Form **990-EZ**

Department of the Treasury

Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

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

(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2012

Open to Public Inspection

Α	For the	e 2012 calend	dar year, or tax year beginning , and ending				_		
В	Check if	applicable:	C Name of organization						entification number
	Address	change	Bisbees Fish & Wildlife						
	Name ch	ange	Conservation Fund Inc.	4	<u>45-490</u>)8468			
X	Initial retu	um	Number and street (or P.O. box, if mail is not delivered to street address)		Roon	n/suite	E Te	elephone nu	mber
	Terminate	ed	2300 McDermott Rd		20	0382		562-92	27-5944
	Amended	I return	City or town, state or country, and ZIP + 4				F G	roup Exem	nption
	Applicatio	n pending	Plano TX 75025				Νι	umber u	1
G	Accoun	nting Method:	X Cash Accrual Other (specify) u			H Che	ck u	K if the c	organization is not
ı	Websit	te: u_bis	sbeesfishwildlifeconservationfund.	CO		requ	uired to	 attach Sch	nedule B
J	Tax-exe	empt status (ch	neck only one) — X 501(c)(3) 501(c) () (insert no.) 494	7(a)(1) or	527	(For	m 990,	990-EZ, o	r 990-PF).
K	Check	u if the	e organization is not a section 509(a)(3) supporting organization or a	section 52	27 organizat	ion and its	gross r	eceipts are	e normally
	not mo	ore than \$50,0	000. A Form 990-EZ or Form 990 return is not required though Form	990-N (e-p	oostcard) m	ay be requ	ired (se	e instructic	ons). But if
	the org	anization choo	oses to file a return, be sure to file a complete return.						
L	Add line	es 5b, 6c, and 7l	b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or mor	e, or if total	assets (Part	II,			
	line 25,	column (B) belo	ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ				u	ı \$	106,003
F	Part I	Reven	ue, Expenses, and Changes in Net Assets or Fund	d Baland	es (see t	he instruc	tions fo	or Part I)	
		Check	if the organization used Schedule O to respond to any quest	tion in this	s Part I		<u></u>	<u></u>	X
	1	Contributions,	gifts, grants, and similar amounts received				1_1	ı	106,003
	2	Program ser	rvice revenue including government fees and contracts				12	2	
	3		dues and assessments					3	
	4		income					4	
	5a	Gross amou	nt from sale of assets other than inventory	. 5a					
	b	Less: cost or	r other basis and sales expenses	5b					
	С	Gain or (loss)	from sale of assets other than inventory (Subtract line 5b from line 5a) \dots				. 5	С	
	6	Gaming and	I fundraising events						
ne	а	Gross incom	ne from gaming (attach Schedule G if greater than						
Revenue		\$15,000)		6a			_		
æ	b	Gross incom	ne from fundraising events (not including \$	of cor	ntributions				
			sing events reported on line 1) (attach Schedule G if the	1 1					
		sum of such	gross income and contributions exceeds \$15,000)				_		
	С		expenses from gaming and fundraising events	6c			_		
	d		or (loss) from gaming and fundraising events (add lines 6a and 6b a	nd subtrac	t				
		,					6	d	
	7a		of inventory, less returns and allowances				_		
	b	Less: cost of	• • • • • • • • • • • • • • • • • • • •	. 7b					
	C		or (loss) from sales of inventory (Subtract line 7b from line 7a)				—	С	
	8		ue (describe in Schedule O)				—	В	106 003
_	9		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8					9	106,003
	10		similar amounts paid (list in Schedule O)					0	105,000
	11	•	d to or for members						
es	12		ner compensation, and employee benefits				1		
eus	13		fees and other payments to independent contractors						
Expenses	14	. ,	rent, utilities, and maintenance				1		
_	13	Other expen	plications, postage, and shipping				1		853
	16 17	Total expens	ses (describe in Schedule O)					7	105,853
_	18		nses. Add lines 10 through 16					8	150
əts	19		perfund balances at beginning of year (from line 9)				·· '		
Net Assets	'3						1	9	
et 🗸	20		figure reported on prior year's return) les in net assets or fund balances (explain in Schedule O)				—	0	
ž	21		or fund balances at end of year. Combine lines 18 through 20						150
							· -	- 1	

Part II Balance Sneets (see the instructions for Part II)	
Check if the organization used Schedule O to respond to any question in this Part II	
	End of year 150
0 00	150
J	
Total country	150
Total liabilities (describe in Schedule O) O 25 Total liabilities (describe in Schedule O)	
Net assets or fund balances (line 27 of column (B) must agree with line 21)	150
	xpenses
· · · · · · · · · · · · · · · · · · ·	for section
	and 501(c)(4)
	ons and section
) trusts; optional
measured by expenses. In a clear and concise manner, describe the services provided, the number of for others.	
rsons benefited, and other relevant information for each program title.	,
See Schedule O	
(Grants \$ 105,000) If this amount includes foreign grants, check here u X 28a	105,000
(Grants \$) If this amount includes foreign grants, check here	
(Grants \$) If this amount includes foreign grants, check here u 30a	
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Form 990-EZ (2012)

Pa	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V	V		П
	modulosida i anti vy distok ii tilo digamizationi adoa denodale di te respond to any question in tilo i att		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			l
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		<u> </u>
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			l
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions u			
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 u ; section 4912 u ; section 4955 u	_		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 <u> </u>			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
	reimbursed by the organization u			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed u None			
42a	The organization's books are in care of ${f u}$ Bisbees Fish & Wildlife Telephone no. ${f u}$	562-92	7-5	944
	2300 McDermott Rd			
	Located at u Plano TX ZIP + 4 u	75025		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country: u			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
_	and Financial Accounts.	420		х
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		
42	If "Yes," enter the name of the foreign country: u			Г
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			u
	and enter the amount of tax-exempt interest received or accrued during the tax year u 43		V	N.
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			v
	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			7.
	completed instead of Form 990-EZ			X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	444		
	explanation in Schedule O			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45b	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," Form 990 and Schedule R may need to be completed instead of			
	Form 990-F7 (see instructions)	45h	1	X

DAA

Form 990-EZ (2012) Bisbees Fish & Wildlife

45-4908468

Page

		organization engage, directly or indirectly, in political ca	1 0								res	No
Part		Section 501(c)(3) organizations only All section 501(c)(3) organizations must answ 50 and 51 Check if the organization used Schedule O to	er questions 47–	49b and	f 52, and comp	lete the	tables fo	or lines		46		<u>x</u>
47	Oid the c	organization engage in lobbying activities or have a se	ction 501(h) alaction	in office	t during the tay				_	,	/es	No
		Vac " complete Schodule C Part II								47		x
		ganization a school as described in section 170(b)(1)(A)(ii)? If "Yes," com	plete Sch	nedule E					48		X
49 a	Did the d	organization make any transfers to an exempt non-cha	aritable related orga	nization?					Ė	49a		X
b I	f "Yes,"	was the related organization a section 527 organization	on?						- 1	49b		
	•	e this table for the organization's five highest compens						/				
	employee	(a) Name and title of each employee paid more than \$100,000 of compe	(b) Average hours per week	(c)	Reportable mpensation	(d) Hea	alth benef	oloyee (•	mated of		
		paid more than \$100,000	devoted to position	(Forms	W-2/1099-MISC)	deferred	t plans, ai compens	ation	Oli lei	compe	zi isalic	
Nor	ne											
51 (Complete	mber of other employees paid over \$100,000		contracto	rs who each rece	eived more	— e than					
		me and address of each independent contractor paid more t			(b) Type	e of service			(c) Co	ompens	ation	
Non	e 											
		mber of other independent contractors each receiving		▶								
!	nonexem	organization complete Schedule A? Note : All section that the section tha	e A					<u></u> >	X	Yes		No
		of perjury, I declare that I have examined this return, including complete. Declaration of preparer (other than officer) is based					f my know	ledge and	belief	i, it is		
Sign		Signature of officer			Dat							
Here		Richard W Bisbee			President							
		Type or print name and title										
	Pi	rint/Type preparer's name	parer's signature			Date		Check	if	PTIN		
Paid			pert J. Herrera	ı, EA		01,	/13/14	self-employ		P0016		
Prepa		m's name } Tax Specialty Plu					Firm's Ell	1}	95-	482	233	6
Use C	nly Fi	im's address \ 7409 Florence Ave Downey, CA 90240					Di	5 <i>6</i>	2_0	27-	501	.4
Mav th	ne IRS d	Downey, CA 90240 liscuss this return with the preparer shown above? Se					Phone no	. 30.	2-9 ▶ X	_	$\overline{}$	No
		The state of the s								990	_	

SCHEDULE A

(Form 990 or 990-EZ)

Internal Revenue Service

Department of the Treasury

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.

 \boldsymbol{u} Attach to Form 990 or Form 990-EZ. $\ \boldsymbol{u}$ See separate instructions.

2012

Open to Public Inspection

Name of the organization Bisbees Fish & Wildlife Conservation Fund Inc.

Employer identification number 45-4908468

P	art I	Reas	on for Public Charity	Status (All organizations	must co	mnlete	this na	rt) So	o inetr	uction	<u> </u>			
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. the organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)													
1	Н	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).												
2	Н		school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
3	Н	•		· ·	•									
4	Ш			in conjunction with a hospital de-			` , ,	,, ,, ,	Enter th	ne hosp	ital's nam	ıe,		
		city, and state	e: 											
5	Ш	An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmenta	al unit de	scribed	in				
	_	section 170	(b)(1)(A)(iv). (Complete Part	II.)										
6	Ш	A federal, sta	te, or local government or go	vernmental unit described in sec	ction 170	(b)(1)(A)(v	/).							
7		An organization	on that normally receives a si	ubstantial part of its support from	a govern	mental un	it or fron	n the ge	neral pu	ıblic				
		described in	section 170(b)(1)(A)(vi). (Co	omplete Part II.)										
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part II	l.)									
9	X	An organization	on that normally receives: (1)	more than 33 1/3% of its suppo	rt from co	ntributions	s, memb	ership fe	es, and	gross				
		•	• , ,	ot functions—subject to certain ex				•		-				
		•	·	d unrelated business taxable inco	•									
			-	, 1975. See section 509(a)(2). (
10				xclusively to test for public safety	•	,	a)(4)							
11	Н	ŭ		clusively for the benefit of, to pe		•	,,,,	carry ou	t the					
••	ш		•	d organizations described in sec			-			tion				
				e type of supporting organization	•									
		a Type		c Type III–Functiona		•	d l	—ĭ		n-functi	onally int	toarat	ad	
e		ш	<u> </u>	nization is not controlled directly							Orially IIII	egran	J u	
e	ш		•	than one or more publicly suppo				•						
				than one of more publicly suppo	Jileu oiga	IIIZaliOIIS	uescribe	u III Seci		(a)(1)				
		or section 50	` ,` ,	animation form the IDC that it is a	Toward To		5 III		_					
Ť				mination from the IRS that it is a	Type I, Ty	/pe II, or I	ype III s	supportin	g					
		•	check this box											Ш
g		Since August	17, 2006, has the organization	on accepted any gift or contribution	on from ar	ny of the								
		following per												
				ntrols, either alone or together with							_		Yes	No
		(iii) belov	v, the governing body of the	supported organization?								11g(i)		
			member of a person describe	***								11g(ii)		
		(iii) A 35% c	controlled entity of a person de	escribed in (i) or (ii) above?							<u>L</u>	11g(iii)		
h		Provide the t	following information about th	e supported organization(s).										
(i) Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization		ou notify		Is the	(vii) A	mount o	of monet	tary
	org	ganization		(described on lines 1–9	1 ''	sted in your		nization in	organizati			supp	ort	
	above or IRC section (see instructions)) governing document? col. (i) of your support? (i) organized in the support? U.S.?													
				(000	Yes	No	Yes	No	Yes	No				
(A)														
(B)														
,														
(C)														
(-,														
(D)														
,														
(E)														
Tota														

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

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

Sec	tion A. Public Support				•		
Caler	ndar year (or fiscal year beginning in) u	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support			_			
Caler	ndar year (or fiscal year beginning in) u	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)				12	
13	First five years. If the Form 990 is for the						
	organization, check this box and stop here						▶
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2012 (line 6,	column (f) divided I	by line 11, column	(f))		14	%
15	Public support percentage from 2011 Scheo	dule A, Part II, line	14			15	%_
16a	33 1/3% support test—2012. If the organia	zation did not checl	the box on line 13	3, and line 14 is 33	1/3% or more, chec	ck this	
	box and stop here. The organization qualif						▶ ∐
b	33 1/3% support test—2011. If the organi						. —
	check this box and stop here. The organiz						🟲 🗀
17a	10%-facts-and-circumstances test—201	_					
	10% or more, and if the organization meets				•		
	Part IV how the organization meets the "factoring anization"		ŭ	•	. ,		▶ □
b	10%-facts-and-circumstances test—201						г ш
	15 is 10% or more, and if the organization	-				TIC .	
	Explain in Part IV how the organization me				•	lv	
				-			▶ □
18	supported organization Private foundation. If the organization did	not check a box or	line 13. 16a. 16b	17a, or 17b, check	this box and see		· 🗀
. •	-						▶ □
	instructions						······································

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	, ,		· •	•	,	
Caler	ndar year (or fiscal year beginning in) u	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					106,003	106,003
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5					106,003	106,003
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
Sec	tion B. Total Support						106,003
	ndar year (or fiscal year beginning in) u	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6			, ,	,	106,003	106,003
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)					106,003	106,003
14	First five years. If the Form 990 is for the	organization's first	second, third, fourt	h, or fifth tax vear a	as a section 501(c)		100,003
	organization, check this box and stop here	-		•			X
Sec	tion C. Computation of Public Su	upport Percen	tage				
15	Public support percentage for 2012 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2011 Scheen	dule A, Part III, line	: 15				%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2012 (lin			column (f))			%
18	Investment income percentage from 2011						%
19a	33 1/3% support tests—2012. If the organ						▶ □
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2011. If the organ	-	-				
D	line 18 is not more than 33 1/3%, check this						▶□
20	Private foundation. If the organization did						

Schedule A (Fo	orm 990 or 990-EZ) 2	2012 Bisbe	ees Fish	. & Wild	llife		45-4908468	Page 4
Part IV	Supplemental	Information.	Complete th	nis part to p	rovide the exp	planations requ rt for any addit	ired by Part II, line ional information. (10;
• • • • • • • • • • • • • • • • • • • •								
•								
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• • • • • • • • • • • • • • • • • • • •								
• • • • • • • • • • • • • • • • • • • •								

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

u Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Bisbees Fish & Wildlife Conservation Fund Inc.

Employer identification number 45-4908468

Form 990-EZ, Part I, Line	10 - Grants/S	imilar Amts Paid to	Individuals
Relationship to Org Class	of Activity	Date of Gift Desc	c. of Property
Cash Contrib. Noncash	Contrib. Bool	v Value BV Expl.	FMV Expl.
\$ 105,000 \$	0 \$	0	
Form 990-EZ, Part I, Line 1	16 - Other Ex	penses	
Description		Amount	
Expenses			
Fees	\$	850	
		3	
		853	
Form 990-EZ, Part III - Pr	imary Exempt	Purpose	
The organization engages in	n the followi	ng:	
1. animal causes, includng	, without lin	itation, education,	the prevention
of the extinction of specie	es of animals	, the conservation a	and management of
threatened species (both b	iologically a	nd socio-economicall	y), the
assistance of abused animal	ls, and the a	dvocacy for animal m	rights (as
permitted by Section 501(h)	of the Code	;	
2. environmental causes, in	ncluding, wit	hout limitation, ed	ucation,
reparation and protection of	of the environ	nment, and the advo	cacy for the
environment (as permitted h			
3. teaching of trades and			olving around the
environment and animal cons			

Name of the organization Bisbees Fish & Wildlife	Employer identification number 45-4908468
skills to enable them to earn a living.	
Form 990-EZ, Part III, Line 28 - First Accomplishmen	nt
The organization has developed a project to educate,	, prevent the extinction
of of the Rhinocerous, including aiding in the conse	ervation and management
of this threatened species. The first donation for	the conservation and
preservation efforts in South Africa in benefit of	the Rhinocerous was
received and spent towards those efforts.	