ninana tava	hla incomo	C = 000).
-	D		isiness taxa		from Form 99	90-T, Part I, line 11.			7 b	0	
								Р	rior Year	Current Year).
le	8 (Contributions an	d grants (Pa	art VIII, line	e 1h)			P).
enue	8 (9	Contributions an Program service	d grants (Pa revenue (P	art VIII, line art VIII, line	e 1h) e 2g)			P <u>4</u>	rior Year ,149,601.	Current Year 4, 209, 938).).
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	Firm's name	► AMATICS CPA GROUP		
Use Only	Firm's address	► 45 DISCOVERY DRIVE	Firm's EIN ► 46-3057681	
		BOZEMAN, MT 59718	Phone no. 406-404-1925	
May the IRS	discuss this r	eturn with the preparer shown above? See instructions	X Yes	No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	n 990 (2020) GREATER YELLOWSTONE COALITION	81-0414042	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1			
	GREATER YELLOWSTONE COALITION WORKS WITH ALL PEOPLE, BRINGING TO		
	INTERESTS, TO DEVELOP INNOVATIVE SOLUTIONS TO PROTECT THE LANDS		LDLIFE
	OF THE GREATER YELLOWSTONE ECOSYSTEM, NOW AND FOR FUTURE GENERA	<u>10NS</u>	
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior	
-	Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices? Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program se	vices, as measured by e	xpenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	ons to others, the total ex	penses,
4 a	a (Code:) (Expenses \$ 1,151,794. including grants of \$ 603,629.)	(Revenue \$)
	WILDLIFE CONSERVATION - GREATER YELLOWSTONE IS HOME TO A REMARK	ABLE ASSEMBLAGE	OF
	CHARISMATIC WILDLIFE. GYC PLAYS A LEAD ROLE IN CONSERVING THE RI		
	WILDLIFE, WITH A FOCUS ON GRIZZLY BEARS, BISON, AND UNGULATE MIC		
	LEADER IN PRESERVING LONG-DISTANCE WILDLIFE MIGRATIONS BY PROTEC		
	CORRIDORS, CONSTRUCTING WILDLIFE FRIENDLY FENCES, AND ADVOCATING		<u> </u>
	CROSSING STRUCTURES ON HIGHWAYS. OUR CURRENT PRIORITIES INCLUDE		
	<u>NEW_WILDLIFE_HIGHWAY_CROSSINGS, REDUCING_CONFLICT_BETWEEN_PEOPLI</u> THROUGH ON-THE-GROUND PARTNERSHIPS AND INNOVATIVE PRACTICES, HA		
	ENSURING LANDSCAPE-SCALE CONNECTIVITY FOR WILDLIFE, AND RESTORING		
	ANCESTRAL HOMELANDS ON TRIBAL AND SELECT PUBLIC LANDS IN THE REC		<u></u>
4 b	b (Code:) (Expenses \$ 1,066,529. including grants of \$)	(Revenue \$)
	LAND CONSERVATION - GREATER YELLOWSTONE'S PUBLIC AND PRIVATE LA	NDS STITCH TOGET	HER A
	STUNNING TAPESTRY OF HABITAT FOR THE REGION'S CELEBRATED WILDLI		
	CONSERVE THE MOST CRITICAL PARTS OF THIS LANDSCAPE. GYC BUILDS		<u>N</u>
	MONTANA, WYOMING, AND IDAHO AND ACROSS THE COUNTRY FOR POLICIES		
	CRITICAL PUBLIC AND PRIVATE LANDS. PARTNERING WITH AND SUPPORTI		
	<u>COMMUNITIES AND INTEREST IS A CENTRAL COMPONENT OF GYC'S APPROA</u> SPECIAL PLACE. CURRENT PRIORITIES INCLUDE PROTECTING LANDS FROM		
	SECURING NEW PROTECTIONS FOR CRUCIAL WILDLIFE HABITAT SUCH AS M		
	AND SAFEGUARDING CORE GRIZZLY BEAR HABITAT. SINCE 1983, GYC HAS		
	HAVE PROTECTED MILLIONS OF ACRES FROM ENERGY DEVELOPMENT, MINING		
	ACTIVITIES.	<u> </u>	
4 c	c (Code:) (Expenses \$378,377. including grants of \$)	(Revenue \$)
	CLIMATE CHANGE & WATER PROTECTION - GREATER YELLOWSTONE'S STREAM		
	FOUNTAINHEAD OF THE WEST. GYC PROTECTS THE REGION'S WILD, FREE		
	NEW DAMS, DIVERSIONS, AND INDUSTRIAL POLLUTION. SINCE 2009, GYC		
	PROTECTIONS FOR NEARLY 500 MILES OF WILD RIVERS IN GREATER YELL		
	GYC IS WORKING WITH A COALITION OF BUSINESSES, THOUSANDS OF CIT PARTNERS TO PROTECT OVER 350 MILES OF RIVERS IN MONTANA THROUGH		
	GYC PARTNERS WITH SCIENTISTS, AGENCIES, TRIBES, AND OTHERS ACROS		
	DEVELOP CUTTING EDGE CLIMATE SCIENCE AND INNOVATIVE PROJECTS AND		
	GREATER RESILIENCY TO CLIMATE CHANGE IMPACTS, WITH A FOCUS ON R		
	SENSITIVE WILDLIFE HABITATS.		
4 d	d Other program services (Describe on Schedule O.)		
-	(Expenses \$ including grants of \$) (Revenue \$)
	e Total program service expenses ► 2,596,700.	Form	990 (2020)
BAA	TEEA0102L 10/07/20	FUIII	JJU (ZUZU)

Form 990 (2020) GREATER YELLOWSTONE COALITION

			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	NO
2	Is the organization required to complete Schedule B. Schedule of Contributors See instructions?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8	Х	
9	Did the organization report an amount in Part X, line 21, 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? If 'Yes,' complete Schedule D, Part IV.	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, VII, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
	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
	d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
t	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)? If 'Yes,' complete Schedule D, Part X	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	Х	
I	• 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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ļ	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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
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? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	17		Х
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		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
ł	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	

BAA

Part IV Checklist of Required Schedules

Form 990 (2020) GREATER YELLOWSTONE COALITION
Part IV Checklist of Required Schedules (continued)

1 a				
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	Yes	No X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
	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	23 24a		Х
I	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		
	d 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
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	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? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
	a 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
I	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 lines 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? If 'Yes,' complete Schedule M	29	Х	
30	contributions? If 'Yes,' complete Schedule M.	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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
	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		X
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	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)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		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	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	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 36		Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 36 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0			
	\mathbf{c} Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c	Х	
BAA	TEEA0104L 10/07/20	Form	990 (2020)

⁸¹⁻⁰⁴¹⁴⁰⁴² Page 4

	14042	F	Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a	37		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		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?	3a		Х
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0	3b		
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)?	4a		Х
b If '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).			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	n 6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c 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 If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			Х
f 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?			
 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?. 			
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
 b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 			
c Enter the amount of reserves on hand			17
14a Did the organization receive any payments for indoor tanning services during the tax year?			Х
b If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation on Schedule O</i>	14b		<u> </u>
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
	10		Х
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		^

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 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.
 X

Sec	tion A. Governing Body and Management			
			Yes	No
1 a	a Enter the number of voting members of the governing body at the end of the tax year 1 a 21			
	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.			
	Enter the number of voting members included on line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
	members of the governing body?	7 a		Х
I	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	the following:			
	a The governing body?	8 a	X	<u> </u>
	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8 b	Х	<u> </u>
9	organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	ode.)
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
I	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	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
I	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
I	• Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
(bid the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was doneSEESCHEDULE . Q	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
i	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O.	15a	Х	
I	Other officers or key employees of the organization	15 b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a	a 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
I	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?	16 b		
-	List the states with which a copy of this Form 990 is required to be filed NONE			
	List the states with which a copy of this Form 990 is required to be filed ► <u>NONE</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5	01/01/		<u> </u>
18	available for public inspection. Indicate how you made these available. Check all that apply.	51(0)(3	<i>)</i> 5 UI	y)
10		hla +-		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year. SEE SCHEDULE O	of eig		
20	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			

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highe Independent Contractors	est Compensated Employee	s, and
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 Compens	sated Employees	
1 a Complete this table for all persons required to be listed. Report compensation for the calendar year endir organization's tax year.	5	
 List all of the organization's current officers, directors, trustees (whether individuals or organiz 	zations), regardless of amount of	

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

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

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See 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	n one s both dire	box, an c ector/	unles	· ·	on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1)	SCOTT CHRISTENSEN	40									
	EXECUTIVE DIR.	0			Х				132,022.	0.	21,743.
(2)	JANET OFFENSEND	5									
	BOARD CHAIR	0	Х		Х				0.	0.	0.
(3)	TAYA CROMLEY	3									
	VICE CHAIR	0	Х		Х				0.	0.	0.
(4)	PETE COPPOLILLO	3									
	SECRETARY	0	Х		Х				0.	0.	0.
(5)	ANDREW MOORE	3									
	TREASURER	0	Х		Х				0.	0.	0.
(6)	ABI_DEVAN	2									
	DIRECTOR	0	Х						0.	0.	0.
(7)	PATRICK_LAWLER_DOMINICK	2									
	DIRECTOR	0	Х						0.	0.	0.
(8)	MICHAEL GADSDEN	2									
	DIRECTOR	0	Х						0.	0.	0.
(9)	BEA GORDON	2									
	DIRECTOR	0	Х						0.	0.	0.
(10)	KITTY GRISWOLD	2									
	DIRECTOR	0	Х						0.	0.	0.
(11)	TOM JALKUT	2									
	DIRECTOR	0	Х						0.	0.	0.
(12)	CHRIS JOHNS	2									
	DIRECTOR	0	Х						0.	0.	0.
(13)	RICK_JOHNSON	2									
	DIRECTOR	0	Х						0.	0.	0.
(14)	XAVIER ROLET	2		II]				
	DIRECTOR	0	Х						0.	0.	0.
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Part VII Section A. Officer	s, Directors, Tru		Key	Em	-		es, a	and	d Highest Com	pensated Emp	loyee	S (cont	tinued)
		(B)			(0								
(A) Name and title		Average hours per week (list any hours	box offi	, unle cer ar	heck ss pe nd a c	erson directo	than is both pr/trus	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	comp the	(F) nated arr of other ensation organiza	n from ation
		for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	mer			a	nd relate ganizatio	ed
(15) <u>DIANA SIMMONS</u> DIRECTOR		<u>2</u> 0	Х						0.	0.			0.
(16) JANE SPENCER DIRECTOR		<u>2_</u>	X						0.	0.			0.
(17) GEORGIE STANLEY DIRECTOR		<u>2</u> 0	X						0.	0.			0.
(18) DAN VERMILLION DIRECTOR		<u>2</u> 0	X						0.	0.			0.
(19) NANCY WATERS		2	X										
DIRECTOR (20) DAN WENK		0							0.	0.			0.
DIRECTOR (21) JENNIFER WILSON		0	X						0.	0.			0.
DIRECTOR (22) TOM WINSTON		0	Х						0.	0.			0.
DIRECTOR (23)		0	X						0.	0.			0.
			•										
(24)			•										
(25)			•										
1 b Subtotal	<u>_</u>								132,022.	0.		21,	743.
c Total from continuation shee	ets to Part VII, Section	on A						•	0.	0.			0.
d Total (add lines 1b and 1c).									132,022.	0.			743.
2 Total number of individuals (inc from the organization ►	luding but not limited	to those I	isted	abov	ve) v	who	receiv	ved	more than \$100,00	0 of reportable com	pensatio	ึ่งท	
	1											Yes	No
3 Did the organization list any f on line 1a? If 'Yes,' complete	former officer, direct	tor, truste	ee, ke	ey er	nplo	oyee	, or	higł	nest compensated	employee	3		X
4 For any individual listed on line the organization and related of	ne 1a, is the sum of organizations greate	reportab r than \$1	le co 50,0	mpe 00?	nsa If 'γ	ition ′ <i>es,'</i>	and <i>com</i>	oth Iple	er compensation te Schedule J for	from			
<i>such individual</i>5 Did any person listed on line	1a receive or accrue	e comper	nsatio	n fr	oma	anv	unre	late	d organization or	individual		X	
for services rendered to the c Section B. Independent Cor	-	,' comple	ete So	ched	ule	J to	r suc	h p	erson		. 5	<u> </u>	Х
1 Complete this table for your f compensation from the organiza	five highest compens	sated ind sation for	epen the c	dent alen	cor dar y	ntrao year	ctors endii	tha ng v	t received more th vith or within the or	nan \$100,000 of ganization's tax yea	·.		
Nam	(A) e and business addr	ress							(B) Description of	of services	Comp	(C) ensatio	on
2 Total number of independent co \$100,000 of compensation fro			ited t	o tha	se l	istec	l abo	ve)	who received more	than			
		U											

Form 990 (2020) GREATER YELLOWSTONE COALITION Part VIII Statement of Revenue

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			(B)	(C)	(D)
		(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from under sectio 512-514
1	a Federated campaigns 1 a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1 d				
	e Government grants (contributions) 1e 398,100.				
	f All other contributions, gifts, grants, and similar amounts not included above 1 f 3,811,838. q Noncash contributions included in				
	lines 1a-1f				
	h Total. Add lines 1a-1f	4,209,938.			
	Business Code				
2	a				
	b				
	с				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f►				
3	Investment income (including dividends, interest, and other similar amounts)	150 010			150.0
	Income from investment of tax-exempt bond proceeds	159,819.			159,8
4	Royalties				
5	(i) Real (ii) Personal				
6	a Gross rents				
	b Less: rental expenses 6b				
	c Rental income or (loss) 6c 30,910.				
	d Net rental income or (loss)	30,910.			30,9
	(i) Sequrities (ii) Other	50,910.			30,9
	a Gross amount from sales of assets				
.	other than inventory 7a				
	b Less: cost or other basis and sales expenses 7b				
	c Gain or (loss) 7c				
	d Net gain or (loss)►				
	a Gross income from fundraising events				
	(not including \$				
	of contributions reported on line 1c).				
	See Part IV, line 18 8a				
	b Less: direct expenses 8b				
	c Net income or (loss) from fundraising events ►				
9	a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses 9b				
	c Net income or (loss) from gaming activities►				
	a Gross sales of inventory, less				
	b Less: cost of goods sold				
	c Net income or (loss) from sales of inventory				
1	Business Code				
11	a MISCELLANEOUS	8,537.			8,5
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d 🕨	8,537.			
		4,409,204.	0.		

Form 990 (2020) GREATER YELLOWSTONE COALITION

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 not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic dividuals See Part IV, line 22. 	603,629.	603,629.							
 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 									
 4 Benefits paid to or for members 5 Compensation of current officers, director trustees, and key employees 	ſS,	126,927.	12,280.	24,570.					
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	i 0.	0.	0.	0.					
7 Other salaries and wages	1,449,759.	1,072,200.	253,496.	124,063.					
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	00/1001	44,476.	10,632.	5,081.					
9 Other employee benefits	= 10 / 0 = 0 1	180,395.	41,981.	21,247.					
10 Payroll taxes	126,069.	93,630.	20,935.	11,504.					
11 Fees for services (nonemployees):									
a Management									
b Legal		352.	4,831.	3,121.					
c Accounting	= • / • • • •	462.	6,341.	4,097.					
d Lobbying									
e Professional fundraising services. See Part IV, line 12									
f Investment management fees	20/0110		20,844.						
g Other. (If line 11g amount exceeds 10% of line 25, col (A) amount, list line 11g expenses on Schedule 0.).	143,466.	118,032.	24,695.	739.					
12 Advertising and promotion		24,892.	2,088.	1,774.					
13 Office expenses	13,487.	5,995.	6,733.	759.					
14 Information technology	87,795.	69,284.	17,388.	1,123.					
15 Royalties									
16 Occupancy	62,662.	53,315.	5,650.	3,697.					
17 Travel	12,246.	11,698.	515.	33.					
18 Payments of travel or entertainment expenses for any federal, state, or local public officials									
19 Conferences, conventions, and meetings.									
20 Interest	20/0001	20,000.							
21 Payments to affiliates.									
22 Depreciation, depletion, and amortization.		72,148.	16,218.						
23 Insurance	26,234.		26,234.						
24 Other expenses. Itemize expenses not covered above (List miscellaneous expen on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24 expenses on Schedule O.)	e								
^a PRINTING AND PUBLICATIONS	51,884.	51,008.	854.	22.					
b POSTAGE AND SHIPPING	22,076.	20,916.	860.	300.					
c SUPPLIES	18,852.	13,878.	4,867.	107.					
d <u>DIRECT FUNDRAISING</u>				14,033.					
e All other expenses		13,463.	6,165.	569.					
25 Total functional expenses. Add lines 1 through 24e.		2,596,700.	483,607.	216,839.					
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 ► X if following SOP 98-2 (ASC 958-720)									
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Form 990 (2020) GREATER YELLOWSTONE COALITION Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing.		1	
	2	Savings and temporary cash investments	870,037.	2	824,428.
	3	Pledges and grants receivable, net	491,703.	3	50,700.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net.		7	
s	8	Inventories for sale or use.		8	
Assets	9	Prepaid expenses and deferred charges.		9	30,539.
As	-			5	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation	2,747,843.	10 c	2,421,438.
	11	Investments – publicly traded securities.	10,505,972.	11	12,558,146.
	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	10,474.	15	384,441.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	14,626,029.	16	16,269,692.
	17	Accounts payable and accrued expenses	60 101	17	71 100
	18	Grants payable	62,131.	18	74,498.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
Ľ	22			22	
	23	Secured mortgages and notes payable to unrelated third parties	1 200 100	23	1 000 000
	24 25	Unsecured notes and loans payable to unrelated third parties	1,398,100.	24	1,000,000.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	221,037.	25	215,981.
	26	Total liabilities. Add lines 17 through 25	1,681,268.	26	1,290,479.
es		Organizations that follow FASB ASC 958, check here ► X			
nc		and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	6,765,170.	27	8,506,532.
dE	28	Net assets with donor restrictions	6,179,591.	28	6,472,681.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
lss	31	Retained earnings, endowment, accumulated income, or other funds		31	
∋t /	32	Total net assets or fund balances	12,944,761.	32	14,979,213.
	33	Total liabilities and net assets/fund balances.	14,626,029.	33	16,269,692.
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Forn	1 990	(2020)	GREATER	R YELLOWSTONE COALITION 81-0	414042	2	Pa	ige 12
Pa	t XI	Reco	nciliation	of Net Assets				
		Check	if Schedule	O contains a response or note to any line in this Part XI				
1	Tota	l revenue	e (must equa	al Part VIII, column (A), line 12)	1	4,4	09,2	204.
2	Tota	l expense	es (must eq	ual Part IX, column (A), line 25)	2		97,1	
3	Reve	enue less	s expenses.	Subtract line 2 from line 1	3	1,1	12,0)58.
4	Net a	assets or	r fund balan	ces at beginning of year (must equal Part X, line 32, column (A))	4	12,9		
5	Net i	unrealize	ed gains (los	ses) on investments	5	9	22,3	394.
6	Dona	ated serv	vices and us	e of facilities	6			
7			•		7			
8	Prior	r period a	adjustments		8			
9	Othe	er change	es in net ass	ets or fund balances (explain on Schedule O)	9			0.
10	Net a colur	assets or mn (B)) .	fund balance	s at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	14,9	79 2	213
Pa				ements and Reporting			1972	110.
				O contains a response or note to any line in this Part XII				. П
							Yes	No
1	Acco	ounting m	nethod used	to prepare the Form 990: Cash X Accrual Other				
		e organiz chedule (ed its method of accounting from a prior year or checked 'Other,' explain				
28	Were	e the org	anization's f	inancial statements compiled or reviewed by an independent accountant?		2 a		Х
		arate bas		w to indicate whether the financial statements for the year were compiled or reviewed ated basis, or both: Consolidated basis Both consolidated and separate basis	d on a			
ł	Were	e the org	anization's f	inancial statements audited by an independent accountant?		2b	Х	
		s, consol	k a box belc idated basis te basis	w to indicate whether the financial statements for the year were audited on a separat , or both: Consolidated basis Both consolidated and separate basis	e			
C				es the organization have a committee that assumes responsibility for oversight of the audit, its financial statements and selection of an independent accountant?		2 c	Х	
	on S	chedule	0.	ed either its oversight process or selection process during the tax year, explain				
38				ard, was the organization required to undergo an audit or audits as set forth in the Single lar A-133?		3a		Х
ł				n undergo the required audit or audits? If the organization did not undergo the required audit Schedule O and describe any steps taken to undergo such audits		3 b		
BAA				TEEA0112L 10/19/20		Form	99 0	(2020)

SCHEDULE A (Form 990 or 990-EZ)

Total

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. ch to Er ► A++-000 000 E7

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection						Open to Public Inspection			
	of the organization						Employer identifica	ation number	
	ATER YELLOW	STONE COAL	LITION				81-041404		
Par	t I Reason fo	r Public Cha	rity Status. (All c	organizations must	comple	ete this	s part.) See instruc	tions.	
The of 1 2 3 4	 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 								
5	An organizati section 170(b	on operated for)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governmental unit de	escribed in	
6	A federal, sta	ite, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).		
7	X An organizatio	n that normally r 0(b)(1)(A)(vi).(eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pul	blic described	
8	A community	trust described	in section 170(b)(1)(A)(vi). (Complete Part	ll.)				
9				tion 170(b)(1)(A)(ix) oper (see instructions). Enter					
10	from activities investment in	s related to its e come and unre	exempt functions, sub	nan 33-1/3% of its supp oject to certain exceptio e income (less section Part III.)	ns; and	(2) no r	more than 33-1/3% of it	is support from gross	
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).								
12 a	or more publi lines 12a thro Type I. A supp organization(s	cly supported o ough 12d that de orting organizati	rganizations describe escribes the type of s on operated, supervise gularly appoint or elect	ely for the benefit of, to ed in section 509(a)(1) of upporting organization d, or controlled by its sup a majority of the directo	or sectio and com oported c	n 509(a plete li rganizat)(2). See section 509(a nes 12e, 12f, and 12g. ion(s), typically by giving)(3). Check the box in the supported	
b	management	oporting organiz of the supporting te Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organizat	having control or ion(s). You	
С	organization(onally integrated s) (see instructi	. A supporting organizat ons). You must com	ion operated in connectio	n with, aı A, D, an	nd functi d E.	onally integrated with, its	supported	
d		inctionally integ ntegrated. The o You must com	rated. A supporting org organization generally plete Part IV, Section	anization operated in cor must satisfy a distribu s A and D, and Part V.	nnection tion req	with its s uiremen	supported organization(s) t and an attentiveness) that is not requirement (see	
e	Check this bo integrated, or	ox if the organiz Type III non-fu	ation received a writt inctionally integrated	en determination from supporting organization	the IRS				
			organizations n about the supported						
	(i) Name of supported of	-	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed overning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No	•		
(A)									
<u>(B)</u>	(B)								
(C)									
<u>(D)</u>									
(E)	(E)								

Schedule A (Form 990 or 990-EZ) 2020 (-	GREATER	YELLOWSTONE	COALITION
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	I I							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do pation of the second s	3,840,645.	4,021,620.	2,337,977.	3,717,848.	3,811,837.	17,729,927.	
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	Total. Add lines 1 through 3	3,840,645.	4,021,620.	2,337,977.	3,717,848.	3,811,837.	17,729,927.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						5,409,309.	
6	Public support. Subtract line 5 from line 4						12,320,618.	
Sec	tion B. Total Support							
	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
7	Amounts from line 4	3,840,645.	4,021,620.	2,337,977.	3,717,848.	3,811,837.	17,729,927.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	118,767.	162,933.	155,702.	201,045.	190,785.	829,232.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	82,666.	8,229.	21,469.			112,364.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	17,121.	8,938.	29,743.	53,301.	8,537.	117,640.	
	Total support. Add lines 7 through 10						18,789,163.	
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	1,723,646.	
13	First 5 years. If the Form 990 is organization, check this box and						►	
Sec	tion C. Computation of Pu	blic Support P	ercentage					
14	Public support percentage for 20	020 (line 6, colum	n (f), divided by li	ne 11, column (f))	14	65.57%	
15	Public support percentage from	2019 Schedule A,	Part II, line 14			15	65.44%	
16a	6a 33-1/3% support test-2020. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization► X							
b	33-1/3% support test-2019. If the and stop here. The organization	ne organization die n qualifies as a pu	d not check a box blicly supported c	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box ·····►	
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test, check this I	box and stop here	. Explain in Part	VI how	
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the facts-a d-circumstances'	nd-circumstances test. The organization	s test, check this lation qualifies as	box and stop here a publicly support	e. Explain in Part ed organization.	VI how the	
18	Private foundation. If the organi	zation did not che	ск а box on line	13, 16a, 16b, 17a	, or 1/b, check th	is box and see in:	structions P	
BAA					Sc	hedule A (Earm 9	90 or 990-EZ) 2020	

Schedule A (Form 990 or 990-EZ) 2020

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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.) D. I.I.

Sec	tion A. Public Support						
	lar year (or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services						
	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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	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	stop here		third, fourth, or f	ifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pu	blic Support F	Percentage				
15	Public support percentage for 20	020 (line 8, colum	n (f), divided by li	ne 13, column (f))	15	00
-	11 1 5				<u></u>	16	010
Sec	tion D. Computation of Inv	estment Incol	ne Percentage	e			
17	Investment income percentage f	or 2020 (line 10c,	column (f), divide	ed by line 13, col	umn (f))	17	0\0
18	Investment income percentage f	rom 2019 Schedu	lle A, Part III, line	17		18	0/0
19a	33-1/3% support tests—2020. If is not more than 33-1/3%, check						
b	33-1/3% support tests — 2019. If the line 18 is not more than 33-1/3%	the organization o	lid not check a bo	x on line 14 or lir	ne 19a, and line 1	6 is more than 33-	1/3%, and
20	Private foundation. If the organi		•	• ·			
	· · · · 9-····		-				

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, 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 Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If 'No,' describe in Part VI 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 Part VI how the organization determined that the supported organization was 2 described in section 509(a)(1) or (2). 3a 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 **Part VI** when and how the organization made the determination. 3b c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use. 3c 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 Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Δh **c** 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 **Part VI** 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 Part VI, 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 c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 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 6 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of 6 the filing organization's supported organizations? If 'Yes,' provide detail in Part VI. 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 or 990-EZ). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' 8 complete Part I of Schedule L (Form 990 or 990-EZ). 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 Part VI. 9a **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in Part VI.* 9b c Did a disqualified person (as defined in 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 Part VI.* 9c 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, and all Type III non-functionally integrated 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.). 10b

Part IV Supporting Organizations (continued)			
		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a		
b A family member of a person described in line 11a above?	11b		
C A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c		

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization (s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

Section C. Type II Supporting Organizations

Yes 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1

Section D. All Type III Supporting Organizations

			Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the						
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1					
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how						
	the organization maintained a close and continuous working relationship with the supported organization(s).	2					
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played						
	in this regard.						

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a 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 The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in **Part VI**.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

2b

3a

3h

Yes

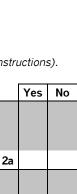
1

2

No

No

81-0414042



Schedule A (Form 990 or 990-EZ) 2020 GREATER YELLOWSTONE COALITION Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

81-0414042

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1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on N ns mu	lov. 20, 1970 (explain ir ist complete Sections A	l Part VI). See through E.
ec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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		
ec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		

u	A werage monthly value of securities	iu	
b	Average monthly cash balances	1b	
С	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	
ec	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	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

BAA

Schedule A (Form 990 or 990-EZ) 2020

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Si	upporting Organiza	ations (continue	ed)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	1			
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of su	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required – provide	datails in Part VA		5	
6	Other distributions (describe in Part VI). See instructions.	e details in Fait VI)		6	
7	······································			7	
8	Distributions to attentive supported organizations to which the organizati	on is responsive (provide	details		
	in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2020	ons	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
-	PFrom 2016				
-	From 2017				
	From 2018				
e	• From 2019				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ŀ	Applied to 2020 distributable amount				
	i Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
Ł	Applied to 2020 distributable amount				
C	: Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2020. 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 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
L	Excess from 2017				
C	Excess from 2018				
	Excess from 2019				
e	Excess from 2020				

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Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form	n 990 or 990-EZ) 2020	GREATER YELL	OWSTONE COALITI	ON 8	31-0414042	Page 8
Part VISupplemental 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,			2010	2020	ͲϽͲϪΤ	

 2016	. <u> </u>	2017	 2018		 2019	 2020		TOTAL
\$ 0.	\$	500,000.	\$	0.	\$ 431,753.	\$ 398,100. \$	3	1,329,853.

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE			2020		2019		2018		2017		2016
MISCELLANEOUS	TOTAL	\$ \$	8,537. 8,537.	\$ \$	53,301. 53,301.	\$ \$	29,743. 29,743.	\$ \$	8,938. 8,938.	\$ \$	17,121. 17,121.

SCHE	EDL	JLI	Ξ	С	
(Form	990	or	99	9 0 -	EZ)

Political Campaign and Lobbying Activities

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

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.

Open to Public Inspection

OMB No. 1545-0047

	-	on Form 990, Part IV, line 3, or Form 990-EZ, I	•	l Campaign Activities), tl	hen
		is: Complete Parts I-A and B. Do not comp		De met eenmelete Dert I	D
	Section 501(c) (other than sec Section 527 organizations: Co	ction 501(c)(3)) organizations: Complete Pa molete Part I-A only	ans I-A and C below.	Do not complete Part I	-В.
	-	on Form 990, Part IV, line 4, or Form 990-EZ, I	Part VI. line 47 (Lobbvi	ng Activities), then	
		that have filed Form 5768 (election under sect			e Part II-B.
• :		is that have NOT filed Form 5768 (election			
(Pro	xy Tax) (See separate instruc		(See separate instrue	ctions) or Form 990-EZ	, Part V, line 35c
-		organizations: Complete Part III.			
	of organization			Employer identific	
	EATER YELLOWSTONE C	rganization is exempt under section	on EO1(a) artic a	81-041404	
					28000.
	(See instructions for definition	organization's direct and indirect political on of 'political campaign activities')	1 0		
2	Political campaign activity ex	xpenditures (See instructions)		▶\$	
3	Volunteer hours for political	campaign activities (See instructions)			
Pa	rt I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	▶\$	0.
2	Enter the amount of any exc	cise 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	Was a correction made?		-		Yes No
	b If 'Yes,' describe in Part IV.				
		rganization is exempt under section	on 501(c) excen	t section 501(c)(3)	
1	-	pended by the filing organization for section			
2	Enter the amount of the filin	g organization's funds contributed to other	organizations for sec	tion	
	527 exempt function activitie	es		►\$	
3		ditures. Add lines 1 and 2. Enter here and		►\$	
4	Did the filing organization file	e Form 1120-POL for this year?			
5		and employer identification number (EIN)			
5	organization made payments amount of political contribution	s. For each organization listed, enter the a hs received that were promptly and directly de al action committee (PAC). If additional spa	mount paid from the livered to a separate p	filing organization's fun plitical organization, such	ds. Also enter the as a separate
	(a) Name	(b) Address	(c) 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 (Fo	rm 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020 GREATER	YELLOWSTONE	COALITION
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Schedule C (Form 990 or 990-EZ) 2020 GREATER YELLOWSTONE COALITION	4042 Page 2	
Part II-A Complete if the organization is exempt under section 501(c)(3) and section 501(h)).	filed Form 5768 (e	lection under
 A Check ► if the filing organization belongs to an affiliated group (and list in Part IV each affilia address, EIN, expenses, and share of excess lobbying expenditures). B Check ► if the filing organization checked box A and 'limited control' provisions apply. 	ated group member's nam	le,
Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grassroots lobbying)	11,398.	

a Total lobbying expenditures to influence	public opinion (grassroots lobbying)	11,398.	
b Total lobbying expenditures to influence	a legislative body (direct lobbying)	6,018.	
c Total lobbying expenditures (add lines 1a	a and 1b)	17,416.	
d Other exempt purpose expenditures		2,812,341.	
e Total exempt purpose expenditures (add	lines 1c and 1d)	2,829,757.	
f Lobbying nontaxable amount. Enter the a	amount from the following table in		
		291,488.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
${\bf g} {\rm Grassroots} $ nontaxable amount (enter 25	% of line 1f)	72,872.	
-	% of line 1f) ess, enter -0	72,872.	

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

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total			
2 a Lobbying nontaxable amount	310,908.	326,497.	326,975.	291,488.	1,255,868.			
b Lobbying ceiling amount (150% of line 2a, column (e))					1,883,802.			
c Total lobbying expenditures	167,213.	70,319.	19,206.	17,416.	274,154.			
d Grassroots nontaxable amount	77,727.	81,624.	81,744.	72,872.	313,967.			
e Grassroots ceiling amount (150% of line 2d, column (e))					470,951.			
f Grassroots lobbying expenditures	24,167.	3,894.	13,488.	11,398.	52,947. m 990 or 990-F7) 2020			

Schedule C (Form 990 or 990-EZ) 2020

5

Schedule C (Form 990 or 990-EZ) 2020 GREATER YELLOWSTONE COALITION 81-0414042 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). Part II-B

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b)		
of the lobbying activity.	Yes	No	Am	ount	
 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? 					
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? 					
 e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any 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 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 section 501(c)(6).	(c)(5)	, or			
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 			2	Yes No	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5)	, or s	ection 5)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 Carryover from last year		2 b			
c 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 next year?		4			

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).....

OMB No 1545-0047 Supplemental Financial Statements SCHEDULE D 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. (Form 990) 20 **Open to Public** Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number GREATER YELLOWSTONE COALITION 81-0414042 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). 2 3 Aggregate value of grants from (during year). Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring 6 No impermissible private benefit?..... Yes Part II **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a gualified conservation contribution in the form of a conservation easement on the 2 last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements..... 2 b c Number of conservation easements on a certified historic structure included in (a)..... 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► 4 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, 5 and enforcement of the conservation easements it holds?..... Yes No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)?..... Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for 9 conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: ►Ś (i) Revenue included on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... ►\$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

BAA For Paperwork	Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L	08/18/20 Sch	edule D (
b Assets included	1 in Form 990, Part X		•••••	\$
a Revenue includ	ed on Form 990, Part VIII, line 1		••••••	\$

Schedule D (Form 990) 2020

<u>10,000.</u> 10,000.

Schedule D (Form 990) 2020 GREAT	ER YELLOWSTON	NE COALITIC	ON		81-0414	4042	Page 2				
Part III Organizations Mainta	ning Collections	of Art, Histo	rical	Treasures, or	Other Similar Asso	ets (contir	nued)				
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):											
a Public exhibition		d 🗌 Loan d	or excl	hange program							
b Scholarly research		e Other									
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 organiza to be sold to raise funds rather the	tion solicit or receive an to be maintained	donations of art	t, histo roaniz	orical treasures, or ation's collection?.	other similar assets	X Yes	No				
Part IV Escrow and Custodia line 9, or reported an	Arrangements.	Complete if the	he or	ganization ans							
1 a Is the organization an agent, trus		· · ·			accate not included						
on Form 990, Part X?						Yes	No				
b If 'Yes,' explain the arrangement	in Part XIII and com	plete the followir	ng tab	le:		-					
						Amount					
c Beginning balance											
d Additions during the year											
e Distributions during the year											
f Ending balance2a Did the organization include an a						Vaa					
b If 'Yes,' explain the arrangement							No				
D in res, explain the analygement		ere ii the explain	alion	nas been provided							
Part V Endowment Funds. C	omplete if the or	nanization an	swer	ed 'Yes' on For	m 990 Part IV lin	e 10					
	(a) Current year	(b) Prior year		(c) Two years back	(d) Three years back	(e) Four ye	ars back				
1 a Beginning of year balance	3,571,328.	3,324,0		3,283,351			2,990.				
b Contributions	0,0,1,010	0,011,01		0,200,001							
c Net investment earnings, gains, and losses	664,228.	357,2	33.	140,744	. 235,153.	345	5,208.				
d Grants or scholarships	,	,		,	,		,				
e Other expenditures for facilities and programs	135,000.	110,0	00.	100,000	. 0.	110	0,000.				
f Administrative expenses											
g End of year balance	4,100,556.	3,571,3		3,324,095		3,048	3,198.				
2 Provide the estimated percentage	-	end balance (line	e 1g, i	column (a)) held a	S:						
a Board designated or quasi-endowm		0									
b Permanent endowment	51.00 %										
	<u>9.00</u> %										
The percentages on lines 2a, 2b, ar	nd 2c should equal 100	1%.									
3 a Are there endowment funds not in t	he possession of the o	rganization that a	re helo	d and administered f	or the	Yes	Ne				
organization by: (i) Unrelated organizations						3a(i) X	No				
(ii) Related organizations						3a(i) A	X				
b If 'Yes' on line 3a(ii), are the rela						3b	A				
4 Describe in Part XIII the intended	-	•				55					
Part VI Land, Buildings, and					<u> </u>						
Complete if the organi		'Yes' on Forn	n 990), Part IV, line	11a. See Form 990	D. Part X.	line 10.				
Description of property	(a) Cost	t or other basis vestment)	(b)	Cost or other asis (other)	(c) Accumulated depreciation	(d) Book					
1 a Land	`		~	600,000.		60	0,000.				
b Buildings				2,426,140.	642,434.		3,706.				
c Leasehold improvements				,,,		-,	_ ,				
d Equipment				181,578.	143,846.	3	7,732.				
e Other						0	,				
Total. Add lines 1a through 1e. (Column	n (d) must equal For	m 990, Part X, c	columr	n (B), line 10c.)	•••••	2,42	1,438.				
BAA					Schedu	ule D (Form 9					

Schedule	D (Form 990) 2020 GREATER YELLOWSTON	NE COALITION	81-041	4042 Page 3
Part VII	Investments – Other Securities. Complete if the organization answered	l 'Yes' on Form 990	N/A). Part IV. line 11b. See Form 99	90. Part X. line 12.
(a) Desc	cription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	
(1) Financ	cial derivatives			
(2) Closel	y held equity interests			
(3) Other				
(A)				
(B)				
(C) (D)				
(D) (E)				
<u>(F)</u>				
(G)				
(H)				
()				
Total. (Colur	mn (b) must equal Form 990, Part X, column (B) line 12.) 🕨			
Part VIII	Investments – Program Related.		N/A	
	Complete if the organization answered (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	
(1)	(a) Description of investment			or-year market value
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10) Tatal (0a/w	(h) much and [Same 000, Dark V, salara (D) line 12.)			
Part IX	mn (b) must equal Form 990, Part X, column (B) line 13.) ► Other Assets.	IN/A		
	Complete if the organization answered	I 'Yes' on Form 990), Part IV, line 11d. See Form 9	30, Part X, line 15.
(4)	(a) De	scription		(b) Book value
(1)				
(2) (3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)				
(10)				
	olumn (b) must equal Form 990, Part X, column (l	B) line 15.)	>	
Part X	Other Liabilities.			
	Complete if the organization answered 'Yes' on F		1e or 11f. See Form 990, Part X, line 25.	
1.	eral income taxes	iption of liability		(b) Book value
	IPENSATED ABSENCES			93,894.
	T ANNUITY OBLIGATION			68,100.
(4) REI	TIREMENT CONTRIBUTIONS PAYABLE			53,987.
(5)				
(6)				
(7) (8)				
(9)				
(10)				
(11)				
Total. (Colur	mn (b) must equal Form 990, Part X, column (B) line 25.)	·····	· · · · · · · · · · · · · · · · · · ·	215,981.
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text of the fo	otnote to the organization's fu	nancial statements that reports the organization's I	iability for uncertain

tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2020 GREATER YELLOWSTONE COALITION	81-041404	12 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return.	
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	5,310,754.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	94.	
b Donated services and use of facilities 2b		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d.	2e	922,394.
3 Subtract line 2e from line 1	3	4,388,360.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 20, 84	44.	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	20,844.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	20,844.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	3,276,302.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		-, -,
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1.	3	3,276,302.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		5,270,302.
a Investment expenses not included on Form 990, Part VIII, line 7b	14	
b Other (Describe in Part XIII.)	<u></u>	
c Add lines 4a and 4b.	4c	20,844.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	3,297,146.
Part XIII Supplemental Information.	· ·	

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, 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

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 BAA Schedule D (Form 990) 2020

Page 5

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

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.

Inspection

X Yes

Internal Revenue Service Name of the organization

Department of the Treasury

GREATER YELLOWSTONE COALITION

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

	5 1		• •	•		•	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TOM MINER BASIN ASSOC							
527 TOM MINER CREEK ROAD							SUPPORT FOR
EMIGRANT, MT 59027	47-2837284		7,500.	0.	CASH VALUE		RANGE RIDER
(2) WY WILDLIFE/NATURAL RSC TRUST							SUPPORT FOR
2300 CAPITAL AVE ST 161C							WILDLIFE
CHEYENNE, WY 82002	83-0208667		100,000.	0.	CASH VALUE		CROSSING
(3) USDA FOREST SERVICE							SUPPORT FOR
PO BOX 6200-09							CLOSED ROADS
PORTLAND, OR 97228			125,000.	0.	CASH VALUE		PROJECT
(4) LEGACY PHILANTHROPY							
521 SANTA BARBARA STREET							ELK OCCUPANCY
SANTA BARBARA, CA 93101	47-2584632		31,129.	0.	CASH VALUE		AGREEMENT
(5) USDA, APHIS							
PO_BOX_979043							SUPPORT FOR
ST LOUIS, MO 63197			15,000.	0.	CASH VALUE		WILDLIFE MGMT
(6) CENTENNIAL VALLEY ASSOCIATION							
PO_BOX 1151							SUPPORT FOR
DILLON, MT 59724	20-2063285		7,500.	0.	CASH VALUE		RANGE RIDERS
(7) YELLOWSTONE FOREVER							BISON
222 EAST MAIN ST #301							RESTORATION
BOZEMAN, MT 59715	47-5427975		250,000.	0.	CASH VALUE		PROJECT
(8) BUFFALO CENTER OF THE WEST							BEYOND
720 SHERIDAN AVENUE							YELLOWSTONE
CODY, WY 82414	83-0180403		25,000.		CASH VALUE		PROGRAM
2 Enter total number of section 501(c)(3)						••••••	
3 Enter total number of other organization						• • • •	. [
BAA For Paperwork Reduction Act Notice,	see the Instructions	for Form 990.		TEEA3901L	07/15/20	Schee	lule I (Form 990) 2020

Employer identification number 81-0414042

OMB No. 1545-0047 2020

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No

Schedule I (Form 990) 2020 GREATER YELLOWSTONE COALITION

81-0414042

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

Continuation Sheet for Schedule I (Form 990)

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 1

Name of the organization

GREATER YELLOWSTONE COALITION

Employer identification number 81-0414042

Part II Continuation of Grants an	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
<u>WESTERN ECOSYSTEMS TECHNOLOGY</u> <u>415 W 17 ST, SUITE 200</u> CHEYENNE, WY 82001	83-0294092		15,000.		CASH VALUE		CARTER MOUNTAIN STUDY		
<u>IDAHO DEPT OF FISH AND GAME</u> <u>3726 HIGHWAY 20</u> ISLAND PARK, ID 83429			10,000.		CASH VALUE		GRIZZLY CONFLICT RESOLUTION		
<u>GATEWAY ARCH & FENCE</u> <u>1840 HIGH FLAT ROAD</u> BOZEMAN, MT 59718	68-0545428		7,500.		CASH VALUE		FENCING ON THE PETRICH RANCH		

TEEA4001L 07/15/20

2020

SCHEDULE J	
(Form 990)	

Compensation Information

OMB No. 1545-0047

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.

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Department of the Treasury Internal Revenue Service	 Attach to Form 950. Go to www.irs.gov/Form990 for instructions and the latest information 	on.
Name of the organization	E	Emp

Name of the organization
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	1b		
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			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	e		
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?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	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:			
a	The organization?	5a		Х
b	Any related organization?	5 b		Х
	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:			
	The organization?	6a		Х
b	Any related organization?	6b		Х
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		v
_				Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.	8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			
BAA	For Paperwork Reduction Act Notice, see the Instructions for Form 990. Sche	edule J (Forn	n 99 0)	2020

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.

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Detirement		(E) Total of	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
SCOTT CHRISTENSEN	(i)	122,022.	10,000.	0.	<u>5,593.</u>	16,150.	<u> 153,765</u> .	0.
1 EXECUTIVE DIR.	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
2	(ii)							
2	(i)						+	
3	(ii)							
4	(i) (ii)		+		+		+	
4	(i)							
5	(i) (ii)		+				+	
<u> </u>	(i)							
6	(ii)		+		+		+	
	(i)							
7	(ii)				+		+	
	(i)							
8	(ii)						+	
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
<u>11</u>	(ii)							
	(i)							
12	(ii)							
12	(i)						+	
13	(ii)							
14	(i) (ii)		+		+		+	
	(ii) (i)							
15	(i) (ii)		+		+		+	
	(i)							
16	(i) (ii)		+		+		+	
BAA			TEEA4102L 09/25	/20	1	1	Schedule	J (Form 990) 2020

81-0414042

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.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

► Co	mplete if the organizations answered	d 'Yes'	on Form 990,	Part IV, lines 29 or 30.
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► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

81-0414042

Department of the Treasury Internal Revenue Service Name of the organization

GREATER YELLOWSTONE COALITION

Pai	t I Types of Property						
<u></u>	•	(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	(d) od of determi contribution	ining amounts
1	Art – Works of art	Х	1	10,000.	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		9	48,930.	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► ()						
26	Other► ()						
27	Other► ()						
28	Other► ()						
29	Number of Forms 8283 received by the organization or organization completed Form 8283, Part V, Done				29		
						Yes	No
20-	During the year, did the organization receive by contr	ibution any n	conarty reported in Part I	lines 1 through 28 that			
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used							
	for exempt purposes for the entire holding period					30 a	Х
b	If 'Yes,' describe the arrangement in Part II.						
31	31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?					31	Х
32a	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?					32a	x
b	If 'Yes,' describe in Part II.						
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.					ked,		

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

Schedule M (Form 990) 2020

81-0414042 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.

Page 2

SCHEDULE O (Form 990 or 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. 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 SESSION. 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. IN ADDITION, THE IRS DETERMINATION LETTER, AUDITED FINANCIAL STATEMENTS AND FORMS 990 ARE POSTED ON THE ORGANIZATION'S WEB SITE.