

** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For th	e 2020 calendar year, or tax year beginning a	na enaing		
В	Check if applicab	C Name of organization		D Employer identifi	cation number
	Addre	e CHEETAH CONSERVATION FUND		The second secon	
	Name chan	Doing business as		31-17269	23
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
	Final	200 DAINGERFIELD RD	200	866-909-	
/ 23	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,672,883.
	Amer	ALEXANDRIA, VA 22314		H(a) Is this a group re	
	Appli tion pend	F Name and address of principal officer: 505AN UANTIN		for subordinates	
_	THE VICTORIA	SAME AS C ABOVE		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)	(1) or 527	-	list. See instructions
		te: WWW.CHEETAH.ORG		H(c) Group exemptio	
		forganization; X Corporation Trust Association Other	L Year	of formation: 2000	M State of legal domicile; VA
Р	_	Summary	ד חמגמי	TT TIND 1	
ce	1	Briefly describe the organization's mission or most significant activities: ${\color{red} {\tt SEE}}$	PART	III, LINE I.	
nan	_	Oh at at a transfer of the attention of the attention of the		than OEO/ of its not o	
Activities & Governance	2	Check this box if the organization discontinued its operations or dis Number of voting members of the governing body (Part VI, line 1a)			15
	3	Number of independent voting members of the governing body (Part VI, line 1a)			14
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			13
	6	Total number of volunteers (estimate if necessary)			150
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
A		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		4,072,682.	3,898,267.
	9	Program service revenue (Part VIII, line 2g)		0.	0.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		36,180.	49,326.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,492.	24,337.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	4,120,354.	3,971,930.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,749,120.	1,290,183.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	0)	804,681.	862,738.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
×	b	Total fundraising expenses (Part IX, column (D), line 25) 269,		700 510	024 621
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		702,510. 3,256,311.	834,621.
	1865	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		864,043.	2,987,542. 984,388.
- 9	19	Revenue less expenses. Subtract line 18 from line 12			TORIN EN DARROY
sets or	200	Tatal access (Doct V. See 10)	Ве	ginning of Current Year 2,677,376.	End of Year 3,773,354.
ASSE	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		226,764.	258,820.
Net Ass Fund Bal	22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		2,450,612.	3,514,534.
		Signature Block			
		lities of perjury, I declare that I have examined this return, including accompanying sched	ules and statem	ents, and to the best of m	y knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of			
		Ida Illa			
Sig	n	Signature of officer / Dem		Date	
He	re	HELEN CHAIKOVSKY, TREASURER		7/20/	21
		Type or print name and title			
		Print/Type preparer's name Preparer's signature /	-	08/30/2021 Check L	PTIN
Pai			Deadlo	self-employe	
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN ▶	52-1392008
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N			01) 051 0000
		BETHESDA, MD 20814-2930		Phone no. (3	01) 951-9090
Ma	v the If	RS discuss this return with the preparer shown above? See instructions			X Yes No

Page 2

Pa	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE CHEETAH CONSERVATION FUND'S MISSION IS TO ENSURE THE LONG-TERM
	SURVIVAL OF THE CHEETAH AND ITS ECOSYSTEM THROUGH A MULTI-DISCIPLINED
	AND INTEGRATED PROGRAM OF RESEARCH AND EDUCATION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,400,179. including grants of \$ 1,290,183.) (Revenue \$ 2,438.)
	THE CHEETAH CONSERVATION FUND PROMOTES PUBLIC AWARENESS AND EDUCATION
	THROUGH LECTURE TOURS, PUBLICATIONS, REGIONAL VOLUNTEER "CHAPTERS" AND
	FUNDRAISING ACTIVITIES, WHICH BRING THE PLIGHT OF THE WILD CHEETAH TO
	THE PUBLIC'S ATTENTION. THESE ACTIVITIES OCCUR LARGELY IN THE UNITED
	STATES, BUT ALSO OCCASIONALLY IN OTHER COUNTRIES.
	IN ADDITION, THE CHEETAH CONSERVATION FUND PROMOTES SUPPORT AND
	COOPERATION WITH OTHER ORGANIZATIONS AND THEIR ACTIVITIES TO RAISE
	PUBLIC AWARENESS, DISSEMINATE INFORMATION AND PROVIDE EDUCATIONAL
	ACTIVITIES ABOUT THE PLIGHT OF THE CHEETAH IN THE WILD, ASSOCIATED
	THREATENED WILDLIFE, AND THEIR HABITATS.
	THREATENED WILDDIFE, AND THEIR HADITATO:
4b	(Code:) (Expenses \$
TU	(Code
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	, (Joseph Language Control of Con
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 2,400,179.
	Form 990 (2020)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			٦,
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
•	Schedule D, Part III	8		
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?	_		x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	Х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10	21	
11	as applicable.			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	0.414	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	114		
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	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	11c		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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		v	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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	45	Х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	21	
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
''	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	···		
.5	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
	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

Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		1.55	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			х
24.5	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
2 4 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		X
06	Schedule L, Part I	25b		<u> </u>
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</i> "Yes," <i>complete Schedule L, Part II</i>	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?			x
00	"Yes," complete Schedule L, Part IV	28c 29	X	
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	122	
30	contributions? If "Yes," complete Schedule M	30	x	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	GCC		
30	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
_			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 50	_		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	(gambling) winnings to prize winners?	1c	Х	
	(3			

032004 12-23-20

Form 990 (2020) CHEETAH CONSERVATION FUND Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a 139 b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1 and 2a is greater than 50, you may be required to effect eigen instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes, *has it filed a Form 990-T for this year? if Ye' to fire 3b, provide an explanation on Schedule 0 3c If Yes, *has it filed a Form 990-T for this year? if Ye' to fire 3b, provide an explanation on Schedule 0 3d All any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account; in a toregin country. Such if Yes, *to the the name of the foreign country. Such if Yes, *to the the name of the foreign country. So if Yes, *to the hard the name of the foreign country. So if Yes, *to the hard the hard the foreign country if yes instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Se if Yes Yes and the organization that it was or is a party to a prohibitot as where the support of the party of the probability of the proparation foreign Bank and Financial Accounts (FBAR). So If Yes, *to the se do yet, did the organization have annual gross recepts that are normally greater than \$100,000, and did the organization shall an explanation include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 organizations that may receive deductible contributions under section 170(c). 8 of the foreign the proparation or the proparation foreign the party of the proparation or the proparation or						Yes	No
b If a least one is reported on line 2a, did the organization file alrequired federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a ID if the organization have unrelated business goes income of \$1,000 or more during the year? 3b ID if Yes, Thas I filed a form 950°F for this year? If Yes' to line 3b, provide an explanation on Schedule 0 3b If Yes, Thas I filed a form 950°F for this year? If Yes' to line 3b, provide an explanation on Schedule 0 3c ID if Yes, Thas I filed a form 950°F for this year? If Yes' to line 3b, provide an explanation on Schedule 0 3c ID if Yes, Thas I filed a form 950°F for this year? If Yes' to line 3b, provide an explanation on Schedule 0 3c ID if Yes, That I filed a form 950°F for Schedule N 3c If Yes' to line the name of the foreign country. 5c If Yes' to line 5a or 5b, did the organization that It was or is a party to a prohibitot as whether transaction? 5c If Yes' to line 5a or 5b, did the organization that It was or is a party to a prohibitot as whether transaction? 5c If Yes' to line 5a or 5b, did the organization that It was or is a party to a prohibitot as whether transaction? 5c If Yes' to line 5a or 5b, did the organization in charge that I was or is a party to a prohibitot as whether transaction? 5c If Yes' to line 5a or 5b, did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of exhibitations and express statement that such contributions or gifts were not tax deductibles of exhibitation and express statement that such contributions or gifts were no tax deductibles of exhibitation and express statement that such contributions or gifts were not tax deductibles of exhibitation and express statement that such contributions or gifts were not tax deductibles of exhibitation and the state of the goods or services provided? 5c If Yes, I did the organization inceived any	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Γ			
Note: If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return	2a	13			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has tifled a Form 9907 for this year of "Wo" to fine 3b, promotive an explanation on Schedule O 4a 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 accounts (FBAF). 5b If "Yes," either the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAF). 5c In "Yes" to line Sar o Sb, did the foreign country (such as a bank account, securities account, or other financial accounts (FBAF). 5c In "Yes" to line Sar o Sb, did the organization file Form 88867 to 1"Yes" to line Sar o Sb, did the organization the organization the Form 88867 to 1"Yes" to line Sar o Sb, did the organization the organization the security of the organization that it was or is a party to a prohibited tax shelter transaction? 6a Dest 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? 7c Organization than any receive deductible contributions under section 170(c). 8d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(c). 8 If "Yes," indicate the number of forms 8882 filed during the year. 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 88897. 9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1907. 1 If the organization received a contribution of qualified intellectual property, did the organization file Form 1907. 1 If the organization received a contribution of a pusified intellectual prope	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ทร?		2b	Х	
b If Yes, "has it filed a Form 990 T for this year? If "No" to line 3b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? A b If Yes, "enter the name of the foreign country [such as a bank account, securities account, or other financial accounts? 5b If Yes, "enter the name of the foreign country [such as a bank account, securities account, or other financial accounts (FBAR). 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization state any contributions that were not tax deductible as charitable contributions? 6c Were not tax deductible? 7 Organizations that may receive deductible contributions an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization network appearint access of \$15 made party as contribution any party for goods and services provided? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization network any party of the one of the value of the goods or services provided? 7 Organizations that may receive deductible contributions and party for goods and services provided to the payor? 7a X b If Yes, "Indicate the number of Forms 8282? filed during the year 1 Did the organization received an contribution of underty, to pay premiums on a personal benefit contract? 7 To X 7 If If Wes, "Indicate the number of Forms 8282 filed during the year 8 Sponsoring organization received a contribution of underty, to pay premiums on a personal benefit contract? 7 To X 9 If the organization received an ornitrobin of suitable definition		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
4a A any time during the calendary year, dot 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 accounts (FBAR). b If "Yes," enter the name of the foreign country ▶ 5a Was the organization party to a prohibited tax shelter transaction? 5b Was the organization to party to a prohibited tax shelter transaction? 5c If "Yes" to lie So or 5b, did the organization the fire m88867 or 1" or	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		<u>[</u>	За		Х
the interval of the contributions of the financial account, or other financial account)? b if 1'Yes, 'return the name of the foreign country	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		
b If "Yes," enter the name of the foreign country ▶ Sae instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization of party to a prohibited tax shelter transaction at any time during the tax year? 5b I/ Was the organization hose party to a prohibited tax shelter transaction? 5c If "Yes" to line Sar of Sb, of the organization file Form 8868-77 Sc 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organizations that may receive deductible contributions under section 170(c). 8b If "Yes," did the organization norify the donor of the value of the goods or services provided? 9b If "Yes," did the organization norify the donor of the value of the goods or services provided? 9b If "Yes," did the organization norify the donor of the value of the goods or services provided? 1c Did the organization norify the donor of the value of the goods or services provided? 1c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 1c Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1096-C? 1c Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096-C? 1c Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a distribution to all donor, donor advised fund the organization file a Form 1096-C? 1c Did the organization have excess business holdings at any time during the year? 1c Section 501	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a				
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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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 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? 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 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O.	_		-	$\overline{}$			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	11		'				
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amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	Gross income from other sources (Do not net amounts due or paid to other sources against					
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N./A. 12b			11b				
Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? If "Yes," see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O.	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
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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 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? If "Yes," see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O.	а	Is the organization licensed to issue qualified health plans in more than one state?		N/A	13a		
organization is licensed to issue qualified health plans 13b 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15b 16 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 16 "Yes," see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X 16 "Yes," complete Form 4720, Schedule O.		Note: See the instructions for additional information the organization must report on Schedule O.		I			
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excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. 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.	b				14b		
If "Yes," see instructions and file Form 4720, Schedule N. 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.	15						**
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.					15		X
If "Yes," complete Form 4720, Schedule O.							v
	16		it income?		16		Λ
		It "Yes," complete Form 4720, Schedule O.			Form	990	(2020)

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
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, 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		X
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		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA, MD, NY, VA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3	s only) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finaı	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MARY BETH FELLENSTEIN - 866-909-3399			
	200 DAINGERFIELD RD, NO. 200, ALEXANDRIA, VA 22314			

032006 12-23-20

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

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

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

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

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

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

(A)	(B)	l	211120		C)	про	1001	(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition		one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rsoni	is bot	h an	compensation	compensation	amount of
	week (list any	_	l a)	100,	from the	from related organizations	other compensation
	hours for	Individual trustee or director				-D		organization	(W-2/1099-MISC)	from the
	related	tee or	stee			Highest compensated employee		(W-2/1099-MISC)	(,	organization
	organizations	Itrus	nal tru		oyee	omp(and related
	below	ividua	Institutional trustee	cer	Key employee	hest c	Former			organizations
	line)	lud	Inst	Officer	Ke	Hig	윤			
(1) LAURIE L. MARKER	60.00	Į.,		7.				100 000	0	20 000
FOUNDER/EXECUTIVE DIRECTOR	20 00	Х		Х				100,000.	0.	30,000.
(2) SUSAN Y. JANIN	20.00	X		x					0.	^
BOARD CHAIR	10.00	^		^				0.	0.	0.
(3) DAN B. BERINGER	10.00	X		x				0.	0.	0.
BOARD SECRETARY	10.00	^		^				0.	0.	0.
(4) HELEN A. CHAIKOVSKY BOARD TREASURER	10.00	X		x				0.	0.	0.
(5) ELIZABETH MARQUART	5.00	^		^				0.	0.	<u></u>
BOARD DIRECTOR	3.00	X						0.	0.	0.
(6) SALLY F. DAVIDSON	3.00	122						0.	0.	
BOARD DIRECTOR	3.00	x						0.	0.	0.
(7) RICHARD KOPCHO	3.00	122						0.	0.	
BOARD DIRECTOR	3,00	x						0.	0.	0.
(8) MARISA Y. KATNIC	5.00	 						•		
BOARD DIRECTOR		X						0.	0.	0.
(9) THOMAS E. MOORE, III	5.00								-	
BOARD DIRECTOR (START 6/20)		X						0.	0.	0.
(10) SHERRY ATTERBURY	3.00									
BOARD DIRECTOR (START 6/20)		Х						0.	0.	0.
(11) ROSWITHA K. SMALLE	5.00									
BOARD DIRECTOR		Х						0.	0.	0.
(12) BROOKS H. BROWNE	10.00									
BOARD DIRECTOR		Х						0.	0.	0.
(13) POLLY H. HIX	5.00									
BOARD DIRECTOR		Х						0.	0.	0.
(14) JAMES DOUGHERTY	5.00									
BOARD DIRECTOR		Х						0.	0.	0.
(15) STEPHEN O'BRIEN	5.00									
BOARD DIRECTOR		Х						0.	0.	0.
		1								
	1	<u> </u>	_	_		_				
		4								
										- 000

Part V	Section A. Officers, Directors, Tru	stees, Key Em	ploy	rees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	tee or director objector opinion opini	not c	Pos heck	c) ition more erson		one th an stee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from relate organization (W-2/1099-MI	on d ns	com fr orga	(F) timated nount co other pensation the anization related anization	of cion con ed
			-											
			-											
c To d To 2 To	ubtotal ptal from continuation sheets to Part votal (add lines 1b and 1c) ptal number of individuals (including but ompensation from the organization	/II, Section A						<u> </u>	100,000. 0. 100,000. eceived more than \$100	0,000 of reportab	0. 0. 0.		0,00	0.00.00
lin 4 Fo an 5 Did rer	d the organization list any former office e 1a? If "Yes," complete Schedule J for or any individual listed on line 1a, is the sid related organizations greater than \$1 d any person listed on line 1a receive or indered to the organization? If "Yes," con a B. Independent Contractors	such individual sum of reportab 50,000? If "Yes, accrue compe	le co " <i>co</i> nsat	omp mple	ensa ete S from	atior S <i>che</i> any	n and e <i>dul</i> d y uni	d ot e <i>J t</i> elat	her compensation from for such individual	the organization		3 4 5	Yes	X X X
	omplete this table for your five highest on e organization. Report compensation for (A) Name and busines	r the calendar y	ear e		ng v					year.		(C		1
	otal number of independent contractors 00,000 of compensation from the organ		not lii	mite	d to	tho	se li:	stec	d above) who received m	nore than			000 (0	

Pa	ITT V	/ 111		or note to see the	no in this Dout \///			
			Check if Schedule O contains a response	or note to any III	ne in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded
nts nts	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
S, (С	Fundraising events 1c	29,469.				
ā			Related organizations 1d					
ini,		е	Government grants (contributions) 1e	159,949.				
ti S		f	All other contributions, gifts, grants, and					
혈美			similar amounts not included above 1f 3	,708,849 .				
da		g	Noncash contributions included in lines 1a-1f 1g \$	86,366.				
<u>8 0</u>		h	Total. Add lines 1a-1f	<u></u>	3,898,267.			
				Business Code				
<u>e</u>	2	а						
er.		b						
n S		С						
grai Re		d						
Program Service Revenue		е						
_		f	All other program service revenue					
	_		Total. Add lines 2a-2f					
	3		Investment income (including dividends, inter	•	49,304.			49,304.
	١,		other similar amounts)		47,304.			45,504.
	5		Income from investment of tax-exempt bond					
	3		Royalties(i) Real	(ii) Personal				
	۱ ۵	2	Gross rents 6a	(ii) i diddiidi	-			
	ľ		Less: rental expenses 6b		-			
			Rental income or (loss) 6c					
			Net rental income or (loss)	<u> </u>				
	7		Gross amount from sales of (i) Securities	(ii) Other				
	-	_	assets other than inventory 7a 645,442.	,	1			
		b	Less: cost or other basis					
e			and sales expenses	,				
Revenue		С	Gain or (loss) 7c 22.	,				
		d	Net gain or (loss)		22.			22.
her	8		Gross income from fundraising events (not					
₹			including \$ 29 , 469 • of					
			contributions reported on line 1c). See	1				
			Part IV, line 18					
			Less: direct expenses 8b	48,686.				0 000
			Net income or (loss) from fundraising events	<u></u>	9,822.			9,822.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a	+				
			Less: direct expenses 9b	<u> </u>				
			Net income or (loss) from gaming activities	<u> </u>				
	10	а	Gross sales of inventory, less returns	9,285.				
			and allowances 10a Less: cost of goods sold 10a	C 048				
				0,047.	2,438.	2,438.		
		C	Net income or (loss) from sales of inventory	Business Code	2,430.	2,450:		
snc	11	2	MISC REV	900099	12,077.			12,077.
nec	''	a b			,			,,
Miscellaneous Revenue		C	-		<u> </u>			
lisc Re			All other revenue					
2			Total. Add lines 11a-11d	>	12,077.			
	12		Total revenue. See instructions)	3,971,930.	2,438.	0.	71,225.

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).

D-	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	this Part IX	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1 200 193	1,290,183.		
	individuals. See Part IV, lines 15 and 16	1,290,183.	1,290,103.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	130,000.	75,641.	29,146.	25,213
•	trustees, and key employees	130,000.	73,041.	29,140.	23,213
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	591,065.	352,722.	120,770.	117,573
7	Other salaries and wages	331,003.	334,144.	140,110•	111,313
8	Pension plan accruals and contributions (include	75,000.	39,912.	21,784.	13,304
^	section 401(k) and 403(b) employer contributions)	13,385.	7,123.	3,888.	2,374
9	Other employee benefits	53,288.	24,371.	20,123.	8,794
10	Payroll taxes	33,200.	24,3/10	20,123.	0,734
11	Fees for services (nonemployees):				
a		1,291.	1,290.	1.	
b		22,214.	1,490.	22,214.	
С.	• • • • • • • • • • • • • • • • • • • •	22,214.		22,214.	
	Lobbying				
e	, , , , , , , , , , , , , , , , , , ,	8,672.		8,672.	
f	Investment management fees	0,072.		0,012.	
g	,	290,542.	290,542.		
	column (A) amount, list line 11g expenses on Sch O.)	368.	338.		30
12	Advertising and promotion	123,373.	34,366.	30,225.	58,782
13	Office expenses	13,504.	5,416.	7,293.	795
14	Information technology	13,304.	3,410.	1,493.	133
15	Royalties	34,581.	20,267.	4,416.	9,898
16	Occupancy	46,907.	29,334.	4,410.	17,573
17	Travel	40,307.	49,334.		11,313
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1,663.	1,663.		
19	Conferences, conventions, and meetings	1,003.	1,003.		
20	Interest Payments to offiliates				
21	Payments to affiliates	2,001.		2,001.	
22	Depreciation, depletion, and amortization	8,332.	750.	7,582.	
23	Other expanses Itemize expanses not covered	0,332•	750•	1,302.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	FILM PRODUCTION COSTS	203,073.	203,073.		
b	CREDIT CARD FEES	26,996.	150.	26,846.	
С	DONOR DATABASE	24,624.	4,925.	4,925.	14,774
d	DUES AND SUBCRIPTIONS	21,055.	17,970.	3,085.	
е	All other expenses	5,425.	143.	5,282.	
25	Total functional expenses. Add lines 1 through 24e	2,987,542.	2,400,179.	318,253.	269,110
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	note to a	ny line in this Part X			X
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			551,159.	1	816,960.
	2	Savings and temporary cash investments			1,169,996.	2	1,588,611.
	3	Pledges and grants receivable, net	Г	204,732.	3	245,739	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu					
ts		under section 4958(f)(1)), and persons describ		6			
	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			16,840.	8	4,740 27,377
Ä	9				30,412.	9	27,377
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	30,089. 19,327.			
	b			19,327.	12,763.	10c	10,762
	11	Investments - publicly traded securities			689,074.	11	1,076,765
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lir		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	2,400. 2,677,376.	15	2,400 3,773,354		
	16	Total assets. Add lines 1 through 15 (must e	qual line	33)	2,677,376.	16	3,773,354
	17	Accounts payable and accrued expenses	209,924.	17	126,205		
	18	Grants payable		18			
	19	Deferred revenue		16,840.	19	4,740	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	te Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or for	ormer offi	cer, director,			
Liabilities		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
<u>a</u>		controlled entity or family member of any of the	nese pers	sons		22	
_	23	Secured mortgages and notes payable to uni	related th	ird parties		23	
	24	Unsecured notes and loans payable to unrela	ated third	parties		24	127,875
	25	Other liabilities (including federal income tax,	payables	to related third			
		parties, and other liabilities not included on lin	nes 17-24). Complete Part X			
		of Schedule D			006 564	25	050 000
	26	Total liabilities. Add lines 17 through 25			226,764.	26	258,820
ς		Organizations that follow FASB ASC 958, o	heck he	re ▶ 🔼			
ဥ		and complete lines 27, 28, 32, and 33.			1 542 164		0 660 011
<u>a</u>	27	Net assets without donor restrictions	1,543,164.	27	2,662,211		
<u>0</u>	28	Net assets with donor restrictions	907,448.	28	852,323		
Ę		Organizations that do not follow FASB ASC	C 958, ch	eck here 🕨 📖 📗			
<u> </u>		and complete lines 29 through 33.					
is (29	Capital stock or trust principal, or current fund		Г		29	
SSE	30	Paid-in or capital surplus, or land, building, or		F		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		***************************************	0 450 610	31	2 514 524
ž	32	Total net assets or fund balances		2,450,612.	32	3,514,534	
	33	Total liabilities and net assets/fund balances			2,677,376.	33	3,773,354.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O)	1 2 3 4 5 6 7 8 9	3,97 2,98 98 2,45	1,9 7,5 4,3	42. 88. 12.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,51	4,5	34.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?		- 2a	Yes	No X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	d on a		Х	
С	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separation consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	e audit,	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A-133?	ngle Audit	3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requor audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization CHEETAH CONSERVATION FUND **Employer identification number** 31-1726923

Pa	rt I	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instructions.	
The	organ	ization is not a private found	lation because it is: (For lines 1 through 12, o	heck only	one box.)		
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1	I)(A)(i).	
2		A school described in secti	ion 170(b)(1)(A)(ii). (/	Attach Schedule E (Forn	n 990 or 99	90-EZ).)		
3		A hospital or a cooperative		· ·			ii).	
4	一	A medical research organiz					•	the hospital's name
•		city, and state:	anon operated in col	njanotion with a moopital	GOOGIIDO			the hoopital o haine,
5		An organization operated for	or the benefit of a co	llogo or university owner	d or operat	tod by a g	overnmental unit describ	ood in
3				nege of university owner	o opera	ted by a g	overnmentar unit descrit	Ded III
_		section 170(b)(1)(A)(iv). (C				.	()	
6	v	A federal, state, or local gov						
7	X	An organization that norma		ntial part of its support f	rom a gov	ernmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (C						
8	\square	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the colleg	je or
		university:						
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its sup	port from o	contributio	ons, membership fees, a	nd gross receipts from
		activities related to its exen	npt functions, subjec	t to certain exceptions;	and (2) no	more thar	n 33 1/3% of its support	from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)					
11		An organization organized a		ively to test for public sa	fety. See	section 50)9(a)(4).	
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	the functio	ons of, or to carry out the	e purposes of one or
		more publicly supported or	•	· · · ·	•		•	
		lines 12a through 12d that	•					
а		Type I. A supporting orga				•	, ,	, aivina
		the supported organization	· · · · · · · · · · · · · · · · · · ·	· ·				
		organization. You must o						, app 69
b		Type II. A supporting org			tion with it	e sunnorti	ed organization(s), by ha	avina
~		control or management o	•					-
		organization(s). You mus			arric perse	ons that oc	ontrol of manage the sup	pported
_		Type III functionally inte	-		in connoc	tion with	and functionally intograt	od with
·		its supported organization					•	ea with,
d		Type III non-functionally		•				ization(a)
u								• •
		that is not functionally int	-		-		-	iveriess
		requirement (see instruct	•	-				
е		☐ Check this box if the orga					ı Type I, Type II, Type III	
		functionally integrated, or	* *	nally integrated support	ng organiz	zation.		
f		er the number of supported of						
g		vide the following information i) Name of supported	i about the supporte	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
	,	organization	(11) 2.114	(described on lines 1-10	in your governi Yes	ng document? No	support (see instructions)	support (see instructions)
				above (see instructions))	162	NO	,	, , , , , , , , , , , , , , , , , , ,
Γota	11							I

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

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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.)

	on A. Public Support						
Calenda	ar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gi	ifts, grants, contributions, and						
m	embership fees received. (Do not						
ind	clude any "unusual grants.")	2,056,341.	2,583,132.	2,830,034.	4,072,682.	3,898,267.	15,440,456.
2 Ta	ax revenues levied for the organ-						_
iza	ation's benefit and either paid to						
or	expended on its behalf						
3 Th	ne value of services or facilities						
fu	rnished by a governmental unit to						
th	e organization without charge						
4 To	otal. Add lines 1 through 3	2,056,341.	2,583,132.	2,830,034.	4,072,682.	3,898,267.	15,440,456.
	ne portion of total contributions						
	, each person (other than a						
•	overnmental unit or publicly						
su	upported organization) included						
	n line 1 that exceeds 2% of the						
an	mount shown on line 11,						
	olumn (f)						547,862.
6 Pı	ublic support. Subtract line 5 from line 4.						14,892,594.
	on B. Total Support						
Calenda	ar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Ar	mounts from line 4	2,056,341.	2,583,132.	2,830,034.	4,072,682.	3,898,267.	15,440,456.
	ross income from interest,						
	vidends, payments received on						
	ecurities loans, rents, royalties,						
	nd income from similar sources	12,550.	12,927.	23,357.	36,829.	49,304.	134,967.
	et income from unrelated business	-	-		-	-	<u> </u>
	ctivities, whether or not the						
	usiness is regularly carried on				1,222.	9,822.	11,044.
	ther income. Do not include gain						
or	loss from the sale of capital						
as	ssets (Explain in Part VI.)		52,543.	-254.		12,077.	64,366.
	otal support. Add lines 7 through 10						15,650,833.
	ross receipts from related activities,	etc. (see instruction	ons)	•		12	154,119.
	rst 5 years. If the Form 990 is for th			ourth, or fifth tax y	ear as a section 5	501(c)(3)	
or	ganization, check this box and stop	here					
Section	on C. Computation of Publ	ic Support Pe	rcentage				
14 Pu	ublic support percentage for 2020 (I	ine 6, column (f), d	livided by line 11, c	olumn (f))		14	95.16 %
15 Pu	ublic support percentage from 2019	Schedule A, Part	II, line 14			15	96.44 %
16a 33	3 1/3 % support test - 2020. If the o	organization did no	t check the box on	line 13, and line 1	4 is 33 1/3% or m	nore, check this bo	
st	op here. The organization qualifies	as a publicly supp	orted organization				▶ X
b 33	3 1/3 % support test - 2019. If the c	organization did no	t check a box on lir	ne 13 or 16a, and I	ine 15 is 33 1/3%	or more, check th	is box
ar	nd stop here. The organization qual	ifies as a publicly s	supported organiza	tion			▶□
17a 10	0% -facts-and-circumstances tes	t - 2020. If the orga	anization did not cl	neck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
ar	nd if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop here	e. Explain in Part '	VI how the organiz	ation
m	eets the facts-and-circumstances te	est. The organization	on qualifies as a pu	blicly supported or	rganization		▶□
b 10	0% -facts-and-circumstances tes	t - 2019. If the orga	anization did not cl	neck a box on line	13, 16a, 16b, or 1	17a, and line 15 is	10% or
m	ore, and if the organization meets th	ne facts-and-circum	nstances test, chec	ck this box and sto	p here. Explain ir	Part VI how the	
or	ganization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	supported organ	ization	▶□
18 Pr	r ivate foundation. If the organizatio	n did not check a l	box on line 13, 16a	, 16b, 17a, or 17b,	check this box a	nd see instruction	s ▶

Schedule A (Form 990 or 990-EZ) 2020

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.)

Se	ction A. Public Support	clow, picase com	picte r art ii.j				
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and	, ,	, ,	\	, ,	1	` ` `
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
J	are not an unrelated trade or bus- iness under section 513						
4							
4	ization's benefit and either paid to or expended on its behalf						
_						+	
5	furnished by a governmental unit to						
_	the organization without charge					+	
	Total. Add lines 1 through 5					1	
/ 6	A Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)			<u> </u>			<u> </u>
14	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	tourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
<u></u>	check this box and stop here						
	ction C. Computation of Publ						
	Public support percentage for 2020 (I					15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves		<u>~</u> _			11	
17						17	%
18	1 3					18	%
19	a 33 1/3% support tests - 2020. If the						17 is not
ŀ	more than 33 1/3%, check this box at 33 1/3% support tests - 2019. If the						▶Ш and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organizatio						N

032023 01-25-21

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 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 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.
- **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.
- 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.
- **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.
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **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.**
- **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.
- 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.
- **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.*
 - **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.)

	Yes	No
1		
2		
3a		
3b		
20		
3c		
4a		
į		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
0-		
9a		
9b		
9с		
10a		
10b		

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
	A family member of a person described in line 11a above?	11b		
С	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		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
	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.	1		
	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.	2		
Seci	ion C. Type II Supporting Organizations		I.,	
			Yes	No
	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		
	ion D. All Type III Supporting Organizations			
	Divin Type in Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
	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		
	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.	3		
Sect	ion 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 yea(see instruction	ıs).		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instructio	ns).	
	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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.	2a		
	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.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	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.	3a		
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.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complet	e Sections A through E.	
Sect	ion 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		
Sect	ion 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		
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		
е	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		
Sect	ion 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-functional	ılly integra	ited Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2020

Fai	t v Type III Non-Functionally integrated 509	(a)(o) Supporting Org	(continu	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	· · · · · · · · · · · · · · · · · · ·		1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	ns	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	Э		
	(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	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
c	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i_	Carryover from 2015 not applied (see instructions)				
j	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				
b	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, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
b	Excess from 2017				
с	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Part VI	Supplemental Information Devide the evaluations required by Dart II, line 10: Dart II, line 17: or 17h; Dart III, line 19:
i dit vi	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	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.)
-	
-	
_	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

31-1726923

Name of the organization Employer identification number

CHEETAH CONSERVATION FUND

Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ 🕨 \$ _ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

CHEETAH CONSERVATION FUND

31-1726923

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.
(a)	(b)	(c) (d)
No. 1	Name, address, and ZIP + 4	Total contributions Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		\$ 315,232. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3		\$ 250,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6		Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

CHEETAH CONSERVATION FUND

31-1726923

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$. 98,052.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$ \$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

Name of organization Employer identification number

CHEETAH CONSERVATION FUND

31-1726923

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a)		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

Name of organization

31-1726923 CHEETAH CONSERVATION FUND Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

CHEETAH CONSERVATION FUND

Employer identification number 31-1726923

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar	Funds or A	ccounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in dor	nor advised fun	nds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds	s can be used	only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other p	ourpose confe	ring
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on For	m 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).		
	Preservation of land for public use (for example, recreated	ation or education)	ation of a histo	orically important land area
	Protection of natural habitat	Preserv	ation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in t	he form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			
b				2b
С	Number of conservation easements on a certified historic st			2c
d	Number of conservation easements included in (c) acquired			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminate	ed by the orgar	nization during the tax
	year ▶			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe			
_	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting	, nandling of violations, and enforc	cing conservati	on easements during the year
-	Associated and associated was also associated in the second and th			
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing c	conservation ea	asements during the year
	▶ \$ Does each conservation easement reported on line 2(d) abo	ve estimate the requirements of see	tion 170/b)/4)/E	D)/i)
8				
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservat			
3	balance sheet, and include, if applicable, the text of the foot		· ·	
	organization's accounting for conservation easements.	note to the organization 3 linariola	i statements ti	iat describes the
Par	t III Organizations Maintaining Collections of	of Art. Historical Treasures	s. or Other	Similar Assets.
	Complete if the organization answered "Yes" on Forn		,	
	If the organization elected, as permitted under FASB ASC 9	58. not to report in its revenue sta	tement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for pu	•		
	service, provide in Part XIII the text of the footnote to its fina			·
b	If the organization elected, as permitted under FASB ASC 9			e sheet works of
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:	,		•
	(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 tre			
	the following amounts required to be reported under FASB A		.	
а	Revenue included on Form 990, Part VIII, line 1			. • \$
b	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) 2020

032051 12-01-20

Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simila	r Asset	S (continu	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that make	significant u	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other	0 1 0					
С	Preservation for future generations	_							
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organization's ex	emnt nurnos	se in Part	XIII		
5	During the year, did the organization solicit o	•	· ·	-		JO IIII GIL	7.III.		
Ū	to be sold to raise funds rather than to be ma		•	•			Yes	☐ No	
Pai	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pai	-	nto il tilo organizatio	Transwered 100 0	111 01111 000,	i aitiv, i	1110 0, 01		
	Is the organization an agent, trustee, custodi	•	iary for contribution	s or other assets no	nt included				
	on Form 990, Part X?		•				Yes	☐ No	
h	If "Yes," explain the arrangement in Part XIII						1 103	110	
	11 103, explain the arrangement in rait Am	and complete the for	lowing table.				Amount		
_	Reginning balance				1c		Amount		
	Beginning balance								
	Additions during the year								
_	Distributions during the year								
f	Ending balance						T.,		
	Did the organization include an amount on Fo				•		Yes	No	
	If "Yes," explain the arrangement in Part XIII.								
Pai	t V Endowment Funds. Complete i								
		(a) Current year	(b) Prior year	` '	(d) Three ye		(e) Four	years back	
	Beginning of year balance	249,094.	227,852.		 	01,285.		51,285.	
b	Contributions	23,151.	10,000.	128,933.				50,000.	
С	Net investment earnings, gains, and losses	12,897.	11,242.	-2,366.		3,780.			
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs					3,780.			
f	Administrative expenses								
	End of year balance	285,142.	249,094.	227,852.	10	01,285.		101,285.	
2	Provide the estimated percentage of the curr	rent vear end balanc		· · · · · · · · · · · · · · · · · · ·				<u> </u>	
	Board designated or quasi-endowment	5.0000	%	.,,					
	Permanent endowment ► 95.0000	%							
	Term endowment ▶ .0000								
·	The percentages on lines 2a, 2b, and 2c sho								
20		•	ation that are hold a	nd administered for	the erganize	otion			
Sa	Are there endowment funds not in the posse	ssion of the organiza	ation that are neid a	na administered for	ine organiza	20011	[·	Vaa Na	
	by:							Yes No	
	(i) Unrelated organizations						3a(i)	$\frac{X}{X}$	
	(ii) Related organizations						3a(ii)	<u>^</u> _	
_	If "Yes" on line 3a(ii), are the related organiza						3b		
Do:	Describe in Part XIII the intended uses of the		wment funds.						
Pai	t VI Land, Buildings, and Equipm		Death W. Beer 44 - 6	0 F 000 P+\	/ lin = 40				
	Complete if the organization answered		' '	<u> </u>	<u>, </u>	.			
	Description of property	(a) Cost or ot			Accumulated	' '	(d) Book	value	
		basis (investr	nent) basis	(otner) de	epreciation	$-\!\!\!\!+\!\!\!\!\!-$			
	Land								
	Buildings								
С	Leasehold improvements								
d	Equipment			2,247.	2,24			0.	
<u>e</u>	Other		2	7,842.	17,08	0.		762.	
Tota	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, column (B), line 1	0c.)			10	762.	

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 CHEETAH COI Part VII Investments - Other Securities.	NSERVATION FUN	. <u> </u>	1726923 _{Page}
Complete if the organization answered "Yes	" on Form 990 Part IV line	11b See Form 990 Part X line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
(1) Financial derivatives	(,	(0)	
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes		11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes		11d. See Form 990, Part X, line 15.	1 (1)
) Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	4-1		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	>	
Part X Other Liabilities.		44.0 5 222 5 3 4 7 7	_
Complete if the organization answered "Yes	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	D. (b) Dealescales

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2020

Sche	edule D (Form 990) 2020 CHEETAH CONSERVATION FUND			31-3	1726923 Page
Pa	rt XI Reconciliation of Revenue per Audited Financial Staten	nents With	Revenue per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	?a.			
1	Total revenue, gains, and other support per audited financial statements			1	4,049,639
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	79,534.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		6,847.		
е	Add lines 2a through 2d			2e	86,381
3	Subtract line 2e from line 1			3	3,963,258
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	8,672.		
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	8,672
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,971,930
Pa	rt XII Reconciliation of Expenses per Audited Financial State	ments With	n Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	?a.			
1	Total expenses and losses per audited financial statements			1	2,985,717
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses				
d	Other (Describe in Part XIII.)		6,847.		
е	Add lines 2a through 2d			2e	6,847
3	Subtract line 2e from line 1			3	2,978,870
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	8,672.		
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b	•		4c	8,672
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,987,542
Pa	rt XIII Supplemental Information.				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art 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 ac	dditional inforr	nation.		
PA	RT V, LINE 4:				
LO]	NGTERM SUSTAINABILITY OF THE ORGANIZATION	•			
	_				
PA:	RT X, LINE 2:				
FO]	R THE YEARS ENDED DECEMBER 31, 2020 AND 2	019, TH	E CHEETAH	CON	SERVATION
			7.40.40		
FUI	ND HAS DOCUMENTED ITS CONSIDERATION OF FA	SB ASC	740-10, IN	[COM]	E TAXES,
TH	AT PROVIDES GUIDANCE FOR REPORTING UNCERT	AINTY I	N INCOME 1	AXE	S AND HAS
ייים	DEDMINED MILL NO NAMEDIAL INCORDUATION OF THE	~~TET~	G OIIAT TEST	пор	BIMHED
DE'	TERMINED THAT NO MATERIAL UNCERTAIN TAX P	OSTITON	S QUALIFY	FOR	EITHER
DE,	COCNITUTON OD DIECTORIDE IN UUE EINANGIA	СШУШЕМЕ	NTC		
VE(COGNITION OR DISCLOSURE IN THE FINANCIAL	PINIFIME	11119.		

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD REPORTED AS AN EXPENSE ON THE FINANICAL

6,847.

032054 12-01-20

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number

	9					. ,	
CHI	EETAH CONSERV	ATION FU	ND			31-172692	23
Pa				tside the United States. Comple	te if the organ		
	Form 990, Part IV	/, line 14b.					
1				ds to substantiate the amount of its gra			
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	stance? X	Yes No
•	Fau awantunakana Dasa	مالا المحال من المالية				Na	
2	United States.	ribe in Part V the	e organization s	procedures for monitoring the use of its	grants and o	iner assistance ou	iside trie
3		he following Part	I. line 3 table ca	an be duplicated if additional space is n	eeded.)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
		offices	employees, agents, and	(by type) (such as, fundraising, pro-	•	gram service,	expenditures for and
		in the region	independent contractors	gram services, investments, grants to recipients located in the region)		specific type (s) in the region	investments
			in the region	recipients located in the region)	OI SEIVICE	(s) in the region	in the region
				CDANING FOR CHEEMAH			
IIR-	-SAHARAN AFRICA	0	18	GRANTS FOR CHEETAH CONSERVATION.			1,290,183.
				constitution:			1,230,103.
	Subtotal	0	18				1,290,183.
b	Total from continuation		_				
_	sheets to Part I Totals (add lines 3a	0	0				0.
C	ond 2b)	۱ ,	1.8				1 290 183

032071 12-03-20

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

Schedule F (Form 990) 2020

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
							EQUIPMENT	
							PURCHASED AND	
		SUB-SAHARAN	GRANTS FOR FIELD WORK				SENT FOR FIELD	
		AFRICA	IN NAMIBIA	901,137.	WIRE	225,873.	WORK IN NAMIBIA	
		SUB-SAHARAN	GRANTS FOR FIELD WORK					
		AFRICA	IN SOMALILAND	82,173.	WIRE	0.		
		SUB-SAHARAN	GRANTS FOR FIELD WORK	75 000		0		
		AFRICA	IN KENYA	75,000.	WIKE	0.		
2 Enter total number of								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax		
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	▶	
3	Enter total number of other organizations or entities	▶	

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

Page 4

Schedule F (Form 990) 2020 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2020

Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. PART I, LINE 2: CCF US RECEIVED THE ANNUAL AUDIT AND ANNUAL PROGRAM REPORT FROM CCF NAMIBIA, CCF SOMALILAND AND ACTION FOR CHEETAHS KENYA. THE US ALSO RECEIVES REGULAR REPORTS FROM NAMIBIA AT QUARTERLY BOARD MEETINGS. ALL GRANTS ARE REQUESTED BY THE GENERAL MANAGER IN NAMIBIA AND APPROVED BY THE EXECUTIVE COMMITTEE IN THE US BEFORE DISTRIBUTION TO NAMIBIA.

Schedule F (Form 990) 2020

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

➤ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Name of the organization

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

Inspection Employer identification number

CHEETAH	CONSERVATION FUNL	,			31-1/20	943
Part I Fundraising Activities required to complete this par	 Complete if the organization answer t. 	ered "Y	es" o	n Form 990, Part IV,	line 17. Form 990-E2	I filers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid indirecompensated at least \$5,000 by the 	e Solicita f Solicita g Special or oral agreement with any individual cart VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (inclu	non-g gover aising ding o	overnment grants rnment grants events fficers, directors, tru fundraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	Did raiser ustody atrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	. Dutions	s or has been notified	d it is exempt from re	egistration
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Schedule G (Form 9	90 or 990-EZ) 2020

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions.	~			
6				(b) Event #2 SPRING TOUR ONLINE EVENT (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	70,308.	17,669.		87,977.
ъ	2	Less: Contributions	26,375.	3,094.		29,469.
	3	Gross income (line 1 minus line 2)	43,933.	14,575.		58,508.
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Jirect E	7	Food and beverages				
	8 9	Entertainment Other direct expenses	39,315.	9,371.		48,686.
	10	, , ,			>	48,686.
Pa	11			- 000 D-+ IV II 10		9,822.
Га	ונו	Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	1 990, Part IV, line 19, or	reported more than	
		\$10,000 011 0111 000 LL, iiile ou.	() 5:	(b) Pull tabs/instant	() () ((d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
3eve						
_	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes% No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
а	ls t	iter the state(s) in which the organization conducted the organization licensed to conduct gaming and "No," explain:	ctivities in each of these	states?		Yes No
		ere any of the organization's gaming licenses re 'Yes," explain:	•	_	year?	Yes No

Schedule G (Form 990 or 990-EZ) 2020

032082 11-25-20

No
No
%
%
No
No
)b,
υ,
—

Schedule G	i (Form 990 or 990-EZ)	CHEETAH	CONSERVATION	FUND	31-1726923 Page 4
Part IV	i (Form 990 or 990-EZ) Supplemental Infor	mation (contin	ued)		-
•					
•					
-					
_					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization CHEETAH CONSERVATION FUND

 $Employer\ identification\ number\\ 31-1726923$

Part	Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		-	_
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribu	ition an	nount	S
1 .	Art - Works of art	X	9	9,024.	FMV			
	Art - Historical treasures			-				
	Art - Fractional interests							
	Books and publications	Х		185.	FMV			
	Clothing and household goods	X		3,310.	FMV			
	Cars and other vehicles			,				
	Boats and planes							
	Intellectual property							
	Securities - Publicly traded	X	11	71,297.	FMV			
	Securities - Closely held stock							
	Securities - Partnership, LLC, or							
	trust interests							
	Securities - Miscellaneous							
	Qualified conservation contribution -							
	Historic structures							
	Qualified conservation contribution - Other							
	Real estate - Residential							
	Real estate - Commercial							
	Real estate - Other							
	Collectibles	X	4	679.				
	Food inventory	X	1	1,741.				
	Drugs and medical supplies			-				
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other (ELECTR & SUPP)	X	2	130.	FMV			
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organiz	zation durin	g the tax year for c	contributions				
	for which the organization completed Form 828	83, Part V, [Oonee Acknowledg	jement 29			0	
							Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	d which isn't required to be ι	ised for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?							
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II.							

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

Schedule M (Form 990) 2020

CHE	DULE M,	PART I	, c	OLUMN (3):					
E	AMOUNTS	LISTEI) IN	COLUMN	(B)	REPRESENT	THE	NUMBER	OF	CONTRIBUTIONS

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 Open to Public

Inspection

Employer identification number 31-1726923

Name of the organization

CHEETAH CONSERVATION FUND

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE MEMBERS OF THE BOARD OF DIRECTORS AND DIRECTOR OF OPERATIONS AND FINANCE REVIEW A DRAFT OF THE 990 PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY BOARD MEMBERS, TRUSTEES AND OFFICERS, AND ALSO BY ALL STAFF, VOLUNTEERS, EMPLOYEES WHO CAN INFLUENCE THE ACTIONS OF CCF.

IF A CONFLICT OF INTEREST IS TO ARISE, TRANSACTIONS WITH PARTIES WITH WHICH CONFLICTING INTEREST EXISTS MAY BE UNDERTAKEN ONLY IF ALL OF THE FOLLOWING ARE OBSERVED: 1. THE CONFLICTING INTEREST IS FULLY DISCLOSED; 2. THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTION; 3. A COMPETITIVE BID OR COMPARABLE VALUATION EXISTS; AND 4. THE CCF BOARD OR A DULY CONSTITUTED COMMITTEE HAS DETERMINED THAT THE TRANSACTION IS IN THE BEST INTEREST OF ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15A:

ALL SALARIES AND CONTRACTOR PAYMENTS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS. THE COMPENSATION COMMITTEE DETERMINES THE EXECUTIVE SALARY AFTER A COMPARISON ANALYSIS IS COMPLETED. THE PROCESS IS DOCUMENTED. LAST REVIEW TOOK PLACE DECEMBER 2020.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization CHEETAH CONSERVATION FUND	Employer identification number 31-1726923							
FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.								
FORM 990, PARTI X, LINE 24:								
ON MAY 29, 2020, THE CHEETAH CONSERVATION FUND RECEIVED L	OAN PROCEEDS							
IN THE AMOUNT OF \$127,875 UNDER THE PAYCHECK PROTECTION P	ROGRAM. THE							
PROMISSORY NOTE CALLS FOR MONTHLY PRINCIPAL AND INTEREST	PAYMENTS							
AMORTIZED OVER THE TERM OF THE PROMISSORY NOTE WITH A DEF	ERRAL OF							
PAYMENTS FOR THE FIRST SIX MONTHS. UNDER THE CORONAVIRUS	AID, RELIEF,							
AND ECONOMIC SECURITY ACT (CARES ACT), THE PROMISSORY NOT	E MAY BE							
FORGIVEN BY THE SMALL BUSINESS ADMINISTRATION IN WHOLE OR	IN PART. THE							
CHEETAH CONSERVATION FUND HAS USED THE PROCEEDS FOR PURPO	SES CONSISTENT							
WITH THE PAYCHECK PROTECTION PROGRAM. SUBSEQUENT TO YEAR-	END, THE LOAN							
WAS FORGIVEN, AND ACCORDINGLY, THE CHEETAH CONSERVATION F	UND WILL							
RECORD REVENUE FROM DEBT EXTINGUISHMENT DURING THE YEAR ENDING DECEMBER								
31, 2021.								

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