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Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations)

OMB No 1545-1150

Open to Public Inspection

Do not enter social security numbers on this form as it may be made public. Department of the Treasury

Inte	rnal Reve	enue Service		Informati	on about Forn	n 990-EZ and its	instructions	is at www.	irs gov/for	m990.			
Α	For the	2015 calen	dar year, or tax	year beginnir	ng	, and	ending				_		
В	Check if a	applicable	C Name of organi	zation						1) Employ	er identification number	r
	Address o	change											
	Name cha	_	Merlin				<u>tion I</u>	nc			46-	5077536	
	Initial retu	ım	Number and street	•					Room/si	uite E	•	one number	
	Final retu	m/terminated	5000 Mi				41				512	-557-0275	
Ц	Amended	l return	City or town state of	or province, countr	y, and ZIP or fore] F	Group	Exemption	
	Applicatio	on pending	Austin				3735-6	744			Numbe	er 🕨	
G		iting Method	X Cash		ther (specify)	>				H Check	▶ if	the organization is not	
ı			.merlint		om			····		-		h Schedule B	
<u>J</u>	Tax-exe	mpt status (ch		X 501(c)(3)	501(c) () 4 (insert no)	4947(a)(1) or	527	(Form 9	990, 990-	EZ, or 990-PF).	_
K	Form o	f organization	X Corpor	ation	Trust	Association	(Other					_
L			b to line 9 to determ	_	-		0 or more, or	if total asse	ets				_
-			re \$500,000 or mor								<u>▶ \$</u>	144,44	<u>9</u>
P	'art I		ue, Expenses	-	_				•	ınstructio	ns for P		
	т		if the organizat			respond to a	ny questic	on in this	Part I			X	
	1		gifts, grants, and sii								11	144,44	<u>9</u>
	2	Program ser	rvice revenue incli	uding governn	nent fees and	contracts					2		_
	3	Membership	dues and assess	sments							3		_
	4	Investment i	ncome					1 1			4		
	5a	Gross amou	int from sale of as	sets other tha	n inventory			5a			4 1		
	Ь	b Less cost or other basis and sales expenses 5b									- 1		
	C										5c		
	6	Gaming and fundraising events											
	а		Gross income from gaming (attach Schedule G if greater than										
Revenue	1	\$15,000)					:	6a			1 1		
Ķ	b	Gross incom	ne from fundraisin	g events (not	including <u>\$</u>			of contrib	utions				
2	ĺ		sing events repor					f 1					
			gross income an			•		6b			1 1		
	C		expenses from ga	_	-			6c			4 1		
	d		or (loss) from gan	ning and fundr	aising events	(add lines 6a a	and 6b and s	subtract					
	_	line 6c)						1 1			6d	·	_
	7a		of inventory, less	returns and a	llowances			7a			- 1		
	6		f goods sold		(0.1)	- -		7b			- I		
	6	•	or (loss) from sal	-	(Subtract line	e /b from line i	(a)				7c		_
	8		ue (describe in Sc	•	70 and 0					•	9	144,449	┰
	10		rue. Add lines 1, 2 similar amounts p		•	 	······································	••••			10		2
	11		d to or for membe		ledule ()						11	·	_
	42	•	ner compensation		a hanofite						12	12,16	<u>_</u>
Expenses	13	•	I fees and other p			ntractors					13	22,91	_
ĕ	14		rent, utilities, and	-		intractors					14		<u> </u>
X	15		blications, postage				[0]	COR	00 00		15	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	-
	16		nses (describe in :		3		1 6	ECE	IVED	- 1	16	7,749	<u>5</u>
	17	•	nses (describe in)	•				,		701 ►	17	42,82	
	18		deficit) for the yea		17 from line	9)		98 I O	2016	181	18	101,620	
สั							111	aree with	ខគរព	الما			<u>-</u>
SSE	"			ad balances at beginning of year (from line 27, column (A)) (hust-agree with							19	3,97	3
Net Assets	20							Ĭ	20	5,57.	=		
ž	21		or fund balances a			•	0		17000	•	21	105,593	<u>3</u>
Fo			tion Act Notice,						٠			Form 990-EZ (201	_

Part II	Balance Sheets (see the instructions for	Part II)				
	Check if the organization used Schedule O	to respond to any	question in this Part	<u> </u>		X
	•		(A) Be	ginning of year		(B) End of year
22 Cash.	savings, and investments			3,973	22	106,414
23 Land a	and buildings			0	23	
24 Other	assets (describe in Schedule O)			0	24	
25 Total	assets			3,973	25	106,414
26 Total	liabilities(describe in Schedule O)			0	26	821
27 Net as	ssets or fund balances(line 27 of column (B) must agr	ee with line 21)		3,973	27	105,593
Part III	Statement of Program Service Accom	plishments (se	e the instructions for f	Part III)		
	Check if the organization used Schedule O	to respond to any	question in this Part	II X		Expenses
What is the	e organization's primary exempt purpose?				(Red	quired for section
See Sc	hedule O				501((c)(3) and 501(c)(4)
Describe to	he organization's program service accomplishments for ϵ	each of its three large	st program services.		orga	inizations, optional for
	ed by expenses. In a clear and concise manner, describ-	•	ed, the number of		othe	ers)
persons be	enefited, and other relevant information for each program	title	·			
28 Bat	Scan Project - Scanning and archiving or:	iginal collection	on of 73,000		!	
slı	des of bats in order to make them download	dable, royalty-f	ree, in support			
of	non-profit education and conservation effe	orts in perpetui	ty			
(Grant	ts \$) If this amount includes	foreign grants, chec	k here	<u> </u>	28a	26,068
29 See	Schedule O					
(Grant	ts \$) If this amount includes	foreign grants, chec	k here		29a	10,967
30 Pho	tographed Florida bonneted bats and assis	ted state and fe	ederal wildlife			
off	icials in documenting the species, as well	l as their criti	cal research on			
the	bat's needs					
(Grant	ts \$) If this amount includes	foreign grants, chec	k here		30a	1,383
31 Other	program services (describe in Schedule O)					
(Grant	ts \$) If this amount includes	foreign grants, chec	k here		31a	
	program service expenses(add lines 28a through 31a			•	32	38,418
Part IV	/ List of Officers, Directors, Trustees, and Key Check if the organization used Schedule O to resp			ated — see the ir	nstructio	ns for Part IV)
		(b) Average	(c) Reportable	(d) Heath ben	efits.	I
	(a) Name and title	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	contributions to e benefit plans.	and	(e) Estimated amount of other compensation
		- Caralas to position	(if not paid, enter -0-)	deferred comper	neation	
	in Tuttle	L.			isation	
Execu		70.00	! .			_
	itive Director	70.00	0		0	0
	ael Ryan				0	
Direc	ael Ryan ctor	70.00	0			0
Direc	ael Ryan stor el Page	1.00	0		0	0
Direc Rache Direc	ael Ryan stor el Page stor				0	
Direct Rache Direct Linda	ael Ryan ctor el Page ctor a Moore	1.00	0		0	0
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Direct Rache Direct Linda	ael Ryan ctor el Page ctor a Moore	1.00	0		0	0
Direct Rache Direct Linda	ael Ryan ctor el Page ctor a Moore	1.00	0		0	0

	990-EZ (2015) Merlin Tuttles Bat Conservation Inc 46-5077536 art V. Other Information (Note the Schedule A and personal benefit contract statement requirements in the		 -	Page
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33	1	X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	- i		
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			ĺ
	change on Schedule O (see instructions)	34	 	X
35a				l
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	-	X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	ļ	╁
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
26	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	├	X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
37a	during the year? If "Yes," complete applicable parts of Schedule N Enter amount of political expenditures, direct or Indirect, as described in the instructions	36	 	X
b	Did the organization file Form 1120-POL for this year?	┦,,,,		x
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	37b	-	1
J04	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	1,,,		x
h	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	38a	 	├ ^
39	Section 501(c)(7) organizations. Enter:			1
a	Initiation fees and capital contributions included on line 9	1		1
ь	Gross receipts, included on line 9, for public use of club facilities 39b	ᅴ		1
40a		-		1
704	section 4911 ► ; section 4912 ► ; section 4955 ►			1
ь	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958	•		
_	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year		1	1
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40ь	ŀ	x
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	400	_	-
_	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line	·		
	40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	.		
	transaction? If "Yes," complete Form 8886-T	40e		х
41	List the states with which a copy of this return is filed None			
42 a	The organization's books are in care of ▶ Paula Tuttle Telephone no ▶ 51	2-55	7-0	275
	5000 Mission Oaks #41			
	Located at ▶ Austin TX ZiP + 4 ▶ 78	3735		
þ	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		Х
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	ĺ		
	Financial Accounts (FBAR)			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		X
40	If "Yes," enter the name of the foreign country.			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year			
44-	Did the assessment as well-to-see descending the descending the control of the second		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			٠,
	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	2000 4.4 h	` ′	•
_	completed instead of Form 990-EZ	44b	 	X
c d	Did the organization receive any payments for indoor tanning services during the year? If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No." provide as	44c	-	X
a	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			x
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	45a	77	_^
	and the distance industry beyond a normal engage in any transaction with a controlled criticy within the	1. 4.7	W. 4	ı

meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of

Form 990-EZ (see instructions)

orm 9	190-EZ (2	015)	Merlin	Tuttl	.es Bat C	onservatio	n Inc 4	6-50	77536				Р	age 4
													Yes	No
						ampaign activities o	n behalf of or in o	ppositio	n					
	to candi		-		plete Schedule C	, Part I						46	L	X
Par	t VI				ations only ations must ans	wer questions 47	-49b and 52. a	and con	nplete the	tables for	lines			
		50 an	· · ·	-, 3		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
		Chec	k if the organ	ization use	ed Schedule O	to respond to any	question in thi	s Part \	/ 1	<u> </u>				
7	Did the	oroanizat	non engage in l	lohhuina act	wities or have a se	ection 501(h) election	n in effect during	tha tav					Yes	No
		-	mplete Schedi			schor 30 I(II) electio	ii iii enect dulling	uic lax			i	47		x
	•	-	•	•		(A)(ii)? If "Yes," com	nlete Schedule E				•	48		X
		-				aritable related orga	•				•	49a		$\frac{1}{x}$
		•	•		ion 527 organizati	-						49b		
0	Comple	te this tat	ole for the orga	nization's fiv	e highest compen	sated employees (o	ther than officers,	director	rs, trustees a	and key				
					_	ensation from the org				-				
						(b) Average	(c) Reportat			h benefits.	(e) F	stimate	d amou	nt of
		(a) Na	ame and title of e	each employe	e	hours per week devoted to position	compensation (Forms W-2/1099		benefit p	s to employed dans, and		er com		
									deferred co	mpensation	+			
NO	ne										-			
										·· <u>-</u>	┿			
						+					-			
-											+			
					•			1			ŀ			
											 			
											ļ			
f	Total nu	umber of	other employee	es paid over	\$100,000		> _							
i 1						sated independent	contractors who e	ach rece	eived more t	han				
	\$100,00					one, enter "None."								
		(a) Nan	ne and business	address of ea	ich independent con	tractor		(b) Type	e of service		(c) (Comper	sation	
No	ne ,									}				
						··								
					· · · · · · · · · · · · · · · · ·									
										·				
						•				ŀ				
d	Total nu	umber of	other independ	lent contract	tors each receiving	over \$100,000	•							
52	Did the	organiza	tion complete s	Schedule A?	Note: All section	501(c)(3) organizati	ons must attach a							
	comple	ted Sched	dule A								► X	Yes		No
						ng accompanying sch				ny knowledge	e and bei	lef, it is		
rue, c	orrect, ar	nd complet	e Declaration of	preparer (oth	er than officer) is ba	sed on all information	of which preparer ha	s any kno	owledge					
eı						11/1	Koon-		7/2	7/16				
Sign	1		ature of officer ferlin T	\n++1@	UM no	12/2/	IIV EVOC	Da ••••••••••••••••••••••••••••••••••••	e Dire	otor				
Here	•		or print name and		vojen		LA EXEC	T CT A	S DILE	TO LOT				
		<u> </u>	reparer's name		P	reparer's signature			Date			PTIN		
د ده	. 1	-				· -				Che		1		
Paid Dran	. 		M. Robnett,			than M. Robnet	E, CPA		1 07/2	7/20	employed		74208	
•	0-1 t	Firm's name	4.0		Financial		900			Firm's EIN	26	-35	UDB.	TR_
79 4	Jiny	Firm's addre			TX 7875	Blvd Ste	300				512-	250	_0=	0.4
May	the IRS	discuse t			shown above? So			-		Phone no	512- •	250 Ye	-	No.
.riay		J.J. C. G. J. T.	TOTALLI WILL	c properer			·			··		rm 99 (
											1.01	331		(2013)

SCHEDULE A (Form 990 or 990-EZ)

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.

2015
Open to Public Inspection

OMB No 1545-0047

Department of the Trèasury Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

gov/form990. Inspec Employer identification number

Name of the organization

Merlin Tuttles Bat Conservation Inc

46-5077536

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 (Form 990 or 990-EZ))
- 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.
- 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 X 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)
- 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)
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.
- Type III functionally integrated A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.
- d Type III non-functionally integrated A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- e Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f Enter the number of supported organizations

g Flovide the follow	wing information about the st	apported organization(s)				
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above (see instructions)	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yos	No		
(A)						
(B)						
(C)						
(D)						
(E)						
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")				7,688	144,449	152,137
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				7,688	144,449	152,137
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						152,137
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4				7,688	144,449	152,137
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 VI)			i			
11	Total support. Add lines 7 through 10	30 .					152,137
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, four	th, or fifth tax year a	s a section 501(c)(3))	
	organization, check this box and stop here		····				> _X
Sec	tion C. Computation of Public Su	pport Percenta	age				
14	Public support percentage for 2015 (line 6,		•	(f))		14	%
15	Public support percentage from 2014 Sche	dule A, Part II, line	14 .			15	%
16a	33 1/3% support test—2015. If the organ				1/3% or more, check	this	
_	box and stop here. The organization quali	• •					•
b	33 1/3% support test—2014.If the organ			· ·	s 33 1/3% or more,		_
4	check this box and stop here. The organiz	•		•			•
1/a	10%-facts-and-circumstances test—20	•			•		
	10% or more, and if the organization meets				•		
	Part VI how the organization meets the "fall organization		_	·			•
ь	10%-facts-and-circumstances test—20	•				3	
	15 is 10% or more, and if the organization Explain in Part VI how the organization me				•		
	supported organization						•
18	Private foundation. If the organization did instructions	d not check a box o	n line 13, 16a, 16b	17a, or 17b, check	this box and see		•
							

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 or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

	tion A. Public Support							
Calen	dar year (or fiscal year beginning in)▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that 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							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b	,	,			ļ		
8	Public support. (Subtract line 7c from line 6)							
Sec	tion B. Total Support	<u> </u>	<u>!</u>	L	I	L		
	idar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
9	Amounts from line 6	(-,	\-/	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1-7	(0, 20.0	(i) rotar	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11,							
	and 12)	L	<u> </u>	l	L	L		
14	First five years. If the Form 990 is for the	•	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)		
	organization, check this box and stop here					·		
	tion C. Computation of Public Su			(0)		····· · · · · · · · · · · · · · · · ·	 	
15	Public support percentage for 2015 (line 8, Public support percentage from 2014 Sche	• •	•	(1))	•	1:		
Sec	tion D. Computation of Investmen				· · · · · · · · · · · · · · · · · · ·		%_	
17	Investment income percentage for 2015 (III			olumn (ft)		17	,] "	
18	Investment income percentage from 2014		•	olullii (i))		18		
19a	33 1/3% support tests—2015. If the organ			14, and line 15 is m	ore than 33 1/3%		70	
	17 is not more than 33 1/3%, check this bo				•		•	
ь	33 1/3% support tests—2014.If the organ	· · · · · · · · · · · · · · · · · · ·	•	•	• • •		-	
	line 18 is not more than 33 1/3%, check thi					•	▶ [
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

,001	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status]		
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	j		
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion	1 1]	
	despite being controlled or supervised by or in connection with its supported organizations	4b	[
С	Did the organization support any foreign supported organization that does not have an IRS determination	<u> </u>		
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used		- 1	
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	T		
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		1	
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action		İ	
	was accomplished (such as by amendment to the organizing document).	5a	Ì	
ь	Type I or Type II only.Was any added or substituted supported organization part of a class already	"		
_	designated in the organization's organizing document?	5b	İ	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	- 30		
•	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or		ł	
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	İ	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
•	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		ſ	
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	ŀ	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	 ' 		
•	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	1	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	-		
36	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	[- 1	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		- 1	
ь		9a		
U	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	,	ı	
_	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		İ	
40-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
ь	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		ļ	
	determine whether the organization had excess business holdings)	10b]	

	ule A (Form 990 or 990-EZ) 2015 Merlin Tuttles Bat Conservation Inc 46-5077	<u> 536</u>		Page :
Par	t IV Supporting Organizations (continued)			·
44			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	445		1
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		 -
		11c		 -
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. on B. Type I Supporting Organizations	11161		J
	on billypo i oupporting organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			1
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1		
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported	'		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		Í
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1 1		
Sect	ion D. All Type III Supporting Organizations			
-			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		<u></u>
2	Were any of the organization's officers, directors, or trustees either (I) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		L
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ons).		
2	Actuation Test. Appropriate and (h) holour	ſ	V	
	Activities Test Answer (a) and (b) below.		Yes	No
8	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			İ
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explainhow these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	3.		1
_	that these activities constituted substantially all of its activities.	2a		
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	25		ļ
•	activities but for the organization's involvement. Percent of Supported Organizations, Apriver (a) and (h) below	2b		
3	Parent of Supported Organizations Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	,		
ь	trustees of each of the supported organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		-
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3ь		
	or no supported organizations: If 166, describe in that Francische prayed by the organization in this regard			

Schedule A (Form 990 or 990-EZ) 2015 Merlin Tuttles Bat Conservation Inc 46-5077536 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Pnor Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 Add lines 1 through 3 4 5 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 7 8 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 035 6 Recoveries of prior-year distributions 7 8 8 Minimum Asset Amount(add line 7 to line 6) Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4

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

5

Income tax imposed in prior year

emergency temporary reduction (see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedu	ile A (Form 990 or 990-EZ) 2015 Merlin Tuttles Bat	<u>Conservation</u>	Inc 46-5077	536 Page 7						
Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)									
Secti	on D - Distributions			Current Year						
1	Amounts paid to supported organizations to accomplish exempt purposes									
2	Amounts paid to perform activity that directly furthers exempt purposes of	f supported								
	organizations, in excess of income from activity									
3_	Administrative expenses paid to accomplish exempt purposes of support	ed organizations	·····							
4	Amounts paid to acquire exempt-use assets									
5	Qualified set-aside amounts (prior IRS approval required)									
6	Other distributions (describe in Part VI) See instructions									
_ 7	Total annual distributions.Add lines 1 through 6.									
8	Distributions to attentive supported organizations to which the organization	on is responsive								
	(provide details in Part VI) See instructions									
9	Distributable amount for 2015 from Section C, line 6									
10	Line 8 amount divided by Line 9 amount									
		(i)	(ii)	(ili)						
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable						
			Pre-2015	Amount for 2015						
1	Distributable amount for 2015 from Section C, line 6									
2	Underdistributions, if any for years prior to 2015									
	(reasonable cause required-see instructions)									
3	Excess distributions carryover, if any, to 2015.									
а	a									
b										
С	С									
<u>d</u>	From 2013									
е	From 2014									
f	Total of lines 3a through e									
9	Applied to underdistributions of prior years									
h	Applied to 2015 distributable amount									
i_	Carryover from 2010 not applied (see instructions)									
i	Remainder Subtract lines 3g, 3h, and 3i from 3f									
4	Distributions for 2015 from Section									
	D, line 7 \$									
a	Applied to underdistributions of prior years									
b	Applied to 2015 distributable amount									
С	Remainder Subtract lines 4a and 4b from 4									
5	Remaining underdistributions for years prior to 2015, if									
	any Subtract lines 3g and 4a from line 2 (if amount									
	greater than zero, see instructions)									
6	Remaining underdistributions for 2015 Subtract lines 3h									
	and 4b from line 1 (if amount greater than zero, see									
	instructions)									
7	Excess distributions carryover to 2016.Add lines 3									
	and 4c.									
8	Breakdown of line 7									
а										
b										
С	Excess from 2013									
d	Excess from 2014									
	Excess from 2015									

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2015

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

Merlin Tuttles Bat Conservation Inc

Employer Identification number 46-5077536

Form	990-EZ,	Part I,	Line 16	- Ot	her Expenses
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Description	Amount			
Expenses				
Advertising and Promotion	\$	851		
Office Expenses	\$	187		
Other General and Admin Exp	\$	858		
Bank Charges	\$	36		
Fees	\$	404		
Travel	\$	3,930		
Meals and Entertainement	\$	100		
Travel	\$	1,383		
Total	\$	7,749		

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description Beg. of Year End of Year Payroll Tax Liability \$ 0 \$ 821

Form 990-EZ, Part III - Primary Exempt Purpose

MTBC was founded with one true goal in mind; teaching the world to

understand and appreciate the vital contributions bats make to human beings
and the world we live in.

Form 990-EZ, Part III, Line 29 - Second Accomplishment

Visited southeast Asia to present at the Asia-Pacific Associates of

Tropical Biology and Conservation and teach a workshop on conservation and

Name of the organization

Merlin Tuttles Bat Conservation Inc

Employer identification number

46-5077536

management of cave-dwelling bats. Assessed and consulted on local conservation priorities and photographed Cambodian bats for the country's first book on bats. Assisted in the discovery and remediation of the cause of a recent decline in free-tailed bat population of Khao Chong Pran Cave in Thailand.