Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

AF	or the	2023 calendar year, or tax year beginning and	enaing									
B C	heck if pplicable	C Name of organization		D Employer identi	fication number							
	Addres	PANTHERA CORPORATION										
	Name change	~		20-4668	756							
F	□Initial □return □Fiṇal	Number and street (or P.O. box if mail is not delivered to street address) 8 WEST 40TH STREET, 18TH FLOOR	Room/suite	E Telephone numb (646)78								
	∟return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 38,407,010.								
X	Amend return											
=	Application	F Name and address of principal officer: FREDERIC LAUNAY		H(a) Is this a group return for subordinates? Yes X No								
	pendin	SAME AS C ABOVE		H(b) Are all subordinates	=							
T T	ax-exe	mpt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) () (insert no.) $\overline{}$ 4947(a)(1) of $\overline{}$	or 527	1	a list. See instructions							
	Vebsit		01 027	H(c) Group exempt								
		organization: X Corporation Trust Association Other	L Year		M State of legal domicile: DE							
		Summary	1									
	1	Briefly describe the organization's mission or most significant activities: PANTS	HERA'S	MISSION IS	S THE							
Jce		CONSERVATION OF THE WORLD'S 40 WILD CAT S										
CONSERVATION OF THE WORLD'S 40 WILD CAT SPECIES. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) Ta Total unrelated business revenue from Part VIII, column (C), line 12 Total number of volunteers (estimate if necessary)												
ve	3	Number of voting members of the governing body (Part VI, line 1a)		3								
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)										
es &	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)										
vitie	6	Total number of volunteers (estimate if necessary)										
\cti	7 a `	Total unrelated business revenue from Part VIII, column (C), line 12		7								
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11										
				Prior Year	Current Year							
<u>e</u>		Contributions and grants (Part VIII, line 1h)		20,192,366								
Revenue		Program service revenue (Part VIII, line 2g)		0								
3ev		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		5,343								
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		54,982								
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		20,252,691								
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,854,799								
		Benefits paid to or for members (Part IX, column (A), line 4)		0 10,727,625								
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0								
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	n a	U	130,773.							
Exp	17 D	Total fundraising expenses (Part IX, column (D), line 25) 1,301,80		11,391,633	. 14,256,226.							
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		23,974,057								
		Revenue less expenses. Subtract line 18 from line 12		-3,721,366								
-Se	13	tevenue less expenses. Subtract line to from line 12		ginning of Current Year								
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		16,651,413								
Ass Bal	21	Fotal liabilities (Part X, line 26)		6,379,005								
Net	22	Net assets or fund balances. Subtract line 21 from line 20		10,272,408								
Pa	rt II	Signature Block		-								
Unde	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	ents, and to the best of r	ny knowledge and belief, it is							
true,	correc	r, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.								
Sigr	ո	Signature of officer		Date								
Her	e	KEVIN MCNULTY, CFO										
		Type or print name and title										
		Print/Type preparer's name Preparer's signature		Date Check	PTIN							
Paid	ı	KERRI N. BOGDA, CPA KERRI N. BOGDA, CPA 07/17/24 self-employed P00760402										
Prep	- 1	Firm's name BAKER TILLY ADVISORY GROUP, LP		Firm's EIN	39-0859910							
Use	Only	Firm's address 1570 FRUITVILLE PIKE, SUITE 400		_	10 040 4000							
		LANCASTER, PA 17601		Phone no. 7	17.740.4863							
Мау	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No							

332002 12-21-23

11180717 144198 85199

Form 990 (2023) PANTHERA CORPORATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ū	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
′		7		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_V
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			٦,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? f "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	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? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	-izu		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a		14a	Х	
		144		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		446	Х	
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		_
15		4-	Х	
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			.
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		37	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	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? If "Yes," complete Schedule G, Part II	18		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	

Form 990 (2023) PANTHERA CORPORATION
Part IV Checklist of Required Schedules (continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete			
	Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	X	
Pai	Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		X
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
		_	$\Omega\Omega\Omega$	(2022)

PANTHERA CORPORATION
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No					
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								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
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)?	4a	Х						
b	If "Yes," enter the name of the foreign country SEE SCHEDULE O								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		Х					
	any contributions that were not tax deductible as charitable contributions?								
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
_	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	7-		Х					
a	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? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a_							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b							
С	to file Form 8282?	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		- 21					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
a	Gross income from members or shareholders 11a								
D	Gross income from other sources. (Do not net amounts due or paid to other sources against								
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b									
	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

PANTHERA CORPORATION 20-4668756 Page 6 Form 990 (2023) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 12 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 11 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a

Each committee with authority to act on behalf of the governing body?

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Λ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b		15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a				
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, IL

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records KEVIN MCNULTY, CFO -646-786-0400

8 WEST 40TH STREET, 18TH FLOOR, NEW YORK, NY 10018

21.23 SEE SCHEDULE O FOR FULL LIST OF STATES

Form **990** (2023)

85199

Х

8b

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

(A) Name and title	(B) Average			(C Pos	C) ition	1		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week		, unle: cer ar					compensation from	compensation from related	amount of other
	(list any	irector						the	organizations	compensation
	hours for related	ee or d	stee			nsated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	al trust	onal tru		oloyee	compe		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) FREDERIC LAUNAY	35.00		_		×	1 0	-			
PRESIDENT/CEO	0.00	Х		Х				463,378.	0.	0.
(2) KEVIN MCNULTY	35.00									
CFO/TREASURER 6/2/23	0.00			Х				262,119.	0.	0.
(3) CAROLYN GIBSON	35.00									
CHIEF ADMINISTRATION OFFICER	0.00			Х				176,822.	0.	0.
(4) JOSEPH SMITH, PHD	35.00									
EXECUTIVE DIRECTOR, UK	0.00				Х			176,169.	0.	0.
(5) KAREN WOOD	35.00									
SENIOR DIR OF GLOBAL POLICY/CONS SCI	0.00					X		174,938.	0.	0.
(6) ERIC VENTURA	35.00									
EXECUTIVE DIR OF BUSINESS DEVELOPMEN	0.00					Х		174,200.	0.	0.
(7) HISHAM FAHIM	35.00								_	_
CONTROLLER	0.00					Х		162,187.	0.	0.
(8) GUY BALME, PH.D.	35.00								_	_
EXEC DIRECTOR, CONSERVATION SCIENCE	0.00					X		148,948.	0.	0.
(9) ANGELA AMBROSINI	35.00	1								_
EXEC. DIRECTOR, COMM. AND MARKETING	0.00					X		143,922.	0.	0.
(10) EMILY BEVERAGE	35.00	-								_
GENERAL COUNSEL/SECRETARY 6/2/23	0.00			Х				129,435.	0.	0.
(11) JONATHAN AYERS	1.00									
DIRECTOR/CHAIRMAN	0.00	Х		Х				0.	0.	0.
(12) THOMAS KAPLAN PHD	1.00								•	•
DIRECTOR	0.00	Х						0.	0.	0.
(13) H.H PRINCE BADR BIN ABDULLA AL-	1.00	.,							0	•
DIRECTOR	0.00	Х						0.	0.	0.
(14) HON. CLAUDIA MCMURRAY	1.00	. ,							0	0
DIRECTOR (15) POGG T PRIME	0.00	Х						0.	0.	0.
(15) ROSS J BEATY	1.00	~							0	_
OIRECTOR	1.00	Δ	-	-		\vdash		0.	0.	0.
(16) LT. GENERAL SIR GRAEME LAMB DIRECTOR		Х						0.	0.	0.
(17) H.E. RAZAN KHALIFA AL MUBARAK	1.00	^				\vdash		0.	0.	.
DIRECTOR	0.00	Х						0.	0.	0.
332007 12-21-23	0.00	72	L	l	l		1		0.	Form 990 (2023)

332007 12-21-23

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)					
(A)	(B)			(0	C)			(D)	(E)			(F)		
Name and title	Average	(do		Posi heck i			one	Reportable	Reportable		Es	timate	ed	
	hours per	box	, unle	ss per	son i	s both	n an	compensation	compensatio	n	an	nount (of	
	week		cer ar	nd a di	recto	r/trus	iee)	from	from related			other		
	(list any hours for	irecto						the	organization			pensa		
	related	ord	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)			om the		
	organizations	ruste	ruste		99	ubeu		1099-NEC)	1099-1120)		•	anizati d relate		
	below	dual t	ntiona	L	nploy	st cor	-	10001420)				anizatio		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				3-			
(18) DUNCAN MCFARLAND	1.00		_	Ŭ										
DIRECTOR	0.00	Х						0.		0.			0.	
(19) CELINA CHIEN	1.00													
DIRECTOR	0.00	Х						0.		0.			0.	
(20) EIRA THOMAS	1.00													
DIRECTOR	0.00	Х						0.		0.			0.	
(21) ROBERT QUARTERMAIN	1.00													
DIRECTOR	0.00	Х						0.		0.			0.	
(22) JOSH FINK	1.00													
DIRECTOR (UNTIL 06/23)	0.00	Х						0.		0.			0.	
		-												
										-				
		-												
	-		_							-+				
		-												
1b Subtotal	1					_		2,012,118.		0.			0.	
c Total from continuation sheets to Part VI	I. Section A						•	0.		0.			0.	
d Total (add lines 1b and 1c)								2,012,118.		0.			0.	
2 Total number of individuals (including but n								eceived more than \$100,	000 of reportable					
compensation from the organization						,		,	•				11	
												Yes	No	
3 Did the organization list any former officer,	director, trust	ee, k	еу е	empl	oye	e, or	hig	hest compensated emp	loyee on					
line 1a? If "Yes," complete Schedule J for s	uch individual									L	3		X	
4 For any individual listed on line 1a, is the su														
and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	Jf	or such individual		[4	Х		
5 Did any person listed on line 1a receive or a														
rendered to the organization? If "Yes." com	plete Schedule	e J f	or st	ıch r	oers	on .				<u></u>	5	Х		
Section B. Independent Contractors														
1 Complete this table for your five highest co	•	•							•	ensati	ion fro	mc		
the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin T		ear.					
(A) Name and business address								(B) Description of services			(C) Compensation			
		_	T T T T	D 0	O 3.7			·			nipel	isatior	1	
BAKER TILLY ADVISORY GROU				שט	OIN			AUDIT AND TA	Δ		20	0 7	0.6	
BLVD, SUITE 2200, NEW YOR	rv, ma T	υU	υТ				į.	SERVICES			20	8,70	J O •	

SANKY COMMUNICATIONS, INC., 360 W. 31ST DIRECT MAIL 198,779. STREET, FLOOR 6, NEW YORK, NY 10001 CONSULTANTS

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

Form 990 (2023) PANTHERA CORPORATION
Part VIII Statement of Revenue

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
				Ι. Ι					30000013 3 12 3 14
Contributions, Gifts, Grants and Other Similar Amounts			Federated campaigns	1a					
3ra Iou			Membership dues	1b					
S, (Fundraising events	1c					
ar Jar		d	Related organizations	1d					
s, (е	Government grants (contributions)	1e	1,647,863.				
ion		f	All other contributions, gifts, grants, and						
but			similar amounts not included above	1f	36,438,079.				
ΞÓ		g	Noncash contributions included in lines 1a-1f	1g \$	8,465,441.				
Sol		h	Total. Add lines 1a-1f			38,085,942.			
					Business Code				
•	2	а							
ķ		b							
ser Iue									
m S		C							
gra Re		d							
Program Service Revenue		е							
₾			All other program service revenue						
_		g	Total. Add lines 2a-2f						
	3		Investment income (including divider	nds, intere	st, and				
			other similar amounts)			195,117.			195,117.
	4		Income from investment of tax-exem	ıpt bond pı	roceeds				
	5		Royalties						
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Not rental income or (loss)						
				ecurities	(ii) Other				
	•	u	assets other than inventory 7a	34,703.	21,185.				
		h	Less: cost or other basis	,					
ø.		D		30,186.	0.				
ğ			and sales expenses 7b	4,517.	21,185.				
eve			Gain or (loss) 7c		· · · · · ·	25 702			25 702
her Revenue			Net gain or (loss)			25,702.			25,702.
	8	а	Gross income from fundraising events (r	not					
Ö			including \$	-					
			contributions reported on line 1c). Se						
			Part IV, line 18						
		b	Less: direct expenses	8b					
		С	Net income or (loss) from fundraising	g events					
	9	а	Gross income from gaming activities	s. See					
			Part IV, line 19	9a					
		b	Less: direct expenses						
			Net income or (loss) from gaming ac						
			Gross sales of inventory, less returns						
			and allowances		70,063.				
		h	Less: cost of goods sold						
			Net income or (loss) from sales of inv		· · · · · ·	-35,646.	-35,646.		
		_	The meetine of (loss) from saids of mil	vontory	Business Code	,	,		
ns	11	a							
Miscellaneous Revenue	• •								
lla ven		b							
Sce		C	All other revenue						
Ξ̈́			All other revenue						
		е	Total. Add lines 11a-11d			20 071 115	25 646		220 010
	12		Total revenue. See instructions			38,271,115.	-35,646.	0.	220,819.

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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) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 290,313. 290,313. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 91,088. 91,088. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 1,520,725. 1,520,725. individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,031,754. 1,207,923. 176,169. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 9,246,243. 8,021,391. 502,827. 722,025. Other salaries and wages 7 Pension plan accruals and contributions (include 349,625. 280,825. 47,396. 21,404. section 401(k) and 403(b) employer contributions) 1,185,359. 148,304. 960,365. 76,690. Other employee benefits 9 802,698. 625,274. 119,013. 58,411. 10 Payroll taxes 11 Fees for services (nonemployees): Management 158,201. 44,665. 106,440. 7,096. Legal 486,598. 173,414. 293,610. 19,574. Accounting Lobbying 198,779. 198,779. Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 5,490,651. 4,324,428. 1,103,302. 62,921. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 70,369. 63,247.6,616. 506. Office expenses 13 729,408. 674,101. 47,933. 7,374. Information technology 14 15 Royalties 32,804. 5,991. 823,276. 862,071. 16 Occupancy 2,015,601. 1,811,718. 114,393. 89,490. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... 1,091. 218. 818. 55. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 5,934. 458,143. 363,205. 89,004. Depreciation, depletion, and amortization 22 158,452. 91,834. 60,405. 6,213. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 2,780,877. 2,780,877. FIELD SUPPLIES AND EQUI 110,112.WORKSHOPS 109,328. 730. 54. 95,337. 90,922. 4,447. -32. TAXES 72,214. 51,494. 19,423. 1,297. d BANK FEES 767,101.18,027.635,440. 113.634. e All other expenses 29,148,979. 24,004,317. 3,842,853. 1,301,809. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,232.	1	17,513
	2	Savings and temporary cash investments	8,102,295.	2	8,392,024
	3	Pledges and grants receivable, net	3,282,536.	3	11,660,349
	4	Accounts receivable, net	13,189.	4	38,743
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ε	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	610,241.	8	387,917
¥	9	Prepaid expenses and deferred charges	501,511.	9	565,554
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 6,134,849. 10b 3,339,283.			
	b	Less: accumulated depreciation 10b 3,339,283.	2,797,678.	10c	2,795,566 36,603
	11	Investments - publicly traded securities	36,603.	11	36,603
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,300,128.	15	655,138
	16	Total assets. Add lines 1 through 15 (must equal line 33)	16,651,413.	16	24,549,407
	17	Accounts payable and accrued expenses	1,779,164.	17	1,935,820
	18	Grants payable		18	0.000.160
	19	Deferred revenue	3,739,086.	19	2,802,169
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
≝		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		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 (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	060 755		116 205
		of Schedule D	860,755.	25	446,295
	26	Total liabilities. Add lines 17 through 25	6,379,005.	26	5,184,284
ç		Organizations that follow FASB ASC 958, check here			
nce		and complete lines 27, 28, 32, and 33.	74,829.	07	724 792
<u>a</u>	27	Net assets without donor restrictions	10,197,579.	27	724,782 18,640,341
g B	28	Net assets with donor restrictions	10,131,313.	28	10,040,341
Ë		Organizations that do not follow FASB ASC 958, check here			
ē		and complete lines 29 through 33.		00	
ets	29	Capital stock or trust principal, or current funds		29	
\SS(30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	10,272,408.	31	19,365,123
ž	32	Total net assets or fund balances	16,651,413.	32	
	33	Total liabilities and net assets/fund balances	10,001,410.	33	24,549,407

Pa	T XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI					X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			1,1				
2	Total expenses (must equal Part IX, column (A), line 25)	2			8,9				
3	Revenue less expenses. Subtract line 2 from line 1	3			2,1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10	, 27	2,4	08.			
5									
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-29	9,4	21.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	19	, 36	5,1	23.			
Pa	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
					Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				l			
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis					l			
b	Were the organization's financial statements audited by an independent accountant?			2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,							
	consolidated basis, or both:								
	Separate basis X Consolidated basis Both consolidated and separate basis								
С	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	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За	Х				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		Γ						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b	Х				
				Form	990	(2023)			

332012 12-21-23

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

Open to Public

20-4668756

OMB No. 1545-0047

Name of the organization

Inspection
Employer identification number

PANTHERA CORPORATION

Public Charity Status (All organizations must complete this part.) See instruction

P	ar L I	Reason for Public C	onarity Status.	(All organizations must c	omplete tr	nis part.) S	ee instructions.						
The	organ	ization is not a private found	ation because it is: (For lines 1 through 12, cl	heck only	one box.)							
1		A church, convention of ch	urches, or association	n of churches described	in sectio	n 170(b)(I)(A)(i).						
2		A school described in sect											
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).						
4		A medical research organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,					
		city, and state:											
5		An organization operated for	or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental unit describe	ed in					
		section 170(b)(1)(A)(iv). (C	Complete Part II.)										
6		A federal, state, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).						
7	X	An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from the general	oublic 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college											
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the college	or					
		university:		,									
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, and	d gross receipts from					
		activities related to its exem											
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.					
		See section 509(a)(2). (Con											
11		An organization organized a		ively to test for public sat	fety. See	section 50	09(a)(4).						
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to carry out the	purposes of one or					
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on					
		lines 12a through 12d that											
a		Type I. A supporting orga	* *					giving					
		the supported organization	on(s) the power to re	gularly appoint or elect a	majority o	of the direc	tors or trustees of the su	upporting					
		organization. You must o	complete Part IV, Se	ections A and B.									
k		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ving					
		control or management o	f the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or manage the sup	ported					
		organization(s). You mus	t complete Part IV,	Sections A and C.	•								
c	;	Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functionally integrate	ed with,					
		its supported organization	n(s) (see instructions). You must complete I	Part IV, Se	ctions A,	D, and E.						
c	ı 🗆	Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organiz	zation(s)					
		that is not functionally int	egrated. The organiz	zation generally must sat	isfy a distr	ibution red	quirement and an attentiv	/eness					
		requirement (see instructi	ions). You must cor	nplete Part IV, Sections	A and D,	and Part	V.						
e	,	Check this box if the orga	anization received a	written determination from	m the IRS	that it is a	Type I, Type II, Type III						
		functionally integrated, or	r Type III non-function	nally integrated supporting	ng organiz	ation.							
f	Ente	er the number of supported o	organizations										
_ 6		vide the following information	about the supporte	ed organization(s).									
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other					
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)					
Tot	al												

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(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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10702619.	14924770.	19283640.	20192366.	38085942.	103189337
2	Tax revenues levied for the organ-						
	ization'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	10702619.	14924770.	19283640.	20192366.	38085942.	103189337
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)						38234747.
6	Public support. Subtract line 5 from line 4.						64954590.
	tion B. Total Support					•	•
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	10702619.	14924770.	19283640.	20192366.	38085942.	103189337
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	8,789.	4,004.	2,251.	35,114.	195,117.	245,275.
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.)	119,203.	93,666.	71,883.	4,893.		289,645.
11	Total support. Add lines 7 through 10						103724257
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	619,124.
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and sto						
Sec	tion C. Computation of Publ	ic Support Per	centage				
14	Public support percentage for 2023 (line 6, column (f), d	ivided by line 11, o	column (f))		14	62.62 %
	Public support percentage from 2022	•				15	63.71 %
16a	33 1/3% support test - 2023. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the	organization did no	t check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua	•					
17a	10% -facts-and-circumstances test	t - 2023. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	ts-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances to	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	t - 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets the	he facts-and-circum	stances test, che	ck this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a	oox on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	3
						Schedule A	(Form 990) 2023

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6 Gross income from interest,						
IUa	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired ofter June 20, 1075						
,	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on 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						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst. second. third. 1	ourth, or fifth tax	vear as a section 5	01(c)(3) organizatio	on.
	check this box and stop here			· · · · · · · · · · · · · · · · · · ·			
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	ivided by line 13, o	column (f))		15	%
	Public support percentage from 2022					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)23 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2023. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qualit	fies as a publicly s	upported organiza	tion	
b	33 1/3% support tests - 2022. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
3a		
3b		
3c		
4 -		
4a		
4b		
4c		
40		
<u>5a</u>		
5b		
5c		
6		
0		
7		
_		
8		
9a		
9b		
00		
9c		
10a		
10b		

332024 12-21-23 Schedule A (Form 990) 2023

Par	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sact	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
OCOL	tion of Type it oupporting organizations		V	NI.
4	Ware a majority of the examination's divectors by twistons during the toy year also a majority of the divectors		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations	•		
	<i>7</i> • •		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		
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 on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Caat	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
	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.		,	
с 2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins Activities Test. Answer lines 2a and 2b below.	truction	yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		162	NO
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

A CORPORATION rated 509(a)(3) Supporting Organizations	20-4668756 Page 6
Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.

1							
	All other Type III non-functionally integrated supporting organizations mu	ust complete S	Sections A through E.	(D) Current Veer			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
_1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
_4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	inization (see			
	instructions).	-					

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

e Excess from 2023

20-4668756 Page 8 PANTHERA CORPORATION Schedule A (Form 990) 2023 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 A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: SUNDRY 2019 AMOUNT: \$ 119,203. 2020 AMOUNT: \$ 93,666. OTHER INCOME 2021 AMOUNT: \$ 14,963. 2022 AMOUNT: \$ 4,893. RETIREMENT PAYMENT REIMB 2021 AMOUNT: \$ 24,498. INSURANCE REIMBURSEMENT 13,468. 2021 AMOUNT: \$ NYS COMMUTER REFUND 2021 AMOUNT: \$ 11,377. LIFE INSURANCE PAYMENT 2021 AMOUNT: \$ 7,577.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

PANTHERA CORPORATION

20-4668756

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
• •	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively to the contributions totaling \$5,000 or more during the year\$
Caution: An organization tha	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

CORPORATION	
(()	N

20-4668756

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 8,465,441.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,381,973</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>10,215,020.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Nume, address, and Zii + 4	\$1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

PANTHERA CORPORATION

20-4668756

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	17424 SHARES OF IDEXX LABS	\$8,465,441.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Cabadada D (Faura 2001/2002)

Schedule B (Form 990) (2023) Page 4 Name of organization **Employer identification number** PANTHERA CORPORATION 20-4668756 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
No.		(),,	
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_		-
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

(c) Use of gift

323454 12-26-23

(a) No. from

Part I

(b) Purpose of gift

Schedule B (Form 990) (2023)

(d) Description of how gift is held

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

PANTHERA CORPORATION

Employer identification number 20-4668756

Par	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or A	Accounts. Complete if the
	Organization answered Tes On Form 990, Fait IV, line	(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year	()		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	vriting that the assets he	ld in donor advised fu	inds
_	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor ac			
_	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	·		
Par				
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a his	storically important land area
	Protection of natural habitat		Preservation of a ce	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribu	ution in the form of a	conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	-			a.
С	Number of conservation easements on a certified historic stru	octure included on line 2a	a	
d	Number of conservation easements included on line 2c acquire	red after July 25, 2006, a	and not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the orga	nization during the tax
	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the peri			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, an	d enforcing conserva	tion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and on	forcing consorvation	pasamants during the year
′	Amount of expenses incurred in monitoring, inspecting, name	iii ig or violations, and em	ording conservation e	easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements	of section 170(h)(4)(P	s)(i)
Ū	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
_	balance sheet, and include, if applicable, the text of the footnot			
	organization's accounting for conservation easements.	g		
Pai	t III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	8, not to report in its reve	enue statement and b	alance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education,	or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that desc	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	B, to report in its revenue	statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtheran	ce of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical trea	asures, or other similar as	ssets for financial gair	
	the following amounts required to be reported under FASB AS	SC 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2023

Pai	t III Organizations Maintaining Coll	ections of Ar	t, Histo	rical Tre	asures, o	r Other	Similar	Assets	(continue	ed)
3	Using the organization's acquisition, accession,	and other records	s, check	any of the f	ollowing that	make sig	nificant u	se of its		
	collection items (check all that apply).									
а	Public exhibition	d	ι 🔲 ι	_oan or exc	hange progra	am				
b	Scholarly research	е	(Other						
С	Preservation for future generations									
4	Provide a description of the organization's collection	ctions and explair	n how the	ey further th	e organizatio	n's exem	ot purpos	e in Part	XIII.	
5	During the year, did the organization solicit or re	ceive donations o	of art, his	torical treas	sures, or othe	er similar a	ssets			
	to be sold to raise funds rather than to be maint								Yes	No
Pai	t IV Escrow and Custodial Arrange		te if the o	organization	answered "	Yes" on Fo	orm 990,	Part IV, I	ne 9, or	
	reported an amount on Form 990, Part X	, line 21.								
1a	Is the organization an agent, trustee, custodian,	or other intermed	diary for d	contribution	s or other as	sets not ir	cluded		_	
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII and	d complete the fol	lowing ta	able:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Form	n 990, Part X, line	21, for e	scrow or cu	stodial acco	unt liability	/?	L	Yes	No
	If "Yes," explain the arrangement in Part XIII. Ch									
Pai	TV Endowment Funds Complete if the								T	
		a) Current year	(b) P	rior year	(c) Two year	rs back (d) Three ye	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current		e (line 1g	, column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment%									
	The percentages on lines 2a, 2b, and 2c should	•								
3a	Are there endowment funds not in the possession	on of the organiza	tion that	are held ar	nd administer	ed for the			[-	es No
	organization by:									es No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?								3a(ii)	
	If "Yes" on line 3a(ii), are the related organization								3b	
4 Pai	Describe in Part XIII the intended uses of the org		wment it	inas.						
ı uı	Complete if the organization answered ") Part IV	line 11a S	ee Form 99∩	Part X lii	ne 10			
								-1	(d) Deele	
	Description of property	(a) Cost or o basis (investr		(b) Cost basis	or other		cumulate reciation	a	(d) Book	alue
	Land	basis (iiivestii	nont)		7,647.	асрі	Colation		1,267	617
	Land		+		1,439.	1	49,28	84		,155.
	Buildings				4,828.		90,96			,859.
q	Leasehold improvements				6,780.		98,66		1,158	
d	Equipment Other				4,155.		00,36			,793.
	L. Add lines 1a through 1e. (Column (d) must equa	J Form 000 Port	Y line 10						2,795	
. ota	ir raa iirloo ta tiiroagii to. [Colullili lai Illust edu	arı onu 330. Faft.	л. <i>ши</i> е 10	v. colullill	(<i>UII</i>)				_ ,	,

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 PANTHERA COR	PORATION	20	-4668756 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes" or			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or	n Form 990 Part IV line	11c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d of year market value
	(b) Book value	(c) Wethod of Valuation. Gost of en	u-or-year market value
(1)			
(2)			
(3)			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			
(7) (8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	<u>(B))</u>		
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	<u>. </u>
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITY			446,295.
(3)			
(4)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

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

Schedule D (Form 990) 2023

(5) (6) (7) (8)

Pa	rt XI	Reconciliation of Revenue per Audited Financial Statemen	ts With	Revenue per Re	turn	м
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total re	evenue, gains, and other support per audited financial statements			1	38,347,403.
2	Amour	nts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net un	realized gains (losses) on investments	2a			
b	Donate	ed services and use of facilities	2b			
С		eries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	76,288.		
е	Add lin	nes 2a through 2d			2e	76,288.
3	Subtra	ct line 2e from line 1			3	38,271,115.
4	Amour	nts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investr	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
С	Add lin	nes 4a and 4b			4c	0.
5	Total r	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<u></u>	5	38,271,115.
Pa	rt XII	Reconciliation of Expenses per Audited Financial Statemen	nts Witr	i Expenses per H	letur	n
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				00 054 600
1		xpenses and losses per audited financial statements			1	29,254,688.
2		nts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donate	ed services and use of facilities	2a			
b		ear adjustments	2b			
С		osses	2c	105 500		
d		(Describe in Part XIII.)		105,709.		105 500
е		nes 2a through 2d			2e	105,709.
3		ct line 2e from line 1			3	29,148,979.
4		nts included on Form 990, Part IX, line 25, but not on line 1:				
а		ment expenses not included on Form 990, Part VIII, line 7b				
b		(Describe in Part XIII.)	4b			•
С		nes 4a and 4b			4c	0.
5	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	29,148,979.
ı Ра	rt XIII	Supplemental Information				

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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

PANTHERA CORPORATION QUALIFIES AS A U.S. TAX-EXEMPT ORGANIZATION UNDER THE EXISTING PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3) AND DONATIONS TO PANTHERA CORPORATION ARE TAX DEDUCTIBLE TO THE DONOR SUBJECT TO LEGAL LIMITATIONS. PANTHERA'S FOREIGN ENTITIES ARE INCORPORATED AS NOT-FOR-PROFIT ORGANIZATIONS AND ARE GENERALLY EXEMPT FROM INCOME TAXES. PANTHERA RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY WHEN THE TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. MANAGEMENT IS NOT AWARE OF ANY VIOLATIONS OF PANTHERA CORPORATION'S OR RELATED ENTITIES' NOT-FOR-PROFIT STATUS, NOR OF ANY EXPOSURE TO UNRELATED BUSINESS OR OTHER INCOME TAX.

Schedule D (Form 990) 2023

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

Name of the organization **Employer identification number**

PANTHERA CORPOR				20-4668	
		ctivities Out	side the United States. Comple		
Form 990, Part I	V, line 14b.				
-	-		ds to substantiate the amount of its gra		
the grantees' eligibility f	or the grants or a	issistance, and t	the selection criteria used to award the	grants or assistance?	X Yes No
<u>=</u>	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance of	outside the
United States.				1 1)	
3 Activities per Region. (T	(b) Number of		an be duplicated if additional space is n	(e) If activity listed in (d)	(f) Total
(a) Hogion	offices employees, agents, and in the region in the region (by type) (such as, fundraising, production is a product gram services, investments, grants to describe		is a program service, describe specific type of service(s) in the region	expenditures for and investments	
CENTRAL AMERICA AND		1.0			0.45 1.65
THE CARIBBEAN	2	19	PROGRAM SERVICES	JAGUAR STUDIES	847,165.
EUROPE	1	8	DEVELOPMENT	DONOR RELATIONS	715,101.
		-			,
MIDDIE EXCE AND					
MIDDLE EAST AND NORTH AFRICA 0 14		14	PROGRAM SERVICES	LEOPARD STUDIES	2,506,502.
NORTH MIRICA	Ů	11	I ROOMA BERVICED	BEGIAND BIODIES	2,300,302.
NORTH AMERICA	1	3	PROGRAM SERVICES	JAGUAR STUDIES	156,026.
					, -
SOUTH AMERICA	2	33	PROGRAM SERVICES	JAGUAR STUDIES	1,354,803.
					1 ' '
SOUTH AMERICA	0	3	PROGRAM SERVICES	PUMA STUDIES	390,991.
			2211222		(30,332.
SOUTH ASIA	0	91	PROGRAM SERVICES	TIGER STUDIES	3,050,789.
SOUTH ASIA	0	91	FROGRAM SERVICES	IIGER STODIES	3,030,703.
CIID CAUADAN AEDICA	1	54	DDOCDAM CEDVICEC	TEODARD CHILDIEC	2 506 570
3 a Subtotal	7	225	PROGRAM SERVICES	LEOPARD STUDIES	2,586,570. 11,607,947.
b Total from continuation	,	223			,,
sheets to Part I	0	183			17,646,744.
c Totals (add lines 3a					00.054.535

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

Schedule F (Form 990) 2023

29,254,691.

Schedule F (Form 990)	PANTHERA	CORPORA	TION	20-400073	Page 1
		1	• (Schedule F (Form 990), Part I, line 3		1
(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
		region	reopens located in the region,	or service(s) irregion	
SUB-SAHARAN AFRICA	0	111	PROGRAM SERVICES	LION STUDIES	3,274,865.
					, , , , , , , , ,
NORTH AMERICA	0	15	PROGRAM SERVICES	PUMA STUDIES	6,721,682.
NORTH AMERICA	0	42	PROGRAM SERVICES	SMALL CATS STUDIES	5,765,714.
RUSSIA AND NEIGHBORING STATES	0	0	DEVELOPMENT	DONOR RELATIONS	179,727.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	SNOW LEOPARD STUDIES	18,148.
EUROPE	0	11	PROGRAM SERVICES	LION STUDIES	1 570 522
BOROFE	0	11	FROGRAM SERVICES	DION STODIES	1,579,523.
SOUTH AMERICA	0	4	DEVELOPMENT	DONOR RELATIONS	107,085.
Totals		183			17,646,744.
Utai3	1	1 100			

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA						
		AND THE CARIBBEAN	FIELD CONSERVATION	50,500.	WIRE TRANSFER	0.		_
		EUROPE	FIELD CONSERVATION	594,320.	WIRE TRANSFER	0.		-
		SOUTH ASIA	FIELD CONSERVATION	545,559.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
		AFRICA	FIELD CONSERVATION	79,939.	WIRE TRANSFER	0.		
		RUSSIA AND						
		NEIGHBORING						
		STATES	FIELD CONSERVATION	185,907.	WIRE TRANSFER	0.		
		SOUTH AMERICA	FIELD CONSERVATION	22,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC	FIELD CONSERVATION	42,500.	WIRE TRANSFER	0.		1

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

<u>22</u>

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2023

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

Schedule F (Form 990) 2023 Part IV Foreign Forms

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

Schedule F (Form 990) 2023

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Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of

investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

GRANT APPLICATION PROCESS: PANTHERA MAKES GRANTS VIA TWO PROCESSES: ONE IS OUR OPEN APPLICATION GRANT PROGRAM (SEE PANTHERA GRANTS AND AWARDS); THE OTHER IS PROVIDING GRANTS TO ESTABLISHED PARTNERS IN CONSERVATION GENERALLY USED WITHIN SPECIES PROGRAMS.

PANTHERA CORPORATION HAS THE WINSTON COBB, SABIN SNOW LEOPARD GRANT PROGRAM, KAPLAN GRADUATE AWARD AND SMALL CAT ACTION FUND GRANTS.

APPLICATION PROCESS: AN APPLICANT IS ELIGIBLE TO APPLY IF THEIR PROJECT PROPOSAL MEETS THE CRITERIA LISTED ON OUR WEBSITE FOR ONE OF OUR GRANT PROGRAMS. GRANT PROPOSALS MUST BE SUBMITTED TO PANTHERA VIA AN ONLINE GRANTS MANAGEMENT SYSTEM CALLED FOUNDAT. AT THE CLOSE OF THE GRANT ROUNDS, PANTHERA WILL SEND GRANT APPLICATION RECEIPTS TO ALL APPLICANTS.

GRANT PROPOSALS ARE REVIEWED INTERNALLY BY STAFF CONSISTING OF PANTHERA'S GRANT PROGRAM MANAGER, CONSERVATION SCIENCE DEPARTMENT DIRECTOR, CHIEF SCIENTIST, AND RELEVANT SPECIES DIRECTORS AND OTHER STAFF. THIS INITIAL REVIEW PROCESS REMOVES PROPOSALS WHICH DO NOT SATISFY THE APPLICATION CRITERIA AND SELECTS PROPOSALS FOR FURTHER REVIEW. FROM THIS POINT, ALL PROPOSALS ARE REVIEWED BY AT LEAST TWO AND TYPICALLY THREE OR MORE PANTHERA STAFF MEMBERS, THE STAFF MEMBERS WILL, IF DEEMED APPROPRIATE, UTILIZE THE EXTERNAL MEMBERS OF OUR SCIENTIFIC COUNCIL AND OTHER EXTERNAL EXPERTS TO ASSIST US IN THOSE AREAS WHERE WE MAY NOT HAVE THE NECESSARY LEVEL OF EXPERTISE TO FULLY EVALUATE THE GRANT APPLICATION. IN THE CASE OF THE SMALL CATS ACTION FUND, ALL PROPOSALS ARE ADDITIONALLY REVIEWED BY THE CO-CHAIRS OP IUCN CAT SPECIALIST GROUP.

Schedule F (Form 990) 2023

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Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

FOLLOWING THE REVIEW PROCESS, THE FUNDING DECISION IS MADE BY A SELECTED STAFF TAKING INTO CONSIDERATION AVAILABLE FUNDING CONTAINED IN OUR BUDGET AND PRIOR COMMITMENTS.

EACH APPROVED GRANT RECIPIENT SIGNS A PANTHERA GRANT AGREEMENT THAT WILL SPECIFY THE TERMS AND AMOUNT OF THE GRANT. IT REQUIRES THAT THE PROJECT INVOLVES EXCLUSIVELY CHARITABLE, EDUCATIONAL OR SCIENTIFIC ACTIVITIES THAT ARE DESCRIBED IN SECTION 170 (C) (2) (B) OF THE UNITED STATES INTERNAL REVENUE CODE OF 1983 1 AS AMENDED (THE "CODE"); AND SET FORTH REPORTING REQUIREMENTS AND ACCOUNTABILITY OVER FUNDS. IN ADDITION. THE CONTRACT INCLUDES APPROPRIATE WORDING RELATIVE TO THE FOREIGN CORRUPT PRACTICES ACT.

AS PART OF THE GRANT PROCESS WE REQUIRE THE FOLLOWING INFORMATION:

- ORGANIZATION'S EIN FOR ALL ORGANIZATIONS AND SOCIAL SECURITY NUMBER IF A USA CITIZEN IS BEING PAID FOR A SERVICE.
- ORGANIZATION'S TAX EXEMPT IRS LETTER OR, IF A FOREIGN ENTITY, COMPARABLE LETTER FROM THAT COUNTRY.

ONCE A CONTRACT IS EXECUTED, THE FUNDS ARE SENT TO THE GRANT RECIPIENT VIA CHECK OR WIRE TRANSFER FOLLOWING THE NORMAL CASH DISBURSEMENT PROCESS. GENERALLY, ALL PAYMENTS TO FOREIGN ACCOUNTS ARE MADE VIA WIRE TRANSFER.

RECORD KEEPING: IN ADDITION TO OUR ONLINE MANAGEMENT SYSTEM FOUNDANT, A GRANT FOLDER IS MAINTAINED ON PANTHERA'S SHARE DRIVE. THESE TWO

Page 5

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

REPOSITORIES STORE GRANTEE INFORMATION INCLUDING LETTER OF INTENT AND/OR APPLICATION; GRANT APPROVAL LETTER; PANTHERA GRANT AGREEMENT, BUDGET AND REPORTING DATA.

GRANT MONITORING: GRANTEES ARE REQUIRED TO SUBMIT AN INTERIM NARRATIVE PROGRESS REPORT WITHIN 30 DAYS OF THE SIX MONTH ANNIVERSARY OF THE BEGINNING OF THE TERM AND A FINAL NARRATIVE PROGRESS REPORT UPON COMPLETION OF AGREED UPON ACTIVITIES WITHIN 60 DAYS OF THE ONE-YEAR ANNIVERSARY OF THE BEGINNING OF THE TERM.

IF THE GRANTEE HAS NOT SUBMITTED A REQUIRED REPORT WITHIN TWO WEEKS OF THE DUE DATE, PANTHERA WILL CONTACT THE GRANTEE DIRECTLY. IF THE GRANTEE FAILS TO SUBMIT A NARRATIVE OR FINAL FINANCIAL REPORT, CONSIDERATION FOR FUTURE FUNDING WILL BE COMPROMISED.

GRANTEES WILL ALSO SUBMIT INTERIM FINANCIAL ACCOUNTING OF THE PROJECT EXPENSES WITHIN 60 DAYS OF THE ONE-YEAR ANNIVERSARY OF THE BEGINNING OF THE TERM. GRANTEES ARE NOT REQUIRED TO PROVIDE SPECIFIC RECEIPTS; HOWEVER, REPORTING REQUIRES COMPARISON OF THE ACTUAL EXPENSES TO THE APPROVED BUDGET (THE DETAILS OF WHICH ARE EVALUATED AS PART OF THE APPROVAL PROCESS).

FINANCE MONITORING - THE FINANCE DEPARTMENT MAINTAINS EXCEL WORKSHEETS RELATED TO ALL GRANTS OR AWARDS MADE BY PANTHERA DURING THE YEAR. A SEPARATE SCHEDULE IS MAINTAINED FOR 1) GRANTS/AWARDS TO US ORGANIZATIONS. 2) GRANTS/AWARDS TO US INDIVIDUALS. 3) GRANTS/AWARDS TO FOREIGN ORGANIZATIONS. 4) GRANTS/AWARDS TO FOREIGN INDIVIDUALS. THE ENTRIES ARE 332075 11-29-23

Schedule F (Form 990) 2023

Part V					rmatio required		t I, line 2	(monito	oring o	f fund:	s); Part	I, line 3	8, C	olumn (f) (accou	nting	metho	d; amoun	ts of
														accounting metl y additional info				
MADE	то	THE	API	PROPE	RIATE	WOI	RKSHE	ET A	AT 1	HE	TIM	E OF	٠]	RECORDIN	G 1	THE		
														S SERVE			BASI	S FOR
														ARATION.				
1 1111		1111	<u> </u>	11101	11111	01111	1 OIG	<u> </u>	0 50	,,,,,,,	<u> </u>	1111						
																		_

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization	Employer identification number							
PANTHER		20-4668756						
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the 	e X Solicita f Solicita g X Specia or oral agreement with any individual art VII) or entity in connection with pyriduals or entities (fundraisers) pursu	ation of ation of I fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	to (d	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
SANKY COMMUNICATIONS, INC		Yes	No					
360 W. 31ST STREET, FLOOR 6,	DIRECT MAIL CONSULTANTS		Х	0.		198,779.	-198,779.	
						198,779.	-198,779.	
3 List all states in which the organization or licensing. AL, AK, AZ, AR, CA, CO, CT, SOH, OK, OR, PA, RI, SC, SD, SOH, OK, OR, PA, RI, SC, SD, SOH, OK, OK, OK, OK, OK, OK, OK, OK, OK, OK	DE,FL,GA,HI,IL,KS,	KY,M						

SEE PART IV FOR CONTINUATIONS
LHA 332081 09-13-23

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2023

20-4668756 Page 2 PANTHERA CORPORATION Schedule G (Form 990) 2023 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (total number) (event type) (event type) 1 Gross receipts 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses **10** Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _

Schedule G (Form 990) 2023 332082 09-13-23

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain:

Sch	edule G (Form 990) 2023 PANTHERA CORPORATION 20	-466	8756	Page 3
11	Does the organization conduct gaming activities with nonmembers?	\square	Yes	☐ No
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?	. \square	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	. 13a	a	%
b	An outside facility	131	<u> </u>	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
45.	Deep the experimentian have a contract with a third party from whom the experimentary receives gaming revenue?		Yes	No
ıba	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		_ 1es	
h	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
_	If "Yes," enter name and address of the third party:			
·	in 165, Cited Hame and address of the tillid party.			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
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 \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, I	ines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
<u>SC</u>	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	<u> </u>		
<i>/</i> T	\ NAME OF FINDDATCED. CANKY COMMINICATIONS INC			
<u>(I</u>) NAME OF FUNDRAISER: SANKY COMMUNICATIONS, INC.			
/т) ADDRESS OF FUNDRAISER: 360 W. 31ST STREET, FLOOR 6, NEW YOR	Z 1.T'	v 1	0001
<u> </u>	, ADDRESS OF FONDRAISER: 300 W. SIST STREET, FEOOR 0, NEW TOR	. , IV		0001
PA	RT I, LINE 2B, COLUMN (V):			
<u>T</u> H	E MONTHLY FEE FOR THE ABOVE STRATEGIC CONSULTING SERVICES WIL	<u>BE</u>		
	,195.00. IN ADDITION TO THE MONTHLY FEE FOR STRATEGIC CONSULT	<u> ING</u>		
SE	RVICES, IN 2023 SCI WILL INVOICE:			

Part IV Supplemental Information (continued)						
- \$52,250 IN CREATIVE AND PRODUCTION COSTS. THIS WILL BE PAYABLE TO						
SANKY COMMUNICATIONS, INC. IN MONTHLY INSTALLMENTS OF \$5,225.00.						
- \$52,750 IN DIGITAL THIRD PARTY COSTS, INCLUSIVE OF SCI'S FEES. THIS						
WILL BE PAYABLE TO SANKY COMMUNICATIONS, INC. IN MONTHLY INSTALLMENTS OF						
\$5,275.00.						
- \$12,500 IN DIRECT MAIL THIRD PARTY COSTS. THIS WILL BE PAYABLE TO						
SANKY COMMUNICATIONS, INC. IN MONTHLY INSTALLMENTS OF \$1,250.00.						

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

PANTHERA	CORPORATT	ON					20-4668756
Part I General Information on Grants a		011					20 1000,30
Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's properties. Part II Grants and Other Assistance to II	stance? ocedures for monit	oring the use of grant	funds in the United	States.			X Yes No
recipient that received more than \$	\$5,000. Part II can	be duplicated if additi	ional space is need	ed.	(f) Method of	T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
FISHING CAT CONSERVATION ALLIANCE							
FM 1227 RD NAVASOTA, TX 77868	80-3629619	501C(3)	150,000.	0.			CONSERVATION RESEARCH
UNIVERSITY OF MONTANA 32 CAMPUS DRIVE							
MISSOULS, MT 59812	81-0362989	501C(3)	39,559.	0.			CONSERVATION RESEARCH
UNIVERSITY OF IDAHO 875 PERIMETER DRIVE MOSCOW, ID 83844	82-6000945	501C(3)	6,354.	0.			CONSERVATION RESEARCH
HOME RANGE WILDLIFE RESEARCH PO BOX 1345 WINTHROP, WA 98862	87-2209175	501C(3)	10,000.	0.			CONSERVATION RESEARCH
QUINAULT INDIAN NATION 1214 AALIS DR TAHOLAH, WA 98587			62,485.	0.			CONSERVATION RESEARCH
UC SANTA CRUZ FOUNDATION 1156 HIGH STREET SANTA CRUZ, CA 95064	23-7394590	501C(3)	16,915.	0.			CONSERVATION RESEARCH
2 Enter total number of section 501(c)(3) at 3 Enter total number of other organizations	nd government org	ganizations listed in th	e line 1 table				5.

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

Schedule I (Form 990) 2023

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CONCEDIVATION DEGEADOR	8	01 000	0.		
CONSERVATION RESEARCH	0	91,088.	0.		
Part IV Supplemental Information. Provide the information req	L uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2:					
GRANT APPLICATION PROCESS: PANTHER	A MAKES G	RANTS VIA	TWO PROCES	SES: ONE IS	
OUR OPEN APPLICATION GRANT PROGRAM	(SEE PAN	THERA GRAN	ITS AND AWA	RDS): THE	
OTHER IS PROVIDING GRANTS TO ESTABL					
	IISIIED FA	KINEKS IN	CONSERVATI	ON GENERALLI	
USED WITHIN SPECIES PROGRAMS.					
PANTHERA CORPORATION HAS THE WINSTO	ON COBB,	SABIN SNOW	LEOPARD G	RANT	
PROGRAM, KAPLAN GRADUATE AWARD AND	SMALL CA	T ACTION F	UND GRANTS	•	

Part IV | Supplemental Information

APPLICATION PROCESS: AN APPLICANT IS ELIGIBLE TO APPLY IF THEIR PROJECT

PROPOSAL MEETS THE CRITERIA LISTED ON OUR WEBSITE FOR ONE OF OUR GRANT

PROGRAMS. GRANT PROPOSALS MUST BE SUBMITTED TO PANTHERA VIA AN ONLINE

GRANTS MANAGEMENT SYSTEM CALLED FOUNDANT. AT THE CLOSE OF THE GRANT ROUNDS,

PANTHERA WILL SEND GRANT APPLICATION RECEIPTS TO ALL APPLICANTS.

GRANTS PROPOSALS ARE REVIEWED INTERNALLY BY STAFF CONSISTING OF PANTHERA'S

GRANT PROGRAM MANAGER, CONSERVATION SCIENCE DEPARTMENT DIRECTOR, CHIEF

SCIENTIST, AND RELEVANT SPECIES DIRECTORS AND OTHER STAFF. THIS INITIAL

REVIEW PROCESS REMOVES PROPOSALS WHICH DO NOT SATISFY THE APPLICATION

CRITERIA AND SELECTS PROPOSALS FOR FURTHER REVIEW. FROM THIS POINT, ALL

PROPOSALS ARE REVIEWED BY AT LEAST TWO AND TYPICALLY THREE OR MORE PANTHERA

STAFF MEMBERS. THE STAFF MEMBERS WILL, IF DEEMED APPROPRIATE, UTILIZE THE

EXTERNAL MEMBERS OF OUR SCIENTIFIC COUNCIL AND OTHER EXTERNAL EXPERTS TO

ASSIST US IN THOSE AREAS WHERE WE MAY NOT HAVE THE NECESSARY LEVEL OF

EXPERTISE TO FULLY EVALUATE THE GRANT APPLICATION. IN THE CASE OF THE SMALL

CATS ACTION FUND, ALL PROPOSALS ARE ADDITIONALLY REVIEWED BY THE CO-CHAIRS

OP IUCN CAT SPECIALIST GROUP.

FOLLOWING THE REVIEW PROCESS, THE FUNDING DECISION IS MADE BY A SELECTED STAFF TAKING INTO CONSIDERATION AVAILABLE FUNDING CONTAINED IN OUR BUDGET AND PRIOR COMMITMENTS.

EACH APPROVED GRANT RECIPIENT SIGNS A PANTHERA GRANT AGREEMENT THAT WILL

SPECIFY THE TERMS AND AMOUNT OF THE GRANT. IT REQUIRES THAT THE PROJECT

INVOLVES EXCLUSIVELY CHARITABLE, EDUCATIONAL OR SCIENTIFIC ACTIVITIES THAT

ARE DESCRIBED IN SECTION 170 (C) (2) (B) OF THE UNITED STATES INTERNAL

REVENUE CODE OF 1983 1 AS AMENDED (THE "CODE"); AND SET FORTH REPORTING

Schedule I (Form 990)

Part IV | Supplemental Information

REQUIREMENTS AND ACCOUNTABILITY OVER FUNDS. IN ADDITION. THE CONTRACT

INCLUDES APPROPRIATE WORDING RELATIVE TO THE FOREIGN CORRUPT PRACTICES ACT.

AS PART OF THE GRANT PROCESS WE REQUIRE THE FOLLOWING INFORMATION:

- 1. ORGANIZATION'S EIN FOR ALL ORGANIZATIONS AND SOCIAL SECURITY NUMBER IF A USA CITIZEN IS BEING PAID FOR A SERVICE.
- 2. ORGANIZATION'S TAX EXEMPT IRS LETTER OR, IF A FOREIGN ENTITY, THE COMPARABLE LETTER FROM THAT COUNTRY.

ONCE A CONTRACT IS EXECUTED, THE FUNDS ARE SENT TO THE GRANT RECIPIENT VIA

CHECK OR WIRE TRANSFER FOLLOWING THE NORMAL CASH DISBURSEMENT PROCESS.

GENERALLY, ALL PAYMENTS TO FOREIGN ACCOUNTS ARE MADE VIA WIRE TRANSFER.

RECORD KEEPING: IN ADDITION TO OUR ONLINE MANAGEMENT SYSTEM FOUNDANT, A

GRANT FOLDER IS MAINTAINED ON PANTHERA'S SHARE DRIVE. THESE TWO

REPOSITORIES STORE GRANTEE INFORMATION INCLUDING LETTER OF INTENT AND/OR

APPLICATION; GRANT APPROVAL LETTER; PANTHERA GRANT AGREEMENT, BUDGET AND

REPORTING DATA.

GRANT MONITORING: GRANTEES ARE REQUIRED TO SUBMIT AN INTERIM NARRATIVE

PROGRESS REPORT WITHIN 30 DAYS OF THE SIX MONTH ANNIVERSARY OF THE

BEGINNING OF THE TERM AND A FINAL NARRATIVE PROGRESS REPORT UPON COMPLETION

OP AGREED UPON ACTIVITIES WITHIN 60 DAYS OF THE ONE-YEAR ANNIVERSARY OF THE

BEGINNING OF THE TERM.

IF THE GRANTEE HAS NOT SUBMITTED A REQUIRED REPORT WITHIN TWO WEEKS OF THE

DUE DATE, PANTHERA WILL CONTACT THE GRANTEE DIRECTLY. IF THE GRANTEE FAILS

332291

Supplemental information
TO SUBMIT A NARRATIVE OR FINAL FINANCIAL REPORT, CONSIDERATION FOR FUTURE
FUNDING WILL BE COMPROMISED.
GRANTEES WILL ALSO SUBMIT INTERIM FINANCIAL ACCOUNTING OF THE PROJECT
EXPENSES WITHIN 60 DAYS OF THE ONE-YEAR ANNIVERSARY OF THE BEGINNING OF THE
TERM. GRANTEES ARE NOT REQUIRED TO PROVIDE SPECIFIC RECEIPTS; HOWEVER,
REPORTING REQUIRES COMPARISON OF THE ACTUAL EXPENSES TO THE APPROVED BUDGET
(THE DETAILS OF WHICH ARE EVALUATED AS PART OF THE APPROVAL PROCESS).
FINANCE MONITORING - THE FINANCE DEPARTMENT MAINTAINS EXCEL WORKSHEETS
RELATED TO ALL GRANTS OR AWARDS MADE BY PANTHERA DURING THE YEAR. A
SEPARATE SCHEDULE IS MAINTAINED FOR 1) GRANTS/AWARDS TO US ORGANIZATIONS.
2) GRANTS/AWARDS, TO US INDIVIDUALS. 3) GRANTS/AWARDS TO FOREIGN
ORGANIZATIONS. 4) GRANTS/AWARDS TO FOREIGN INDIVIDUALS. THE ENTRIES ARE
MADE TO THE APPROPRIATE WORKSHEET AT THE TIME OF RECORDING THE TRANSACTION
IN THE GENERAL LEDGER. THESE SCHEDULES SERVE AS THE BASIS FOR FEDERAL
INFORMATION RETURN FORM 990 SCHEDULE PREPARATION.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

PANTHERA CORPORATION

Employer identification number 20-4668756

P	art I Questions Regarding Compensation	4000/30	,	
. ,	act Questions regulating compensation		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		103	140
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
	Discretionary spending account i ersonal services (such as maid, chadned)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
ļ	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а		4a		Х
b		4.		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?			Х
_	If "Yes" on line 5a or 5b, describe in Part III.			
3	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а		6a		Х
	Any related organization?			Х
b	, -			
b	If "Yes" on line 6a or 6b, describe in Part III.			
	If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7		Х
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			X
b 7 8	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III			

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

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) FREDERIC LAUNAY	(i)	463,378.	0.	0.	0.	0.	463,378.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) KEVIN MCNULTY	(i)	262,119.	0.	0.	0.	0.	262,119.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) CAROLYN GIBSON	(i)	176,822.	0.	0.	0.	0.	176,822.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) JOSEPH SMITH, PHD	(i)	176,169.	0.	0.	0.	0.	176,169.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) KAREN WOOD	(i)	174,938.	0.	0.	0.	0.	174,938.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ERIC VENTURA	(i)	174,200.	0.	0.	0.	0.	174,200.	0.	
EXECUTIVE DIR OF BUSINESS DEVELOPMEN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) HISHAM FAHIM	(i)	162,187.	0.	0.	0.	0.	162,187.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)					_			

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
UNRELATED ORGANIZATION COMPENSATION
FREDERIC LAUNAY'S COMPENSATION AMOUNT OF \$463,378 WAS PAID BY AN
UNRELATED ORGANIZATION FOR HIS SERVICES AS PRESIDENT/CEO OF PANTHERA
CORPORATION.

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Part I Excess	Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29
	PANTHERA CORPORATION
Maine of the organization	<i>,</i> 1

Employer identification number 20-4668756

9) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b (d) Corrected? (b) Relationship between disqualified (a) Name of disqualified person (c) Description of transaction person and organization Yes No (1) (2) (3) (4) (5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization

reported an amount on Form 990, Part X, line 5, 6, or 22.

	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) W agreer	ritten ment?
				То	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total						\$							

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990) 2023

	orm 990) 2023 Business Tra				RPORATION ested Perso				20-4668	3756	Page 2
	Complete if the o			_			221	o or 28c			
	Name of intereste		<u>riswereu</u>	(b) Relation	onship between n and the orgar	intereste		(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
										Yes	No
(1)LEENA	IYENGAR	-TUNE	INTO	LEENA	IYENGAR	HAS	Α	24,416.	CONSULTING		Х
(2)											
(3)							_				
(4)							_				-
<u>(5)</u>							-				
(6) (7)											
(8)											
(9)											
(10)											
	Supplementa										
!	Provide additiona	l information	for respo	nses to que	estions on Sche	edule L. S	ee in	structions.			
SCH L,	PART IV,	BUSINE	SS TI	RANSAC	TIONS IN	1VOLV	ING	INTERESTE	D PERSONS:		
(A) NAM	E OF PER	SON: LE	ENA	IYENGA	R -TUNE	INTO	ΕA	ARTH SARL			
(B) REL	ATIONSHI	P BETWE	EN II	NTERES	TED PERS	SON A	ND	ORGANIZATI	ON:		
									AUNAY, PRES	CEO	
										,	
(D) DES	CRIPTION	OF TRA	NSAC'	rion:	CONSULT	ING S	ERV	/ICES			

Schedule L (Form 990) 2023

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Employer identification number

	PANTHERA COR	PORATI	ON			20-46	687	756	
Pai	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported contribution Form 990, Part VIII, lin	n	(d) Method of dete noncash contribution			s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	1	8,465,44	11.NY	SE			
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 ()								
26	Other ()								
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organization	zation durino	the tax vear for c	ontributions					
	for which the organization completed Form 82	,	,					0	
		oo,. a, _						Yes	No
30a	During the year, did the organization receive by	v contributio	n any property rep	orted in Part I lines 1 th	hrough 28	that it			110
000	must hold for at least 3 years from the date of				-	, triat it			
	exempt purposes for the entire holding period?			or for the quired to be t			30a		Х
b	If "Yes," describe the arrangement in Part II.	•				·····	- Jou		
31	Does the organization have a gift acceptance	oolicy that re	equires the review (of any nonstandard con	tributions'	?	31	х	
	Does the organization hire or use third parties	-	•	•		·	"		
UZA			•				32a		х
b	If "Yes," describe in Part II.						JE a		
33	If the organization didn't report an amount in c	olumn (c) for	r a type of property	for which column (a) is	checked				
55	describe in Part II.	Ciaiiii (C) 101	i a type of property	ioi willon column (a) is	, oriconeu,				
	accompc iii i ait ii.								

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

PANTHERA CORPORATION

Employer identification number 20-4668756

AMENDED STATEMENT

THE ORGANIZATION IS AMENDING ITS FORM 990 TO REPORT KEY EMPLOYEE JOSEPH

SMITH AND HIS COMPENSATION. THIS INFORMATION IS REPORTED ON PART VII

AND SCHEDULE J, PART II. ADDITIONALLY, PART IX, LINES 5 AND 7 ARE

UPDATED TO REPORTED THIS AMOUNT.

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

CHEETAH - PANTHERA SEEKS TO PROTECT CHEETAHS BY ADDRESSING DIRECT

THREATS TO THEM, THEIR PREY BASE AND THEIR HABITATS. TO DO THIS,

PANTHERA GATHERS CRITICAL ECOLOGICAL DATA BY SURVEYING AND MONITORING

POPULATIONS AND THEIR PREY, COLLABORATING WITH LOCAL LAW ENFORCEMENT

OFFICIALS AND PARTNERS, AND WORKING WITH LOCAL COMMUNITIES TO MITIGATE

CONFLICT AND CREATE CHEETAH-POSITIVE AND SCAPES WITHIN COMMUNITIES.

PANTHERA'S APPROACH TO PROTECTING CHEETAHS FOCUSES ON DEVELOPING AN

INTEGRATED TRANSBOUNDARY PROGRAM BASED IN ZAMBIA, BUT OPERATING OVER

THE 5-COUNTRY KAZA LANDSCAPE, WHICH IS THE LANDSCAPE IN THE KAVANGO AND

ZAMBEZI RIVER BASINS, AND EVENTUALLY EXPANDING ACROSS THE CHEETAH'S

AFRICAN RANGE. MIXED SPECIES LANDSCAPE WITH MULTIPLE CAT SPECIES

BENEFITING FROM PANTHERA'S INTERVENTIONS.

SNOW LEOPARD - PANTHERA DEVELOPED A STATE-OF-THE-ART GLOBAL RANGE MAP

AND DATABASE OF SNOW LEOPARD HABITATS AND HELPS DELINEATE CRITICAL

CONSERVATION UNITS AND IDENTIFY PREVAILING THREATS. USING THE DATABASE

TO TARGET POPULATIONS THAT REQUIRE CONSERVATION, PANTHERA'S EFFORTS ARE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization

PANTHERA CORPORATION

Employer identification number 20-4668756

GEARED TOWARDS A RANGE-WIDE APPROACH IN CONSERVING THE SNOW LEOPARDS.

PUMA - PANTHERA IS WORKING TO BETTER UNDERSTAND AND PROTECT PUMAS IN

THE WESTERN U.S. (NORTHWEST WYOMING, THE SAN FRANCISCO BAY AREA AND

OLYMPIC PENINSULA) AND IN THE TORRES DEL PAINE NATIONAL PARK REGION IN

THE CHILEAN PATAGONIA. PANTHERA'S WORK INCLUDES STUDYING THE EFFECTS OF

WOLF REINTRODUCTION AND HUMAN HUNTING ON PUMA POPULATIONS, UTILIZING

INNOVATIVE CAMERA TECHNOLOGY TO OBSERVE THE SECRET SOCIAL LIVES OF

PUMAS, CHARACTERIZING DISPERSAL DYNAMICS AND IMPEDIMENTS, AND

MITIGATING HUMAN-PUMA CONFLICT. A RANGE-WIDE ASSESSMENT OF THE STATUS

OF PUMAS, FROM PATAGONIA TO BRITISH COLUMBIA IS ALSO UNDERWAY.

PANTHERA'S WORK INCLUDES STUDYING THE EFFECTS OF WOLF REINTRODUCTION

AND HUMAN HUNTING ON PUMA POPULATIONS, UTILIZING INNOVATIVE CAMERA

TECHNOLOGY TO OBSERVE THE SECRET SOCIAL LIVES OF PUMAS, CHARACTERIZING

DISPERSAL DYNAMICS AND IMPEDIMENTS, AND MITIGATING HUMAN-PUMA CONFLICT.

A RANGE-WIDE ASSESSMENT OF THE STATUS OF PUMAS, FROM PATAGONIA TO

BRITISH COLUMBIA, IS ALSO UNDERWAY.

SMALL CATS - PANTHERA ALSO WORKS TO UNDERSTAND AND CONSERVE THE 33

SPECIES OF SMALL WILD CATS. PRIORITIES FOR THIS PROGRAM ARE TO FOCUS ON

THE LEAST UNDERSTOOD CATS, TO ENHANCE CURRENT DATA COLLECTION ON BIG

CAT STUDY SITES TO GATHER SMALL CAT DATA, AND TO STRATEGICALLY

ESTABLISH NEW SITES OF HIGH CONSERVATION VALUE FOR SMALL CATS.

TECH - PANTHERA'S TECHNOLOGY PROGRAM DEVELOPED DEVICES AND SOFTWARE
SUPPORTING SPECIES PROGRAMS, INCLUDING CAMERA TRAPS AND POACHERCAMS.

PANTHERA INTEGRATES THIRD PARTY PRIVATE

Schedule O (Form 990) 2023 Page 2 **Employer identification number** Name of the organization PANTHERA CORPORATION 20-4668756 GSM (GLOBAL SYSTEM FOR MOBILE) WIRELESS EQUIPMENT, AS WELL AS SYSTEMS TO MONITOR POACHERCAM DEPLOYMENTS. SCHOLARSHIPS AND AWARDS - PANTHERA PROVIDES SCHOLARSHIPS AND AWARDS TO POST-GRADUATE STUDENTS IN ADVANCED DEGREE PROGRAMS TO WORK ON RESEARCH AND PROJECTS IN THE CONSERVATION EFFORTS OF LARGE CAT SPECIES AND THEIR ENVIRONMENTS. PANTHERA, IN CONJUNCTION WITH THE AMERICAN MUSEUM OF NATURAL HISTORY, DEVELOPED A GLOBAL FELID GENETIC DATABASE TO UNDERSTAND THE IMPACT OF LARGE SCALE GENETIC ISSUES IMPACTING FELIDS, AND NOW WORKS THROUGH THE NATIONAL GENOMICS CENTER FOR WILDLIFE AND FISH CONSERVATION IN MISSOULA, MONTANA, FOR MOST OF ITS GENETIC ANALYSIS NEEDS. THE INDIVIDUAL PROGRAMS ARE ESTABLISHED AND OVERSEEN BY TWO DIVISIONS: CONSERVATION SCIENCE AND CONSERVATION ACTION. CONSERVATION SCIENCE IS THE GROUP THAT EVALUATES, FROM A SCIENTIFIC BASIS, THE SCIENCE RESEARCH OUTCOMES AND HOW THEY WILL BE USED TO DEVELOP ACTIVITIES THAT INTEGRATE INTO CONSERVATION ACTION. THE CONSERVATION ACTION DIVISION CONTAINS PANTHERA'S GLOBAL AND REGIONAL FIELD PROGRAMS, ASSOCIATED PERSONNEL AND INFRASTRUCTURE TO IMPLEMENT THE CONSERVATION ACTION PLANS DEVELOPED BY THE CONSERVATION SCIENCE DIVISION. EXPENSES \$ 13,892,265. INCLUDING GRANTS OF \$ 757,861. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

BELIZE, BRAZIL, COLOMBIA, COSTA RICA,

HONDURAS, UNITED KINGDOM, FRANCE, MEXICO,

SOUTH AFRICA, ZAMBIA, GABON, SENEGAL,

MALAYSIA, THAILAND, CANADA

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization PANTHERA CORPORATION Employer identification number 20-4668756

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

THE FINANCE COMMITTEE REVIEWS FORM 990 IN ITS ENTIRETY IN DETAIL WITH THE

CONTROLLER. COPIES OF THE FORM 990 ARE THEN PROVIDED TO THE BOARD OF

DIRECTORS AND THE TAX FORM IS APPROVED AND FILED WITH IRS ON BEHALF OF THE

BOARD OF DIRECTORS AFTER THE REVIEW PROCESS.

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

DISCLOSURE OF POTENTIAL CONFLICT OF INTEREST:

DIRECTORS, OFFICERS AND KEY EMPLOYEES HAVE A DUTY TO DISCLOSE THE EXISTENCE
OF ANY MATERIAL FACTS ABOUT ANY PERSONAL RELATIONSHIP HAVING A PERSONAL OR
FINANCIAL INTEREST IN A PROPOSED TRANSACTION, CONTRACT OR COMPENSATION
ARRANGEMENT WITH PANTHERA OR BASED ON THE DIRECTOR'S, OFFICER'S OR KEY
EMPLOYEE'S RELATIONSHIP OR POSITION IN PANTHERA. THE POTENTIAL CONFLICT OF
INTEREST MUST BE DISCLOSED BEFORE THE TRANSACTION, CONTRACT OR ARRANGEMENT
IS REVIEWED, AUTHORIZED, APPROVED, OR RATIFIED. THE PERSONAL INTEREST MAY
ARISE BECAUSE THE DIRECTOR, OFFICER OR KEY EMPLOYEE HAS A RELATIONSHIP OR
PERSONAL FINANCIAL INTEREST IN A PROPOSED TRANSACTION, CONTRACT, OR
COMPENSATION ARRANGEMENT ("IMMEDIATE FAMILY" MEANS THE DIRECTOR'S,
OFFICER'S OR KEY EMPLOYEE'S SPOUSE, CHILDREN, OR INDIVIDUAL (S) RESIDING IN
THE DIRECTOR'S, OFFICER'S OR KEY EMPLOYEE'S HOME).

COMPLIANCE REVIEW:

PANTHERA'S CORPORATE SECRETARY IS RESPONSIBLE FOR CIRCULATING DISCLOSURE

FORMS TO DIRECTORS, OFFICERS AND KEY EMPLOYEES CONFIRMING ON AN ANNUAL

BASIS THAT THE FORMS ARE KEPT UP TO DATE AND INFORMING THE BOARD OF

Schedule O (Form 990) 2023 Page 2

Name of the organization PANTHERA CORPORATION Employer identification number 20-4668756

DIRECTORS OF ACTUAL OR POTENTIAL CONFLICT OF INTEREST.

ENFORCEMENT OF CONFLICTS POLICY:

FOLLOWING ANY DISCLOSURE OF A POTENTIAL CONFLICT OF INTEREST BY A DIRECTOR,

OFFICER OR KEY EMPLOYEE, THE BOARD OF DIRECTORS' AUDIT COMMITTEE WILL

REVIEW THE DISCLOSURE AND DETERMINE WHETHER AN ACTUAL CONFLICT EXISTS. THE

BOARD OF DIRECTORS' AUDIT COMMITTEE THEN MAY OR MAY NOT AUTHORIZE OR

APPROVE THE PROPOSED TRANSACTION OR OTHER MATTER AS FAIR AND REASONABLE BY

A VOTE WITHOUT COUNTING THE VOTE OR VOTES OF SUCH INTERESTED PERSON OR

PERSONS. THE PERSON WITH A CONFLICT OF INTEREST MAY BE PRESENT FOR OR

PARTICIPATE IN THE DISCUSSION OF THE PROPOSED TRANSACTION OR OTHER MATTER

IF DEEMED APPROPRIATE BY THE CHAIRPERSON OF THE MEETING OR BY THE BOARD OF

DIRECTORS' AUDIT COMMITTEE. POTENTIAL CONFLICTS OF INTEREST OF OTHER THAN

KEY EMPLOYEES WILL BE REVIEWED BY THE AUDIT COMMITTEE, WHICH CONSISTS OF

THE PANTHERA EXECUTIVE OFFICERS IN A MANNER SIMILAR TO

THAT UTILIZED BY THE BOARD OF DIRECTORS' AUDIT COMMITTEE.

VIOLATIONS OF THE CONFLICTS OF INTEREST POLICY:

IF THE BOARD OF DIRECTORS HAS REASONABLE CAUSE TO BELIEVE THAT A DIRECTOR,
OFFICER OF KEY EMPLOYEE HAS FAILED TO DISCLOSE A POTENTIAL/ACTUAL CONFLICT
OF INTEREST, IT WILL INFORM THE INDIVIDUAL OF THE BASIS FOR THE BELIEF AND
AFFORD THE INDIVIDUAL THE OPPORTUNITY TO EXPLAIN THE FAILURE TO DISCLOSE.
THE BOARD OF DIRECTORS MAY TAKE WHATEVER FOLLOW-UP ACTION IT DEEMS
NECESSARY AND, AT ITS OPTION, MAY VOID A TRANSACTION, CONTRACT OR
ARRANGEMENT WHERE A POTENTIAL OR ACTUAL CONFLICT OF INTEREST EXISTS THAT
HAS NOT BEEN DISCLOSED.

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Employer identification number Name of the organization PANTHERA CORPORATION 20-4668756 ANNUAL STATEMENTS: EACH DIRECTOR, OFFICER AND KEY EMPLOYEE WILL ANNUALLY SIGN THE DISCLOSURE FORM AND THE CERTIFICATION FORM THAT AFFIRMS THAT THE DIRECTOR, OFFICER OR KEY EMPLOYEE: A) RECEIVED A COPY OF PANTHERA'S BOARD OF DIRECTORS, OFFICERS AND KEY EMPLOYEES' CONFLICT OF INTEREST POLICY; B) READ AND UNDERSTAND THE POLICY; C) AGREED TO COMPLY WITH THE POLICY; D) UNDERSTANDS THAT PANTHERA IS A CHARITABLE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS TAX EXEMPT STATUS, IT MUST ENGAGE PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF ITS TAX EXEMPT PURPOSES; AND E) COMPLIES WITH THE POLICY OTHER THAN ACTUAL OR POTENTIAL CONFLICTS OF INTERESTS THAT MAY EXIST AND HAVE BEEN DISCLOSED TO THE CORPORATE SECRETARY OF TO THE BOARD OF DIRECTORS. ANY DIRECTOR, OFFICER OR KEY EMPLOYEE WHO FINDS OR SUSPECTS A VIOLATION OF THIS POLICY MUST IMMEDIATELY REPORT THE CONDUCT TO THE CHAIRMAN OF THE BOARD OF DIRECTORS AND/OR THE CORPORATE SECRETARY. ANY EMPLOYEE OR AGENT MAY REPORT CONDUCT THAT MAY BE IN VIOLATION OF THIS POLICY TO THE CHAIRMAN OF THE BOARD OF DIRECTORS, CORPORATE SECRETARY, OFFICERS OR HIS OR HER MANAGER.

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

Schedule O (Form 990) 2023 Page 2

Name of the organization

PANTHERA CORPORATION

Employer identification number 20-4668756

15A) A COMPENSATION ARRANGEMENT FOR THE CEO IS BASED ON A WRITTEN

EMPLOYMENT CONTRACT ESTABLISHED BY THE CEO IN CONJUNCTION WITH THE BOARD OF

DIRECTORS AT THE TIME OF INITIAL EMPLOYMENT. THE FINANCE COMMITTEE, AFTER

THE REVIEW OF SUCH INFORMATION, ESTABLISHES THE OFFICERS AND KEY EMPLOYEES'

SALARY LEVELS ANNUALLY AND DOCUMENTS THE PROCESS IN THE FINANCE COMMITTEE

MINUTES.

15B) PANTHERA'S FINANCE COMMITTEE OF THE BOARD OF DIRECTORS EVALUATES EACH OFFICER'S AND KEY EMPLOYEE'S INDIVIDUAL DUTIES, RESPONSIBILITIES, EDUCATIONAL BACKGROUND, WORK EXPERIENCE AND PAST PERFORMANCE (IF APPLICABLE) TO SET FAIR RATES OF COMPENSATION. PANTHERA SEEKS TO PROVIDE COMPENSATION THAT IS CONSISTENT WITH PREVAILING RATES AT SIMILAR NOT-FOR-PROFIT ORGANIZATIONS FOR COMPARABLE JOB FUNCTIONS CONSISTENT WITH THE ANNUAL BUDGET APPROVED BY THE BOARD OF DIRECTORS. UNDER PANTHERA'S BYLAWS, A BOARD OF DIRECTOR'S MEMBER SHALL NOT RECEIVE COMPENSATION FOR ANY SERVICES RENDERED IN SUCH CAPACITY, BUT MAY BE REIMBURSED FOR REASONABLE AND CUSTOMARY EXPENSES INCURRED. ALL OFFICERS' AND KEY EMPLOYEES' COMPENSATION IS ESTABLISHED ANNUALLY BASED ON SALARIES PAID BY COMPARABLE TAX EXEMPT ORGANIZATIONS, BASED ON PUBLICLY AVAILABLE INFORMATION, INCLUDING OTHER ORGANIZATIONS' FORM 990 FILINGS, INDEPENDENT SALARY SURVEY STUDIES AND SUCH OTHER INFORMATION AS DEEMED APPROPRIATE. THE FINANCE COMMITTEE, AFTER THE REVIEW OF SUCH INFORMATION, ESTABLISHES THE OFFICERS' AND KEY EMPLOYEES' SALARY LEVELS ANNUALLY AND DOCUMENTS THE PROCESS IN THE FINANCE COMMITTEE MINUTES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,IL,KS,KY,ME,MD,MI,MA,MN,MS,NH,NJ,NM,NY,ND

OH,OK,OR,PA,RI,SC,SD,TN,UT,VA,WA,WV,WI,WY

Schedule O (Form 990) 2023 Page **2**

Name of the organization PANTHERA CORPORATION	Employer identification number 20-4668756
FORM 990, PART VI, SECTION C, LINE 19:	
A COPY OF PANTHERA'S FINANCIAL STATEMENTS WILL BE AVAILABI	LE UPON REQUEST.
IF THE REQUEST IS MADE IN PERSON, IT WILL BE HONORED ON TH	HE DAY OF THE
REQUEST; IF IT IS WRITTEN, THEN PANTHERA WILL RESPOND WITH	HIN 30 DAYS OF THE
INITIAL REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER PROFESSIONAL SERVICE FEES:	
PROGRAM SERVICE EXPENSES	4,324,428.
MANAGEMENT AND GENERAL EXPENSES	1,103,302.
FUNDRAISING EXPENSES	
TOTAL EXPENSES	5,490,651.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	5,490,651.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
OTHER COMPREHENSIVE GAIN ON FOREIGN EXCHANGE	-29,421.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization PANTHERA COI	RPORATION				E	mployer identific 20-46687		ımber
Part I Identification of Disregarded Entities. Con	mplete if the organization answered "	Yes" on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	me End-of-year		Direct c	(f) ontrolling itity)
Identification of Related Tax-Exempt Organization	poizations. Complete if the organiza	tion answored "Vos" on Form 900	Part IV line 34	possuso it had one	or mor	o related tay even	nnt	
Part II organizations during the tax year.	anizations. Complete il the organiza	tion answered fes on Form 990	, Part IV, III le 34, I	Decause it riad one	or more	e related tax-exer	прі	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Dire	(f) ect controlling entity		g) 512(b)(13) rolled tity?
				501(c)(3))			Yes	No
PANTHERA WILDLIFE TRUST LTD. 23 WILSON AVENUE, HENLEY ON THAMES OXFORDSHIRE, UNITED KINGDOM	CAT CONSERVATION	UNITED KINGDOM			PANTH	ERA RATION	X	
PANTHERA BRASIL	CAI CONDERVATION	ONITED KINGDOM			CORPO	RATION	_ A	
URA BARAO DE MELGAGO, 40 ANDAR					PANTH	ERA		
CUIABA, BRAZIL	CAT CONSERVATION	BRAZIL			CORPO	RATION	X	
FUNDACION PANTERA COLOMBIA					L			
CAR. 7 3156-80, OFICINA 904 BAGOTA, COLOMBIA	CAT CONSERVATION	COLOMBIA			PANTH CORPO	ERA RATION	х	
PANTHERA WILD CAT CONSERVATION ZAMBIA					PANTH	ERA		

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

LIMITED, HOOK BRIDGE LODGE, MUMBWA, ZAMBIA

Schedule R (Form 990) 2023

CORPORATION

ZAMBIA

CAT CONSERVATION

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	contr organi	g) 512(b)(13) rolled zation?
PANTHERA WILDCAT CONSERVATION SA				33.(5)(5))		Yes	No
13 ORCHARD AVENUE, LAKESIDE	7				PANTHERA		
CAPE TOWN, SOUTH AFRICA	_ CAT CONSERVATION	SOUTH AFRICA			CORPORATION	X	
PANTHERA CANADA							
C/O COLLINS BARROW TORONTO, LLP					PANTHERA		
TORONTO, CANADA	CAT CONSERVATION	CANADA			CORPORATION	х	
PANTHERA FRANCE							
10 RE DE PANTHIEVRE	7				PANTHERA		
PARIS, FRANCE	CAT CONSERVATION	FRANCE			CORPORATION	х	
PANTHERA HONDURAS							
3415 BLOQUE L, COL. LOS ROBLES	7				PANTHERA		
TEGUCIGALPA, HONDURAS	CAT CONSERVATION	HONDURAS			CORPORATION	х	
PANTHERA WILD CAT CONSERVATION BELIZE							
P.O. BOX 460	7				PANTHERA		
BELMOPAN CITY, BELIZE	CAT CONSERVATION	BELIZE			CORPORATION	х	
PANTHERA WILD CAT CONSERVATION MALAYSIA							
WISMA TUN SAMBANTHAN NO 2	7				PANTHERA		
KUALA LUMPUR, MALAYSIA	CAT CONSERVATION	MALAYSIA			CORPORATION	х	
CONSERVACION PANTHERA MEXICO AC							
RECREO #48 INT A COL CENTRO	7				PANTHERA		
SAN MIGUEL DE ALLENDE, MEXICO GTO 37700	CAT CONSERVATION	MEXICO			CORPORATION	Х	
PANTHERA WILD CAT CONSERVATION SENEGAL							
19 AU PDT L.S. SENGHUR					PANTHERA		
DAKAR, SENEGAL	CAT CONSERVATION	SENEGAL			CORPORATION	X	
PANTHERA THAILAND							
75-9 PREUKSAKAN MOO 1					PANTHERA		
KANCHANABURI, THAILAND	CAT CONSERVATION	THAILAND			CORPORATION	Х	
PANTHERA COSTA RICA							
EDIFFICIO DEL CCT, DEL SERVICENTRO EL HIGUER					PANTHERA		
SAN PEDRO, COSTA RICA	CAT CONSERVATION	COSTA RICA			CORPORATION	X	
PANTHERA GABON							
583 CORNICHE					PANTHERA		
FRANCEVILLE, GABON	CAT CONSERVATION	GABON			CORPORATION	Х	

Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated,	Share of total income	Share of end-of-year	1	ortionate	Code V-UBI amount in box	General managir	Percentage ownership
orrelated organization		(state or foreign	5	(related, unrelated, excluded from tax under sections 512-514)		assets		itions?	20 of Schedule	partner	1
		country)		sections 512-514)			Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes N	
-											
							<u> </u>				
-											

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
		,						Yes	No

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	c Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b	X	
С	Gift, grant, or capital contribution from related organization(s)	1c		X
	Loans or loan guarantees to or for related organization(s)	1d		X
е	Loans or loan guarantees by related organization(s)	1e		_X_
f	Dividends from related organization(s)	1f		_X_
	Sale of assets to related organization(s)	1g		_X_
	Purchase of assets from related organization(s)	1h		X
	Exchange of assets with related organization(s)	1i		X
	Lease of facilities, equipment, or other assets to related organization(s)	1j		_X_
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		_X_
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		_X_
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		_X_
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		_X_
0	Sharing of paid employees with related organization(s)	10		_X_
р	Reimbursement paid to related organization(s) for expenses	1p	X	
	Reimbursement paid by related organization(s) for expenses	1q		_X_
r	Other transfer of cash or property to related organization(s)	1r	X	
s	Other transfer of cash or property from related organization(s)	1s	X	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PANTHERA WILDLIFE TRUST LTD.	В	983,097.	COST
(2) PANTHERA BRASIL	В	618,518.	COST
(3) FUNDACION PANTERA COLOMBIA	В	552,910.	COST
(4) PANTHERA WILDCAT ZAMBIA LTD	В	1,748,439.	COST
(5) PANTHERA WILDCAT CONSERVATION SA	В	2,087,174.	COST
(6) PANTHERA FRANCE	В	26,561.	COST

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) PANTHERA HONDURAS	В	125,325.	COST
(8) PANTHERA WILD CAT CONSERVATION BELIZE	В	67,743.	COST
(9) PANTHERA WILD CAT CONSERVATION MALAYSIA	В	1,582,477.	COST
(10) CONSERVACION PANTHERA MEXICO AC	В	60,129.	COST
(11) PANTHERA THAILAND	В	796,816.	COST
(12) PANTHERA COSTA RICA	В	402,448.	COST
(13) PANTHERA GABON	В	268,215.	COST
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
_(21)			
(22)			
(23)			
(24)			

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									