

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)

OMB No 1545-0047

2009

Open to Public Inspection

Form **990**

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning APR 1, 2009 and ending MAR 31, 2010

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization INTERNATIONAL CRANE FOUNDATION INC Doing Business As		D Employer identification number 39-1187711
		Number and street (or P O box if mail is not delivered to street address) Room/suite E 11376 SHADY LANE ROAD		E Telephone number 608-356-9462
		City or town, state or country, and ZIP + 4 BARABOO, WI 53913		G Gross receipts \$ 5,385,709.
		F Name and address of principal officer RICHARD BEILFUSS SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶

I Tax-exempt status 501(c) (3) (insert no) 4947(a)(1) or 527

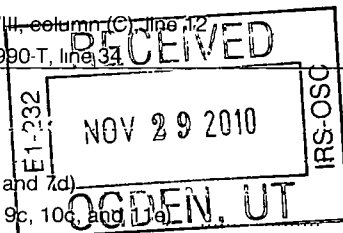
J Website: WWW.SAVINGCRANES.ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1973 **M State of legal domicile** WI

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	THE INTERNATIONAL CRANE FOUNDATION WORKS WORLDWIDE TO CONSERVE CRANES AND THEIR HABITAT.	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	30
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29
	5	Total number of employees (Part V, line 2a)	5	74
	6	Total number of volunteers (estimate if necessary)	6	200
	7a	Total gross unrelated business revenue from Part VIII, column (C), lines 12	7a	3,095.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	7,292,206.	4,190,822.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	31,475.	24,250.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	200,228.	184,173.
	12	Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)	169,536.	206,225.
			7,693,445.	4,605,470.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	568,113.	311,613.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,060,478.	2,078,365.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 336,541.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,519,348.	2,327,431.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	5,147,939.	4,717,409.	
19	Revenue less expenses Subtract line 18 from line 12	2,545,506.	-111,939.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	14,081,215.	16,600,327.
	22	Net assets or fund balances Subtract line 21 from line 20	300,970.	329,279.
		13,780,245.	16,271,048.	



SCANNED DEC 28 2010

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: *Richard Beilfuss*
 Date: 11/22/10
RICHARD BEILFUSS, PRESIDENT
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature: *Gregory Marine, CPA*
 Date: 11/18/10
 Check if self-employed:
 Preparer's identifying number (see instructions): P00187863
 Firm's name (or yours if self-employed), address, and ZIP + 4: BAKER TILLY VIRCHOW KRAUSE, LLP
 115 S. 84TH STREET, SUITE 400
 MILWAUKEE, WI 53214 53214
 EIN ▶ 39-0859910
 Phone no. ▶ 414-777-5500

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

15916

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
THE INTERNATIONAL CRANE FOUNDATION WORKS WORLDWIDE TO CONSERVE CRANES AND THE WETLANDS, GRASSLANDS, AND OTHER ECOSYSTEMS UPON WHICH THEY DEPEND.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code) (Expenses \$ 1,324,814. including grants of \$ 170,896.) (Revenue \$ 0.)
TRAINING AND FIELD CONSERVATION - THE FOUNDATION SEEKS TO EMPOWER A GLOBAL NETWORK OF COOPERATING COLLEAGUES AND INSTITUTIONS TO IMPLEMENT EFFECTIVE CONSERVATION ACTIVITIES ON BEHALF OF CRANES AND TO PROVIDE TECHNICAL SUPPORT SERVICES SUCH AS A SPECIALIZED LIBRARY. ONGOING ACTIVITIES INCLUDE TRAINING PROGRAMS, REVIEW OF RESEARCH PROPOSALS, GUIDANCE IN THE DEVELOPMENT OF RECOVERY STRATEGIES, TECHNICAL ADVICE ON TELEMETRY OR RELEASE METHODS AND LIMITED ASSISTANCE WITH FUNDRAISING. THE FOUNDATION ALSO PROVIDES ADVICE ON SMALL POPULATION BIOLOGY (GENETIC AND DEMOGRAPHIC MANAGEMENT) AND POPULATION VIABILITY ASSESSMENTS FOR BOTH WILD AND CAPTIVE POPULATIONS.

4b (Code) (Expenses \$ 1,183,957. including grants of \$ 131,618.) (Revenue \$ 0.)
FIELD ECOLOGY AND SITE MANAGEMENT - FIELD ECOLOGY PROGRAMS SEEK TO SAFEGUARD THE WORLD'S FIFTEEN SPECIES OF CRANES BY FOCUSING ON THE NATURAL ECOSYSTEMS THAT ALSO SERVE AS CRANE HABITAT. AN ECOSYSTEM APPROACH RECOGNIZES THE IMPORTANCE OF RESTORING AND MANAGING GRASSLANDS, SAVANNAS, WETLANDS, RIVER DELTAS AND OTHER NATURAL ECOSYSTEMS AND OF MONITORING THE IMPACT OF DEVELOPMENT ON HYDROLOGICAL SYSTEMS AND ECOLOGICAL PROCESSES. THE FOUNDATION SEEKS TO INVOLVE CITIZENS AND GOVERNMENTS IN ECOSYSTEM RESTORATION THROUGH TRAINING, CONSENSUS BUILDING AND PROVIDING ALTERNATIVE ECONOMIC OPPORTUNITIES FOR PEOPLE WHO DEPEND ON NATURAL ECOSYSTEMS FOR THEIR LIVELIHOOD. THE FOUNDATION'S OWN SITE MANAGEMENT SHOWCASES THESE ECOLOGICAL PRINCIPLES THROUGH GREEN AND SUSTAINABLE MAINTENANCE, BUILDING AND FIELD

4c (Code) (Expenses \$ 685,249. including grants of \$) (Revenue \$ 24,250.)
CRANE CONSERVATION - THE FOUNDATION CONTRIBUTES ITS EXPERTISE IN CRANE BIOLOGY AND MANAGEMENT TO WORLD EFFORTS FOR PRESERVATION OF CRANE POPULATIONS. WHILE ITS PRIMARY PURPOSE IS TO USE ITS CAPTIVE CRANES FOR MULTIPLE CONSERVATION PURPOSES (BREEDING, RESEARCH AND PUBLIC EDUCATION), THE FOUNDATION ALSO CONCENTRATES ON CRANE REINTRODUCTION AND APPLICATION OF BEHAVIORAL MANAGEMENT SKILLS TO FIELD SITUATIONS.

4d Other program services (Describe in Schedule O)
(Expenses \$ 612,917. including grants of \$ 9,099.) (Revenue \$)

4e Total program service expenses \$ 3,806,937.

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		
	• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VIII</i>		
	• 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? <i>If "Yes," complete Schedule D, Part IX</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>		
		Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a	19		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	74		
2b	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 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990 T for this year? If "No," provide an explanation in Schedule O	X	
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 account)?		X
4b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90 22 1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

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 in Schedule O. See instructions

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	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 in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	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?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization If "Yes," to line 15a or 15b, describe the process in Schedule O. (See instructions)		X
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?		X
16b	b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **WI**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **MARIE RUETTEN - 608-356-9462**
E11376 SHADY LANE ROAD, BARABOO, WI 53913

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

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 Use Schedule J 2 if additional space is needed

- 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 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.

List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ANN HAMILTON DIRECTOR	1.00	X					0.	0.	0.	
CARL-ALBRECHT VON TREUEN DIRECTOR	1.00	X					0.	0.	0.	
CHARLES GIBBONS DIRECTOR	1.00	X					0.	0.	0.	
RICHARD DANA DIRECTOR	1.00	X					0.	0.	0.	
GEORGE ARCHIBALD VICE CHAIRMAN	40.00	X		X			92,300.	0.	12,664.	
HALL HEALY VICE CHAIRMAN	1.00	X		X			0.	0.	0.	
HAROLD PETERSON DIRECTOR	1.00	X					0.	0.	0.	
JANET MCKENNA DIRECTOR	1.00	X					0.	0.	0.	
JAMES BRUMM DIRECTOR	1.00	X					0.	0.	0.	
JOHN DAY DIRECTOR	1.00	X					0.	0.	0.	
JOSEPH BRANCH CHAIRMAN	1.00	X		X			0.	0.	0.	
JUDITH DERSE DIRECTOR	1.00	X					0.	0.	0.	
LALISE MASON DIRECTOR	1.00	X					0.	0.	0.	
LESLIE COOLIDGE DIRECTOR	1.00	X					0.	0.	0.	
MARGERY NICOLSON DIRECTOR	1.00	X					0.	0.	0.	
NANCY A O'DONNELL DIRECTOR	1.00	X					0.	0.	0.	
NANCY MATTHEWS DIRECTOR	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PAUL KING DIRECTOR	1.00	X						0.	0.	0.
POLLY HIX DIRECTOR	1.00	X						0.	0.	0.
REGINA PHELPS DIRECTOR	1.00	X						0.	0.	0.
RICHARD FOX TREASURER	1.00	X		X				0.	0.	0.
RICHARD STEEVES DIRECTOR	1.00	X						0.	0.	0.
ROBERT BRUMDER DIRECTOR	1.00	X						0.	0.	0.
ROBERT DOHMEN SECRETARY	1.00	X		X				0.	0.	0.
SANDRA WHITMORE DIRECTOR	1.00	X						0.	0.	0.
SARA BOLZ DIRECTOR	1.00	X						0.	0.	0.
SUSAN FEITH DIRECTOR	1.00	X						0.	0.	0.
1b Total								384,080.	0.	39,420.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b 378,356.				
	c Fundraising events	1c 29,971.				
	d Related organizations	1d				
	e Government grants (contributions)	1e 316,385.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 3,466,110.				
	g Noncash contributions included in lines 1a-1f \$	31,284.				
	h Total. Add lines 1a-1f	▶ 4,190,822.				
Program Service Revenue	2 a TOUR INCOME	Business Code 900099	24,250.	24,250.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	▶ 24,250.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶	183,140.		183,140.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	687,116.			
		(ii) Other				
		b Less cost or other basis and sales expenses	686,083.			
		c Gain or (loss)	1,033.			
	d Net gain or (loss)	▶	1,033.		1,033.	
	8 a Gross income from fundraising events (not including \$ 29,971. of contributions reported on line 1c) See Part IV, line 18	a	0.			
		b Less direct expenses	b			
c Net income or (loss) from fundraising events		▶	0.			
9 a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a	284,997.				
	b Less cost of goods sold	b	94,156.			
	c Net income or (loss) from sales of inventory	▶	190,841.	3,095.	187,746.	
Miscellaneous Revenue		Business Code				
11 a MISCELLANEOUS REVENUE	900099	15,384.		15,384.		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	▶	15,384.			
12 Total revenue. See instructions.	▶	4,605,470.	24,250.	3,095.	387,303.	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	311,613.	311,613.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	325,255.	184,055.	73,700.	67,500.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,326,433.	1,066,041.	182,318.	78,074.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	36,561.	28,474.	5,743.	2,344.
9 Other employee benefits	275,816.	212,021.	38,271.	25,524.
10 Payroll taxes	114,300.	84,059.	18,455.	11,786.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	32,749.		32,749.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	15,637.	15,000.	637.	
12 Advertising and promotion	66,653.	17,836.	24,355.	24,462.
13 Office expenses	187,770.	151,333.	18,843.	17,594.
14 Information technology	37,486.	30,474.	3,412.	3,600.
15 Royalties				
16 Occupancy	204,241.	186,576.	8,834.	8,831.
17 Travel	375,128.	353,449.	5,099.	16,580.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	120,242.	87,614.	18,364.	14,264.
20 Interest				
21 Payments to affiliates	8,501.	8,501.		
22 Depreciation, depletion, and amortization	348,630.	329,456.	9,587.	9,587.
23 Insurance	47,698.	23,849.	19,079.	4,770.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PROFESSIONAL FEES	456,588.	431,928.	24,660.	
b OTHER EXPENSES	195,855.	78,342.	78,342.	39,171.
c RESEARCH	170,955.	170,955.		
d MEMBERSHIP EXPENSE	59,298.	35,361.	11,483.	12,454.
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	4,717,409.	3,806,937.	573,931.	336,541.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	275.	1	175.
	2	Savings and temporary cash investments	1,766,426.	2	1,909,027.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,559.	4	7,178.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	74,074.	8	55,629.
	9	Prepaid expenses and deferred charges	9,602.	9	14,809.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	9,127,172.		
	10b	Less: accumulated depreciation	4,664,207.	10c	4,462,965.
	11	Investments - publicly traded securities	6,752,907.	11	8,767,839.
	12	Investments - other securities. See Part IV, line 11	200,000.	12	200,000.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	2,032,376.	15	1,182,705.
16	Total assets. Add lines 1 through 15 (must equal line 34)	14,081,215.	16	16,600,327.	
Liabilities	17	Accounts payable and accrued expenses	293,279.	17	329,279.
	18	Grants payable		18	
	19	Deferred revenue	7,691.	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	300,970.	26	329,279.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	9,500,416.	27	13,096,746.
	28	Temporarily restricted net assets	2,606,958.	28	1,501,431.
	29	Permanently restricted net assets	1,672,871.	29	1,672,871.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	13,780,245.	33	16,271,048.	
34	Total liabilities and net assets/fund balances	14,081,215.	34	16,600,327.	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

	Yes	No
2a		X

b Were the organization's financial statements audited by an independent accountant?

2b	X	
----	---	--

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

2c	X	
----	---	--

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

3a		X
----	--	---

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in 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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization INTERNATIONAL CRANE FOUNDATION INC	Employer identification number 39-1187711
---	---

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 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	5026649.	4916431.	7063205.	7292206.	4190822.	28489313.
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	409,162.	195,055.	166,102.	267,523.	306,152.	1343994.
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	5435811.	5111486.	7229307.	7559729.	4496974.	29833307.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6)						29833307.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	5435811.	5111486.	7229307.	7559729.	4496974.	29833307.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	190,506.	243,301.	434,887.	201,471.	183,140.	1253305.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					3,095.	3,095.
c Add lines 10a and 10b	190,506.	243,301.	434,887.	201,471.	186,235.	1256400.
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)	5626317.	5354787.	7664194.	7761200.	4683209.	31089707.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	95.96 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	95.73 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	4.04 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	4.27 %

- 19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

INTERNATIONAL CRANE FOUNDATION INC

Employer identification number

39-1187711

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply). 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution... 3 Number of conservation easements modified... 4 Number of states where property subject to conservation easement is located... 5 Does the organization have a written policy regarding the periodic monitoring... 6 Staff and volunteer hours devoted to monitoring... 7 Amount of expenses incurred in monitoring... 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,952,907.	8,325,250.			
b Contributions	54,711.	684,000.			
c Net investment earnings, gains, and losses	2,647,337.	-1511369.			
d Grants or scholarships					
e Other expenditures for facilities and programs	687,116.	544,974.			
f Administrative expenses					
g End of year balance	8,967,839.	6,952,907.			

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment 81.00 %
- b Permanent endowment 19.00 %
- c Term endowment _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		211,675.		211,675.
b Buildings		7,428,064.	3,683,982.	3,744,082.
c Leasehold improvements				
d Equipment		1,121,847.	847,250.	274,597.
e Other		365,586.	132,975.	232,611.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				4,462,965.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,605,470.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,717,409.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-111,939.
4	Net unrealized gains (losses) on investments	4	2,602,742.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net) Add lines 4 through 8	9	2,602,742.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	2,490,803.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,208,212.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,602,742.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	2,602,742.
3	Subtract line 2e from line 1	3	4,605,470.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,605,470.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	4,717,409.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	4,717,409.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	4,717,409.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A: THE FOUNDATION HAS RECEIVED NUMEROUS DONATIONS OF ART AND VALUABLES WHICH ARE HELD AS COLLECTIONS. PER THE ORGANIZATION'S INTERNAL POLICY, THESE COLLECTIONS ARE NOT REFLECTED ON THE STATEMENT OF FINANCIAL POSITION WHICH IS ALLOWED UNDER ACCOUNTING STANDARDS. ADDITIONALLY, THE TOTAL AMOUNTS OF THESE COLLECTIONS IS UNDETERMINED AND THEREFORE NOT DISCLOSED IN THE FOOTNOTES OF THE FINANCIAL STATEMENTS.

PART III, LINE 4: THE COLLECTION OF THIS ART AND VALUABLES RELATE TO THE

Part XIV Supplemental Information (continued)

FOUNDATION'S EXEMPT PURPOSE OF CRANE CONSERVATION OR ARE REPRESENTATIVE OF THE AREAS AROUND THE WORLD IN WHICH THE FOUNDATION WORKS.

PART V, LINE 4: THE ENDOWMENT FUNDS ARE MANAGED TO OPTIMIZE THE RATE OF RETURN ON INVESTED ASSETS ASSUMING A PRUDENT LEVEL OF RISK. THE GOAL FOR THIS RATE OF RETURN IS ONE THAT PROVIDES FUNDING TO SUPPORT THE FOUNDATION'S OPERATIONS. THE FOUNDATION CURRENTLY DRAWS FIVE PERCENT OF THE ANNUAL THREE YEAR AVERAGE OF THE ENDOWMENT BALANCE AS OF THE BEGINNING OF THE CALENDAR YEAR TO SUPPORT ITS OPERATIONS FOR THAT YEAR.

**Schedule F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

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Name of the organization INTERNATIONAL CRANE FOUNDATION INC	Employer identification number 39-1187711
---	---

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

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

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA & PACIFIC	0	9	PROGRAM SERVICES	CRANE/CRANE HABITAT CONSERVATION	796,254.
RUSSIA/NEWLY INDEPENDENT COUNTRIES	0	6	PROGRAM SERVICES	CRANE/CRANE HABITAT CONSERVATION	93,279.
SUB - SAHARAN AFRICA	0	1	PROGRAM SERVICES	CRANE/CRANE HABITAT CONSERVATION	114,424.
SOUTH ASIA	0	1	PROGRAM SERVICES	CRANE/CRANE HABITAT CONSERVATION	44,391.
CENTRAL AMERICA/CARIBBEAN	0	0	PROGRAM SERVICES	CRANE/CRANE HABITAT CONSERVATION	2,108.
Totals	0	17			1,050,456.

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

Schedule F (Form 990) 2009

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Use Schedule F-1 (Form 990) 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA	CRANE PRESERVATION	396,156.	CHECKS	0.		
		SUB SAHARAN AFRICA	CRANE PRESERVATION	62,913.	CHECKS	0.		
		RUSSIA	CRANE PRESERVATION	21,360.	CHECKS	0.		
		SOUTH ASIA	CRANE PRESERVATION	31,813.	CHECKS	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 4

3 Enter total number of other organizations or entities 4

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Use Schedule F-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
COMPENSATION FOR SERVICES	RUSSIA/NEWLY INDEPENDENT COUNTRIES	2	45,285	CHECKS	0.		FMV
COMPENSATION FOR SERVICES	SOUTH ASIA	1	11,980	CHECKS	0.		FMV
COMPENSATION FOR SERVICES	EAST ASIA	1	44,837	CHECKS	0.		FMV
COMPENSATION FOR SERVICES	SUB SAHARAN AFRICA	1	44,837	CHECKS	0.		FMV

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

SCHEDULE F, PART I, LINE 2: INTERNATIONAL CRANE FOUNDATION REQUIRES ORGANIZATIONS AND INDIVIDUALS TO PROVIDE DETAILED PERIODIC REPORTS INDICATING THE STATUS AND USE OF FUNDS FOR EACH PROJECT.

PART I - ACTIVITIES PER REGION - 3 PEOPLE PROVIDE SUPPORT IN SEVERAL REGIONS AND ARE REFLECTED IN EACH ONE. THIS IS PART OF A UNITED NATIONS ENVIRONMENTAL PROGRAM.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		BIRD-A-THON (event type)	(event type)	(total number)	
Revenue	1	Gross receipts	24,721.		24,721.
	2	Less: Charitable contributions			
	3	Gross income (line 1 minus line 2)	24,721.		24,721.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	30.		30.
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	319.		319.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			(349)
	11	Net income summary. Combine line 3, column (d), and line 10			24,372.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			()
	8	Net gaming income summary. Combine line 1, column (d), and line 7			

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? _____

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?
b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? _____

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? _____

	Yes	No
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in:

a The organization's facility

13a	%
------------	---

b An outside facility

13b	%
------------	---

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

15a

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information.

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

17a

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2009

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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.

Name of the organization **INTERNATIONAL CRANE FOUNDATION INC** Employer identification number **39-1187711**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art	X	2	3,030.	FMV PRIVATE PARTY
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X		18,000.	FMV
5	Clothing and household goods	X		1,804.	FMV PRIVATE PARTY
6	Cars and other vehicles	X	1	8,100.	FMV PRIVATE PARTY
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (TELESCOPE)	X	1	350.	FMV
26	Other ▶ ()				
27	Other ▶ ()				
28	Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		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 non standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

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Inspection

Name of the organization

INTERNATIONAL CRANE FOUNDATION INC

Employer identification number

39-1187711

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

MANAGEMENT PRACTICES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EDUCATION - THE FUTURE OF CRANES DEPENDS ON THE DECISIONS AND ACTIONS
OF INDIVIDUALS. A CENTRAL PRIORITY FOR THE FOUNDATION IS TO INVOLVE
PEOPLE DIRECTLY IN ADDRESSING THREATS TO CRANES AND THE ECOSYSTEMS THEY
INHABIT. ITS PROGRAMS DEVELOP PARTICIPANT EFFECTIVENESS AS FUNDERS,
TEACHERS AND IMPLEMENTERS OF CONSERVATION ACTION. TO AN EXTENT UNUSUAL
FOR A NATURE CENTER, ZOO, OR MUSEUM, THE FOUNDATION DEVELOPS EDUCATION
PROGRAMS AS AN INTEGRAL PART OF A DIVERSIFIED AND HOLISTIC APPROACH TO
CONSERVATION. THE CONTROVERSY OVER CROP DAMAGE AND CRANE HUNTING IN
WISCONSIN, THE REINTRODUCTION OF WHOOPING CRANES, AS WELL AS OTHER
PROGRAMS REQUIRE EXPANDED EDUCATION EFFORTS DIRECTED TOWARD DIVERSE
AUDIENCES.

EXPENSES \$ 612917. INCLUDING GRANTS OF \$ 9099. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: MEMBERSHIP IN THE CORPORATION SHALL
BE CONDITIONED UPON THE PAYMENT OF SUCH MEMBERSHIP FEES TO THE CORPORATION
AS SHALL, FROM TIME TO TIME, BE DETERMINED BY THE CORPORATION'S BOARD OF
DIRECTORS. FAILURE TO PAY SUCH FEES SHALL RESULT IN FORFEITURE IN
MEMBERSHIP. MEMBERS SHALL HAVE VOTING RIGHTS WITH RESPECT TO THE ELECTION
OF THE BOARD OF DIRECTORS AND THE AMENDMENT OF THE ARTICLES OF
INCORPORATION AND THE BYLAWS OF THE CORPORATION.

FORM 990, PART VI, SECTION A, LINE 7A: ANY NUMBER OF MEMBERS PRESENT AT

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

INTERNATIONAL CRANE FOUNDATION INC

Employer identification number
39-1187711

THE ANNUAL MEETING SHALL CONSTITUTE A QUORUM FOR THE TRANSACTION OF
BUSINESS. THE CHAIRPERSON OF THE BOARD OR IN HIS/HER ABSENCE THE PRESIDENT
OR A CHAIRPERSON CHOSEN BY A MAJORITY OF THE MEMBERS PRESENT WILL PRESIDE.
THE CHAIRPERSON WILL CALL THE MEETING TO ORDER AND NOTING THAT A QUORUM IS
PRESENT, WILL BEGIN THE BUSINESS MEETING. S/HE WILL ASK THE CHAIRPERSON OF
NOMINATING COMMITTEE OF THE BOARD TO PRESENT THE SLATE OF DIRECTORS UP FOR
ELECTION OR REELECTION AND THEN CALL FOR A MOTION TO APPROVE, A SECOND AND
THEN FOR APPROVAL BY COMMON CONSENT. IN SIMILAR MANNER, THE CHAIRPERSON
WILL PRESENT ANY CHANGES TO THE ARTICLES OF INCORPORATION OR BYLAWS AND
THEN CALL FOR A MOTION, A SECOND AND APPROVAL BY COMMON CONSENT. THE
CHAIRPERSON WILL CONCLUDE THE BUSINESS BY CALLING FOR A MOTION TO ADJOURN,
A SECOND AND APPROVAL BY COMMON CONSENT.

FORM 990, PART VI, SECTION B, LINE 11: UPON RECEIPT OF A DRAFT FROM ITS
ACCOUNTING AND TAX FIRM, THE FOUNDATION HAS PROVIDED COPIES TO THE CHAIR OF
THE BOARD, THE TREASURER AND THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS.
UPON SATISFACTORY REVIEW WITH THE CORPORATION MANAGEMENT AND THE AUDIT
COMMITTEE, THE IRS FORM 990 WAS PROVIDED TO THE FULL BOARD FOR COMMENT IN A
TIMELY FASHION AND THEN FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THIS POLICY IS REVIEWED ANNUALLY
FOR THE INFORMATION AND GUIDANCE OF BOARD MEMBERS, OFFICERS AND KEY
EMPLOYEES, SO THEY MAY BE ADVISED OF THE POLICY UPON ENTERING THE DUTIES OF
HIS/HER OFFICE. THE BOARD CHAIRPERSON AND SECRETARY ARE AUTHORIZED AND
DIRECTED TO SEE THAT THIS POLICY IS FOLLOWED.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

INTERNATIONAL CRANE FOUNDATION INC

Employer identification number

39-1187711

FORM 990, PART VI, SECTION C, LINE 19: ANNUAL FINANCIAL STATEMENTS ARE
POSTED ON THE FOUNDATION'S WEBSITE AND ARE MADE AVAILABLE UPON REQUEST.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- ▶ If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- ▶ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization	Employer identification number
	INTERNATIONAL CRANE FOUNDATION INC	39-1187711
	Number, street, and room or suite no. If a P.O. box, see instructions. E 11376 SHADY LANE ROAD	
File by the due date for filing your return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BARABOO, WI 53913	

Check type of return to be filed (file a separate application for each return):

- Form 990
- Form 990-BL
- Form 990-EZ
- Form 990-PF
- Form 990-T (corporation)
- Form 990-T (sec. 401(a) or 408(a) trust)
- Form 990-T (trust other than above)
- Form 1041-A
- Form 4720
- Form 5227
- Form 6069
- Form 8870

MARIE RUETTEN

- ▶ The books are in the care of ▶ E 11376 SHADY LANE ROAD - BARABOO, WI 53913
Telephone No. ▶ 608-356-9462 FAX No. ▶
- ▶ If the organization does not have an office or place of business in the United States, check this box
- ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until NOVEMBER 15, 2010, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning APR 1, 2009, and ending MAR 31, 2010

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	-3a-	\$	
b-	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

Filed via Certified Mail

2010 0740 0002 4726 8647

TEM 64949

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)		
Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization INTERNATIONAL CRANE FOUNDATION INC	Employer identification number 39-1187711
	Number, street, and room or suite no. If a P O box, see instructions E 11376 SHADY LANE ROAD	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions BARABOO, WI 53913	

Check type of return to be filed (File a separate application for each return)

- Form 990
 Form 990 EZ
 Form 990 T (sec 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990 BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

MARIE RUETTEN

- The books are in the care of **MARIE RUETTEN** **E11376 SHADY LANE ROAD - BARABOO, WI 53913**
Telephone No **608-356-9462** FAX No _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **FEBRUARY 15, 2011**
- 5 For calendar year _____, or other tax year beginning **APR 1, 2009**, and ending **MAR 31, 2010**
- 6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- 7 State in detail why you need the extension

AN ADDITIONAL AMOUNT OF TIME IS REQUIRED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Form 990-BL, 990 PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	\$
b	If this application is for Form 990-PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c	Balance Due Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *Marie Ruetten* Title **CPA** Date **11/2/10**

