

Return of Organization Exempt From Income Tax

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

1998

This Form is Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 1998 calendar year, OR tax year period beginning 1998, **and ending** 19

B Check if:

- Change of address
- Initial return
- Final return
- Amended return (required also for reporting)

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Crt Action Treasury Inc.
Number and street to P.O. box PO Box 202
City or town, state or country, and ZIP+4 Los Gatos CA 95031

D Employer identification number
85-0435896
E Telephone number
408 379 1088
F Check Application is pending

G Type of organization. Exempt under section 501(c)(3) (insert number) OR section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

H(a) Is this return filed for affiliates? Yes No
(b) If "Yes," enter the number of affiliates for which this return is filed: _____
(c) Is this a separate return filed by an organization covered by a group ruling? Yes No
Accounting method: Cash Accrual
 Other (specify) _____

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 13.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	126,800	
	b	Indirect public support	1b	-0-	
	c	Government contributions (grants)	1c	16,000	
	d Total (add lines 1a through 1c) (attach schedule of contributors)				
	[cash \$ 142,800 noncash \$ -0-]			1d	142,800
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	-0-	
	3	Membership dues and assessments	3	-0-	
	4	Interest on savings and temporary cash investments	4	1,349	
	5	Dividends and interest from securities	5	-0-	
	6a	Gross rental income	6a	-0-	
	b	Less: rental expenses	6b	-0-	
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	-0-		
7	Other investment income (describe)	7	-0-		
Revenue	8a Gross amount from sale of assets other than inventory		(A) Securities		(B) Other
	b Less: cost or other basis and sales expenses		8a	-0-	
	c Gain or (loss) (attach schedule)		8b	-0-	
	d Net gain or (loss) (combine line 8c, columns (A) and (B))		8c	-0-	
Revenue	9 Special events and activities (attach schedule)				
	a	Gross revenue (not including \$ -0- of contributions reported on line 1a)	9a	-0-	
	b	Less: direct expenses other than fundraising expenses	9b	-0-	
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	-0-	
Revenue	10a Gross sales of inventory, less returns and allowances		10a	-0-	
	b Less: cost of goods sold		10b	-0-	
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c	-0-	
	11	Other revenue (from Part VII, line 103)	11	-0-	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	144,149	
Expenses	13 Program services (from line 44, column (B))		13	79,400	
	14 Management and general (from line 44, column (C))		14	190	
	15 Fundraising (from line 44, column (D))		15	1,148	
	16 Payments to affiliates (attach schedule)		16	-0-	
	17 Total expenses (add lines 13 and 14, column (A))		17	80,738	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)		18	63,411	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))		19	19,217	
	20 Other changes in net assets or fund balances (attach explanation)		20	-0-	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	82,628	

Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) orgs. and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 17.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>55,935</u> noncash \$ <u>-0-</u>)	55,935	55,935		
23 Specific assistance to individuals (attach schedule)	-0-	-0-		
24 Benefits paid to or for members (attach schedule)	-0-	-0-		
25 Compensation of officers, directors, etc.	8,260	8,260	-0-	-0-
26 Other salaries and wages	-0-	-0-	-0-	-0-
27 Pension plan contributions	-0-	-0-	-0-	-0-
28 Other employee benefits	-0-	-0-	-0-	-0-
29 Payroll taxes	-0-	-0-	-0-	-0-
30 Professional fundraising fees	-0-	-0-	-0-	-0-
31 Accounting fees	-0-	-0-	-0-	-0-
32 Legal fees	-0-	-0-	190	-0-
33 Supplies	2,597	2,540	-0-	57
34 Telephone	898	646	-0-	252
35 Postage and shipping	331	304	-0-	27
36 Occupancy	2,585	2,197	-0-	388
37 Equipment rental and maintenance	-0-	-0-	-0-	-0-
38 Printing and publications	492	223	-0-	269
39 Travel	7,612	7,612	-0-	-0-
40 Conferences, conventions, and meetings.	-0-	-0-	-0-	-0-
41	-0-	-interest	-0-	-0-
42 Depreciation, depletion, etc. (attach schedule)	-0-	-0-	-0-	-0-
43 Other expenses (itemize): a Misc.	398	243	-0-	-0-
b project consultant stipend	1,500	1,500	-0-	155
c				
d				
e				
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	80,758	79,480	190	1,148

Reporting of Joint Costs-Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 20.)

What is the organization's primary exempt purpose? All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts; but optional for others.)
a Field Program: Priority wild cat conservation projects. CAT organized, raised funds for analyzed data for nine international research projects for endangered cat species. (Grants and allocations \$ <u>55,935</u>)	75,033
b Monitoring Program: the Cat Conservation Center. CAT is developing an online digital library and news service for the cat conservation community. Will improve knowledge access in developing countries. Web site under construction. (Donated technical consultant services. Grants and allocations \$ _____)	4,367
c A worth \$5,000.	
(Grants and allocations \$ _____)	
d	
(Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	79,480

Part IV Balance Sheets (See Specific Instructions on page 20.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	-0-	45 -0-
	46 Savings and temporary cash investments	19,217	46 82,650
	47a Accounts receivable	-0-	47c -0-
	b Less: allowance for doubtful accounts	-0-	
	48a Pledges receivable	-0-	48c -0-
	b Less: allowance for doubtful accounts	-0-	
	49 Grants receivable	-0-	49 -0-
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)	-0-	50 -0-
	51a Other notes and loans receivable (attach schedule)	-0-	51c -0-
	b Less: allowance for doubtful accounts	-0-	
	52 Inventories for sale or use	-0-	52 -0-
	53 Prepaid expenses and deferred charges	-0-	53 -0-
	54 Investments-securities (attach schedule)	-0-	54 -0-
	55a Investments-land, buildings, and equipment: basis	-0-	55c -0-
	b Less: accumulated depreciation (attach schedule)	-0-	
	56 Investments-other (attach schedule)	-0-	56 -0-
	57a Land, buildings, and equipment: basis	-0-	57c -0-
	b Less: accumulated depreciation (attach schedule)	-0-	
	58 Other assets (describe)	-0-	58 -0-
	59 Total assets (add lines 45 through 58) (must equal line 74)	19,217	59 82,650
Liabilities	60 Accounts payable and accrued expenses	-0-	60 -0-
	61 Grants payable	-0-	61 -0-
	62 Deferred revenue	-0-	62 -0-
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	-0-	63 -0-
	64a Tax-exempt bond liabilities (attach schedule)	-0-	64a -0-
	b Mortgages and other notes payable (attach schedule)	-0-	64b -0-
	65 Other liabilities (describe)	-0-	65 -0-
66 Total liabilities (add lines 60 through 65)	-0-	66 -0-	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	336	67 4,289
	68 Temporarily restricted	18,881	68 78,361
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 59)	19,217	73 82,650
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	19,217	74 82,650

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 22.)

a Total revenue, wjns. and other support per audited financial statements ▶ a

b Amounts included on line a but not on line 12, Form 990:

(1) Net unrealized gains on investments \$ _____

(2) Donated services and use of facilities \$ _____

(3) Recoveries of prior year grants \$ _____

(4) Other (specify): _____

... \$ _____

Add amounts on lines (1) through (4) ▶ b

c line a minus line b. ▶ c

d Amounts included on line 12, Form 990 but not on line a:

(1) Investment expenses not included on line 6b, Form 990 \$ _____

(2) Other (specify): _____

\$ _____

Add amounts on lines (1) and (2) ▶ d

e Total revenue per line 12, Form 990 (line c plus line d) ▶ e

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a Total expenses and losses per audited financial statements ▶ a

b Amounts included on line a but not on line 17, Form 990:

(1) Donated services and use of facilities \$ _____

(2) Prior year adjustments reported on line 20, Form 990 \$ _____

(3) Losses reported on line 20, Form 990 \$ _____

(4) Other (specify): _____

\$ _____

Add amounts on lines (1) through (4) ▶ b

c Line a minus line b ▶ c

d Amounts included on line 17, Form 990 but not on line a:

(1) Investment expenses not included on line 6b, Form 990 \$ _____

(2) Other (specify): _____

\$ _____

Add amounts on lines (1) and (2) ▶ d

e Total expenses per line 17, Form 990 (line c plus line d) ▶ e

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific Instructions on page 22.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Kristin Nowell PO Box 202 Los Gatos CA 95031	Director, President, Treasurer 5 hrs	-0-	-0-	-0-
Thomas Eisser PO Box 202 Los Gatos CA 95031	Secretary 10 hrs	-0-	-0-	-0-
Kristin Nowell PO Box 02 Los Gatos CA 95031	Executive Director 40 hrs	8,200	-0-	-0-

75 Did any Officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule-see Specific Instructions on page 22.

VI Other Information (See Specific instructions on page 23.)

		Yes	No
Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		76	✓
Were any changes made in the organizing or governing documents but not reported to the IRS?		77	✓
If "Yes," attach a conformed copy of the changes.			
78a	Did the organization have unrelated business gross income Of \$1.000 or more during the year covered by this return?	78a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	✓
79	Was there a liquidation, dissolution, termination, or substantial Contraction during the year? If "Yes," attach a statement	79	✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	✓
b	If "Yes," enter the name of the organization ▶ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 61. 81a -0-		
b	Did the organization file Form 112%POL for this year?	81b	✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	✓
b	If "Yes," you may indicatethe value of these items here. Da not include this amount es revenue in Part I or as en expense in Part II. (See instructions for reporting in Part III.) 82b 5,000		
83a	Did the organization comply with the public inspection requirements for returns end exemption applications?	83a	✓
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	✓
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	✓
b	If "Yes," did the organization include with every solicitation a "express statement that such contributions o r g i f t s w e r e n o t t a x d e d u c t i b l e ?	84b	
85	501(c)(4), (5), or (6) organizations.--a Were substantially all dues nondeductible by member;? 85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	
c	Dues, assessments, and similar amounts from members 85c		
d	Section 162(e) lobbying and political expenditures 85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? 85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 85h		
86	501(c)(7) organizations.—Enter: a Initiation fees and capital contributions included on line 1 2 86a		
b	Gross receipts, included on line 12, for public use of club facilities. 86b		
87	501(c)(12) organizations.—Enter: 87a		
a	Gross income from members or shareholders		
b	Gross income from other sources. (Do not "et amounts due or paid to other sources against amounts due or received from them.) 87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX 88		
89a	501(c)(3) organizations.—Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ -0- ; section 4912 ▶ -0- ; section 4955 ▶ -0-		
b	501(c)(3) and 501(c)(4) organizations.—Did the organization engage in any section 4956 excess benefit transaction during the year? If "Yes; attach a statement explaining each transaction 89b		✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912. 4955. and 4956. ▶ -0-		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization. ▶ 0		
90a	List the states with which a copy of this return is riled ▶ CA		
b	Number of employees employed in the payperiod that includes March 12, 1998 (See instructions.) 90b		
91	The books are in care of ▶ Kristin Nikell Telephone no. ▶ (408) 379 1088 Located at ▶ 235 S. 1st Campbell CA 95008 ZIP + 4 ▶ 95008		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax Year ▶ 92		

