Christina R Talley, CPA, PLLC

401 N San Francisco Street Flagstaff, AZ 86001 christina@talleygold.com Phone: (928)774-8900 | Fax: (928)774-8901

Invoice Date: 04/07/2023

Keepers of the Wild 13441 E Highway 66 Valentine, AZ 86437

Your 2022 tax return was prepared by Christina Talley.

2022 Tax Preparation

Thank you for your business!

Total Fee

\$ 1,750.00

Total Balance Due \$ 1,750.00

. . Please make your check payable to: Christina Talley, CPA 401 N San Francisco Street, Flagstaff, AZ 86001.

We also accept Zelle payments using christina@talleygold.com

If you prefer, you may pay by debit/credit by calling us at 928-774-8900.

FOR TAX YEAR 2022

KEEPERS OF THE WILD

Christina R Talley, CPA, PLLC 401 N San Francisco Street Flagstaff, AZ 86001 (928)774-8900

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April 07, 2023

Keepers of the Wild 13441 E Highway 66 Valentine, AZ 86437

Subject: Preparation of 2022 Tax Returns

Keepers of the Wild:

We have prepared the 2022 federal and state income tax returns for Keepers of the Wild. We depend on management to provide the information we need to prepare complete and accurate returns. We may ask management to clarify some items but will not audit or otherwise verify the data submitted.

We will perform accounting services only as needed to prepare the tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for management to clarify some of the information submitted. We will, of course, inform management of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Please call us if there are any concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on the behalf of Keepers of the Wild, the alternative selected by management, so long as it was consistent with the codes and regulations and interpretations that have been promulgated. When possible, we have resolved questions involving application of tax rules in your favor, if there was reasonable justification for doing so. If the Internal Revenue Service or other taxing and government agencies should later contest the position taken, there may be an assessment of penalties or, if applicable, additional tax plus interest. We assume no liability for such additional penalties, interest, or assessments. Additional services will be subject to arrangements made in writing at the time requested.

Invoices are due and payable upon presentation. To the extent permitted by state law, an interest charge may be added to all accounts not paid within thirty (30) days. All work will be suspended if your account becomes 90 days past due. No work will resume until your account is fully paid. If at any time it becomes necessary to assign your outstanding balance due to an outside collection agency or attorney for collection of monies owed to our firm, you agree to, in addition to the balance owed, pay all related collection and/or legal costs and fees.

We will return the original records to management at the end of this engagement. These records, along with all supporting documents, canceled checks, etc., should be securely stored, as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of the records and our work papers for the engagement for seven years, after which these documents will be destroyed.

Our engagement to prepare the 2022 tax returns will conclude with the delivery of the completed returns to management (if paper-filing) or with the tax matters partner's signature and our subsequent submittal of the tax return (if e-filing). If management has not selected to e-file the returns with our office, management will be solely responsible to file the returns with the appropriate taxing authorities. The tax matters partner should review all tax-return documents carefully before signing them.

To affirm that this letter correctly summarizes the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. For further assistance with your tax return needs, contact our office at (928)774-8900.

Sincerely,

Christian Lelly

Christina Talley Christina R Talley, CPA, PLLC

Accepted By:

Officer

Date

Christina R Talley, CPA, PLLC

401 N San Francisco Street Flagstaff, AZ 86001 christina@talleygold.com Phone: (928)774-8900 | Fax: (928)774-8901

April 07, 2023

Keepers of the Wild 13441 E Highway 66 Valentine, AZ 86437

Keepers of the Wild:

Enclosed is the 2022 federal return for a tax-exempt organization, prepared for Keepers of the Wild from the information provided. The return was e-filed with the IRS and was accepted on March 31, 2023.

The federal return reflects neither a refund nor a balance due.

Enclosed is the 2022 Arizona Income Tax return for Keepers of the Wild, prepared from the information provided. Mail the signed and dated original on or before April 18, 2023, to the following address:

Arizona Department of Revenue PO Box 52153 Phoenix, AZ 85072-2153

The organization's Arizona Income Tax return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (928)774-8900.

Sincerely,

Christian Lelling

Christina Talley Christina R Talley, CPA, PLLC

4	Acknowledgement and General Information for Entities That File Returns Electronically	2022
Name(s) as shown on return		Employer Identification Number
Keepers of the Wild Entity address 13441 E Highway 66 Valentine, AZ 86437	7	5277
		led electronically.
an electronic signature. T	income tax retum was accepted on <u>03-31-2023</u> using a P The entity entered a PIN or authorized the Electronic Retum Originator (ERO) ned to this retum is <u>8627472023090suhbcfp</u>	

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Open to Public

epartment of the Treasury	
ternal Revenue Service	

Internal Revenue Service			Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection			
A	For the	e 2022 calend	lar year, or tax year beginning , 2022, and ending		, 20			
B	Check if	applicable:	C Name of organization Keepers of the Wild	D Emplo	over identification number			
	Address	change	Doing business as	88-0345277 E Telephone number				
<u>п</u>	Name ch	lange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite					
Πı	nitial retu	urn	13441 E Highway 66	(928)769-1800 G Gross receipts				
_ ı	inal retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code					
Ī,	Amendeo	d return	Valentine, AZ 86437	\$	2,282,107			
Ī,	Applicatio	on pending		roup return fe	or subordinates? Yes X No			
_			H(b) Are all s	all subordinates included?				
	ax-exer	npt status: X	501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," a	attach a lis	t. See instructions			
٦١	Vebsite		v.keepersofthewild.org H(c) Group e	xemption r	number			
ĸ	Form of o	organization: X	Corporation Trust Association Other L Year of formation: 1995 M S	tate of lega	al domicile: AZ			
Pa	rt I	Summar	·y					
	1	Briefly descr	ribe the organization's mission or most significant activities: Protect and Care for Exo t	tic An	nimals			
ЭС								
Governance								
Nel	2	Check this be	ox 🗌 if the organization discontinued its operations or disposed of more than 25% of its net assets.					
ö	3	Number of v	voting members of the governing body (Part VI, line 1a)	3	8			
s S	4	Number of ir	ndependent voting members of the governing body (Part VI, line 1b)	4	8			
itie	5	Total numbe	er of individuals employed in calendar year 2022 (Part V, line 2a)	5	32			
Activities &	6	Total numbe	er of volunteers (estimate if necessary)	6	10			
∢	7a	Total unrelat	ted business revenue from Part VIII, column (C), line 12	7a	0			
	b	Net unrelate	ed business taxable income from Form 990-T, Part I, line 11	7b	0			
			Prior Year		Current Year			
	8	Contributions	s and grants (Part VIII, line 1h)	,274	1,838,262			
ne	9	Program ser	rvice revenue (Part VIII, line 2g) 284	,224	260,043			
Revenue	10	Investment in	ncome (Part VIII, column (A), lines 3, 4, and 7d)	,457	4,532			
Re	11	Other revenu	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	,110	93,562			
	12	Total revenue	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,386	,065	2,196,399			
	13	Grants and s	similar amounts paid (Part IX, column (A), lines 1-3)		0			
	14	Benefits paid	d to or for members (Part IX, column (A), line 4)		0			
	15	Salaries, oth	her compensation, employee benefits (Part IX, column (A), lines 5-10) 619	,300	700,122			
ses	16a	Professional	I fundraising fees (Part IX, column (A), line 11e)	,075	76,754			
Expenses	b	 Total fundrai 	ising expenses (Part IX, column (D), line 25) 160,983					
Щ	17		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	,360	1,730,085			
	18	Total expens	ses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,196	,735	2,506,961			
	19	Revenue les	ss expenses. Subtract line 18 from line 12	,330	(310,562)			
Poc.			Beginning of Curre	nt Year	End of Year			
sets	20		(Part X, line 16)	-	2,133,755			
Net Assets or	21			,049	278,351			
	·		pr fund balances. Subtract line 21 from line 20	,370	1,855,404			
	rt II		ire Block					
			clare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and beli claration of preparer (other than officer) is based on all information of which preparer has any knowledge.	ef, it is				
Sia	n		Kraft					
Sig		Signature of offic		Dat	e			
Her	е		Kraft, Chairperson					
		Type or print nar	Descende sins burger		DTIN			
D . 1	-1		eparer's name Preparer's signature Date Check	L "	PTIN			
Pai			ina Talley 04-07-2023 self-emp	oloyed	P00852911			
Pre	pare	Firm's name	Christina R Talley, CPA, PLLC Firm's EIN					

For Paperwork Reduction Act Notice, see the separate instructions.

401 N San Francisco Street

928-774-8900

. . . .

. .

Phone no.

Use Only Firm's address

Form	n 990 (2022) Keepers of the Wild	88-0345277 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	Protect and Care for Exotic Animals	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes 🗶 No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 🕱 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	-
4a	(Code:) (Expenses \$ 2,151,524 including grants of \$) (Revenue of the second seco	
	Protect and care for exotic animals that have been either neglected or abu	ised.
4b	(Code:) (Expenses \$ including grants of \$) (Revent	ue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Reven	ue \$)
<u> </u>		
4d	Other program services (Describe on Schedule O.))
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 2,151,524)
EEA		Form 990 (2022

	1990 (2022) Keepers of the Wild 88-0345	277	F	age 3
Pa	rt IV Checklist of Required Schedules		1	T
			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	х	
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 similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
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? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
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		х
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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? 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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
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 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		x
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, 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	x	
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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
				<u> </u>

Form	1 990 (2022) Keepers of the Wild 88-0345	277	P	Page 4
Pa	rt IV Checklist of Required Schedules (continued)		Vee	Na
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
~~	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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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 or 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	07		
20	persons? If "Yes," complete Schedule L, Part III	27		X
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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV.	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a		x
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
Ū	"Yes," complete Schedule L, Part IV.	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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
b	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		
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		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	• • •		
4 -	Enter the number constraints and a form 4000. Enter 0, if not any first the		Yes	No
1a ⊾	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
b c	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>'</u>		
U	reportable gaming (gambling) winnings to prize winners?	1c	x	
			n 000	(2022

Form	990 (2022) Keepers of the Wild 88-03452	77	F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		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 returm			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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 instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	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		х
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 any contributions that were not tax deductible as charitable contributions?	6a		x
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).			
а	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?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	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	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	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		x
	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 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.			

For	m 990 (2022) Keepers of the Wild 88-034	5277	F	Page 6
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "No		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instruc	tions.		
	Check if Schedule O contains a response or note to any line in this Part VI			х
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	8		
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent	8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	x	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6	x	
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?	7a		x
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
2	the year by the following:	80	v	
a b	The governing body?	8a 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00	x	
3	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	5		_ <u>n</u>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
	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?		x	
b				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
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	x	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14	x	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b		x
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		x
b				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	4.01		
<u> </u>	organization's exempt status with respect to such arrangements?	16b		
	List the atotec with which a copy of this Form 000 is required to be filed			
17 19	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1022 (1024 or 1024 A, if applicable), 990, and 990 T (section 501(c))			
18	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			
	 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain on Schedule O) 			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
13	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.			
	Dianna Kenney (928)769-1800, 13441 E Highway 66, Valentine, AZ 86437			
	Jamma Kenney (J20,705 1000, 15111 1 mighway 00, Valencine, Al 00157			

Form 990 (202	2) Keepers of the Wild	88-0345277	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	mpensated Employe	es, 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 Er	nployees	
1a Complete t	his table for all persons required to be listed. Report compensation for the calendar year ending with c	or within the	
organization's	ax year.		
 List all of 	the organization's current officers, directors, trustees (whether individuals or organizations), regardles	ss 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.

• 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 instructions for the order in which to list the persons above.

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

			npon		(C)	ny oun				
					sition					
(A)	(B)	(do not check more than one box, unless person is both an officer and a director/trustee)		(D)	(E)	(F)				
Name and title	Average hours			Reportable compensation	Reportable compensation	Estimated amount of other				
	per week	offic	er and	a dii	rector	(trustee)		from the	from related	compensation
	(list any		_	_	T	• -		organization (W-2/	organizations (W-2/	from the
	hours for	ndiv or dir	nstit	Officer	(ey e	High	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	related	ecto	utior	Ÿ	pub	est c	er	1099-INEC)	1099-NEC)	Telated organizations
	organizations	Individual trustee or director)al tr		Key employee	° mp				
	below dotted line)	stee	Institutional trustee		U	Highest compensated employee				
	dolled line)		e			ated				
(1) Theodora_Jory										
Board Member		х						0	0	0
(2) Mimi Morissette										
Vice Chairperson		x						0	0	0
(3) Charles McHaffie										
Board Member		x						0	0	0
(4) James C Burkett										
Board Member		x						0	0	0
(5) Mike Daves										
Board Member		x						0	0	0
(6) Lara Kraft	50.00									
Chairperson				x				0	0	0
(7) Dwight Jory	40.00									
Treasurer				x				0	0	0
(8) Kelsey Burkett	40.00									
Secretary				х				0	0	0
<u>(9)</u>										
(10)										
<u>(11)</u>										
(12)										
(13)										
(14)										
										F ame 200 (0000)

	90 (2022) Keepers of the Wi										8-03452			age 8
Part	VII Section A. Officers, Directors, T	rustees,	Key I	Emp		,	s, ar	nd F	Highest Comp	ensated	Emplo	oyees	(cont	inued,
	(A) Name and title	(B) Average hours per week (list any	box offic	, unles er and	Pos eck m ss per d a di	rson is rector	nan one s both a /trustee)	n)	(D) Reportable compensation from the organization (W-2/	(E) Reporta compensa from rela organization	ble ation ited	cor	(F) ated am of other npensat rom the	
		hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MI 1099-NE			nization I organiz	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c d	Subtotal		•••						0		0			0
2	Total number of individuals (including but not limit reportable compensation from the organization									of				0
3	Did the organization list any former officer, direc	tor. trustee.	kev en	volar	/ee.	or h	iahest	t cor	npensated				Yes	No
4	employee on line 1a? <i>If "Yes," complete Schedu</i> For any individual listed on line 1a, is the sum of re	le J for such	indivio	dual.	•••	••				••••		3		x
-	organization and related organizations greater th	an \$150,000	0? If "Y	′es,"	con	nplet	te Sch	edu	le J for such					
5	individual	compensati	on from	any	unr	elate	ed org	aniz	ation or individual			4		x
Secti	for services rendered to the organization? If "Yes on B. Independent Contractors	s, complete	Sched	uie .	J TOP	SUC	n pers	son	••••	••••		5		X
1	Complete this table for your five highest compensa													
	compensation from the organization. Report comp (A)	ensation to	the cal	enua	ai ye		nung		(B)		k year.	(C)		
	Name and business addres	S							Description of servic	es		Compens	ation	
2	Total number of independent contractors (includin	g but not lim	nited to	thos	e lis	ted a	above) wh	0					
	received more than \$100,000 of compensation fro	-			-			-						

Form 9		22) <u>Keep</u> e	rs	of the W	wild				88-03452	77 Page 9
Part	VIII	Statement of Rev	enu	le						
		Check if Schedule O co	ontair	ns a respons	se or n	ote to any line in this	s Part VIII			[
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
<i>(</i>)	b	Membership dues		1b						
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events		1c	1,314,776					
ng G	d	Related organizations .			1d					
Sifts ar A	е	Government grants (contr	ributi	ons)	1e					
s, si inii	f	All other contributions, gif	ts, gi	ants,						
er S		and similar amounts not i	ncluc	led above	1f	523,486				
Qthor	g									
ont ind		lines 1a-1f	•••		1g	\$				
0 6	h	Total. Add lines 1a-1f	••				1,838,262			
		22 Adoptions				Business Code				
e	2a	Adoptions				900099				
ωŚ	b	Tours				900099	260,043	260,043		
Sei	С									
Program Service Revenue	d									
lõo.		f All other program service revenue								
Γ.										
	g	Total. Add lines 2a-2f .				260,043				
	3	Investment income (includi								
		other similar amounts) .				-	8,012	8,012		
	4	Income from investment of		•	•	-				
	5	Royalties								
	60	Gross rents	6a	(i) Rea	1	(ii) Personal				
		Less: rental expenses	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss)								
		, , , , , , , , , , , , , , , , , , ,	, . 	(i) Securiti		(ii) Other				
	/a	Gross amount from sales of assets		(1) 000011	100					
		other than inventory	7a		15					
	b	Less: cost or other basis								
Ð		and sales expenses	7b	3	,495					
enu	c	Gain or (loss)			,480					
Rev		Net gain or (loss)					(3,480)	(3,480)		
Other Revenue	8a	Gross income from fundra	ising							
g		events (not including \$	1,	314,776	_					
		of contributions reported o	on line	e						
		1c). See Part IV, line 18			8a					
		Less: direct expenses .				,				
		Net income or (loss) from		aising even	ts					
	9a	Gross income from gaming	-							
		activities, See Part IV, line								
		Less: direct expenses .			9b					
	С	Net income or (loss) from	gami	ng activities	; <u></u>					
	10a	Gross sales of inventory, I								
		returns and allowances .								
		Less: cost of goods sold			10k					
	C	Net income or (loss) from	sales	s of inventor	у		93,562	93,562		
						Business Code				
e	11a									
enu	b									
Miscellanous Revenue	C d	All other revenue								
Ξ		Total. Add lines 11a-11d								
		Total revenue. See instru					2,196,399	358,137	0	0
								/	U U	. 0

Keepers of the Wild

L	rt IX Statement of Functional Expenses				
Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all o	-	nizations must complet	e column (A).	
	Check if Schedule O contains a response or note to	, , , , , , , , , , , , , , , , , , ,			
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
-	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	07 000	62.050	04 050	0 500
c	trustees, and key employees	97,000	63,050	24,250	9,700
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	E4E 0E1	368,860	121,385	54,806
8	Pension plan accruals and contributions (include	545,051	308,800	121,385	54,800
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2,685	1,343	1,342	
10	Payroll taxes	55,386	41,613	12,289	1,484
11	Fees for services (nonemployees):	55,500	41,015	12,205	1,101
a	Management				
b		29,181	27,681	1,500	
c	Accounting	23,197	5,800	5,800	11,597
d		207207	5,000	57000	
e	Professional fundraising services. See Part IV, line 17 .	76,754			76,754
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
5	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	173,121	173,121		
13	Office expenses	97,191	87,472	9,719	
14	Information technology	48,239	45,827		2,412
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,276		1,276	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	169,921	169,921		
23	Insurance	37,303	34,692	2,611	
24	Other expenses. Itemize expenses not covered				
	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.)				
a	Animal Awareness	408,240	408,240		
b	Animal Supplies	304,627	304,627		
C	Education Materials	271,430	271,430		
d	Postage Expense	21,029	18,926	2,103	
e	All other expenses	145,330	128,921	12,179	4,230
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	2,506,961	2,151,524	194,454	160,983
20	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)				
	10110WILLY SOF 30-2 (ASC 300-120)				

Form 990 (2				88	8-03	45277 Page 1
Part X	Balance Sheet					-
	Check if Schedule O contains a response or note	e to ar	ny line in this Part X		•••	-
				(A)		(B)
				Beginning of year		End of year
1	Cash - non-interest-bearing			642,220	1	471,175
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net		3			
4	Accounts receivable, net		4			
5	Loans and other receivables from any current or former of					
	trustee, key employee, creator or founder, substantial cor		_			
	controlled entity or family member of any of these persor				5	
6	Loans and other receivables from other disqualified perso					
	under section 4958(f)(1)), and persons described in sect				6	
<u>دم</u> 7	Notes and loans receivable, net				7	
Assets 6 8	Inventories for sale or use		60,956	8	60,681	
	Prepaid expenses and deferred charges	•••			9	
10a	Land, buildings, and equipment: cost or other					
_	basis. Complete Part VI of Schedule D	10a				
b		10b		1,601,481	10c	1,513,160
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line 11		F		12	
13	Investments - program-related. See Part IV, line 11 .	T T		13		
14	Intangible assets				14	
15	Other assets. See Part IV, line 11		F	180,762	15	88,739
16	Total assets. Add lines 1 through 15 (must equal line 3			2,485,419	16	2,133,755
17	Accounts payable and accrued expenses		T T	276,463	17	258,206
18			18			
19			19			
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete Part IV o				21	
22 	Loans and other payables to any current or former office					
Liabilities	trustee, key employee, creator or founder, substantial con				00	
Lia	controlled entity or family member of any of these person			42 506	22	00.145
- 23	Secured mortgages and notes payable to unrelated third	•		43,586	23	20,145
24	Unsecured notes and loans payable to unrelated third pay		F		24	
25	Other liabilities (including federal income tax, payables to					
	parties, and other liabilities not included on lines 17-24).				25	
26	of Schedule D		E	320,049	25 26	070 251
20	Organizations that follow FASB ASC 958, check here		• • • • • • • • • • • •	320,049	20	278,351
	and complete lines 27, 28, 32, and 33.					
ຮອບ 27	-				27	
					28	
Ba	Organizations that do not follow FASB ASC 958, che				20	
pur	and complete lines 29 through 33.					
ษี ๖ 29	Capital stock or trust principal, or current funds				29	
st: 30	Paid-in or capital surplus, or land, building, or equipment				30	
S 31	Retained earnings, endowment, accumulated income, or			2,165,370	31	1,855,404
	-		F			1,855,404
ž 33						2,133,755
Vet Assets or Fund Balances Net Assets or Fund Balances 30 31 32 33	Total net assets or fund balances	•••	F	2,165,370 2,165,370 2,485,419	32 33	1,8

EEA

Form 990 (2022)

Form	990 (2022) Keepers of the Wild	88-0345277		Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,2	196,	399
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,5	506,	961
3	Revenue less expenses. Subtract line 2 from line 1	3	(:	310,	562)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,2	165,	370
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			596
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	1,8	355 ,	404
Pa	rt 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 O.				
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 separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
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:				
	X Separate basis 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				
	Schedule O.				
3a	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?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 ((2022)

SCHEDULE	Α
(Form 990)	

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.

OMB	No.	1545-0047

. La llia

		t of the Treasury		Attac	n to Form 990 or Form	990-EZ.			Open to Public
Interna	I Re	venue Service	Go to	www.irs.gov/For	m990 for instructions a	and the lat	test inforr	nation.	Inspection
Name	of th	ne organization						Employer identificatio	n number
Keep	er	s of the W	ild					88-034527	7
Par	t I	Reason	for Public Cha	rity Status. (Al	I organizations mus	st comple	ete this p	oart.) See instructi	ons.
The o	rgar	nization is not a	private foundation b	ecause it is: (For lir	nes 1 through 12, check o	only one bo	эх.)		
1		A church, conv	ention of churches,	or association of c	hurches described in se	ction 170(b)(1)(A)(i)		
2	Π	A school descri	ibed in section 170	(b)(1)(A)(ii). (Attac	h Schedule E (Form 990	D).)			
3					ion described in section		(A)(iii).		
4		•	•	•	tion with a hospital desc			(b)(1)(A)(iii). Enter the	
			e, city, and state:	, , .					
5	\square	•		enefit of a college o	r university owned or op	erated by a	aovernme	ental unit described in	
•		-	(1)(A)(iv). (Comple	-			gerenni		
6		.,		,	I unit described in sectio	on 170(b)([,]	1)(Δ)(v)		
7			•	•	art of its support from a g			rom the general public	
•		•	ction 170(b)(1)(A)						
8					(vi). (Complete Part II.)				
9	_				ction 170(b)(1)(A)(ix) of	poratod in	conjunctio	n with a land grant cal	logo
9		•	•				•	-	liege
		-	a non-ianu-grani co	nege of agriculture	(see instructions). Enter	the name,	city, and S	late of the college of	
10		university:		voo: (1) mara than	33 1/3% of its support fro	om oontribu	utiona mor	mbarahin face and are	
10	Δ				subject to certain excep				55
		support from gr	oss investment inco	me and unrelated b	ousiness taxable income	(less secti	on 511 tax		
			0	-	e section 509(a)(2). (Co	•	,	n.	
11		•	•	•	o test for public safety.			•	
12		0	v 1		or the benefit of, to perform			, , ,	
		•			ed in section 509(a)(1)				3). Check
			•	• •	pe of supporting organiza		•	-	
а					ervised, or controlled by i		-		iving
			•		rly appoint or elect a ma		e directors	or trustees of the	
		•	•	-	rt IV, Sections A and B				
b				•	controlled in connection		• •		•
			•		tion vested in the same	persons that	at control o	r manage the supporte	ed
			n(s). You must coi	•					
С					rganization operated in c				with,
			• • • •	,	ou must complete Par				
d			-	•	ng organization operate				
				-	n generally must satisfy a		•	ent and an attentivenes	SS
		—			ete Part IV, Sections A				
е			-		en determination from the			I, Type II, Type III	
		-		-	integrated supporting o	rganizatior).		ī
f			of supported organ		•••••				•••
g			ving information abo		ganization(s).	1			
	(i) Na	ame of supported org	janization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the o	-	(v) Amount of monetary	(vi) Amount of
					above (see instructions))	listed in you docum		support (see instructions)	other support (see instructions)
							• 6		
						Yes	No		
(A)									
<u> </u>									
(B)									
(C)									
(D)									
(E)									
Total									

Schedul	e A (Form 990) 2022 Keepers of					88-034527	
Part	II Support Schedule for Organiza	ations Desci	ribed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you checked th	ne box on line	5, 7, or 8 of	Part I or if the	e organizatior	failed to qua	lify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, pl	ease complet	te Part III.)	-
Sectio	on A. Public Support			•	•	•	
-	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
-	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 3						
4							
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
-	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support	T	1	1	1	1	
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructio	, ns)			12	
13	First 5 years. If the Form 990 is for the o						:)(3)
	organization, check this box and stop her	0				· ·	/ / /
Sectio	on C. Computation of Public Suppo						<u> </u>
14	Public support percentage for 2022 (line 6			11. column (f))		14	%
15	Public support percentage from 2021 Sch		-			15	%
16a	33 1/3% support test - 2022. If the organ					-	
	box and stop here. The organization qua						
b	33 1/3% support test - 2021. If the organ	-	• • • •	-			
~	this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 20	-		-			
17a	10% or more, and if the organization mee	-					
	Part VI how the organization meets the fa						
	-			-	=		_
L	organization						
b	10%-facts-and-circumstances test - 20	-					
	15 is 10% or more, and if the organization					-	
	in Part VI how the organization meets the			-	-		
40	organization						
18	Private foundation. If the organization di						
	instructions						<u></u>

Schedule A (F	Form 990) 2022 Keepers of the Wild	88-0345277	Page 3
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 f	ailed to qualify under F	Part II.
	If the organization fails to qualify under the tests listed below, please complete F	art II.)	
Section /	A Public Support		

	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part I	l.)	
-	on A. Public Support	T	T	T	Т	1	
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the organization's tax-exempt purpose	2,098,068	285,173	262,664	383,334	1,838,262	9,398,936
3	Gross receipts from activities that are not an	313,005	205,175	202,004	303,334	333,003	1,390,401
3	unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	2 411 753	2,002,060	2 036 109	2 355 608	2 101 867	10,997,397
	Amounts included on lines 1, 2, and 3	2,111,733	2,002,000	2,030,109	2,333,000	2,191,007	10,337,337
74	received from disgualified persons .						
b	Amounts included on lines 2 and 3						
~	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
•	line 6.)						10,997,397
Secti	on B. Total Support						20,00,001
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	2,411,753	2,002,060	2,036,109	2,355,608	2,191,867	10,997,397
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	12,597	56,891	62,406	30,457	4,532	166,883
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	12,597	56,891	62,406	30,457	4,532	166,883
11	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 assets						
	(Explain in Part VI.)	3,075	5,300				8,375
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	2,427,425	2,064,251	2,098,515	2,386,065	2,196,399	11,172,655
14	First 5 years. If the Form 990 is for the o						
	organization, check this box and stop he	re					[]
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2022 (line a	8, column (f), d	livided by line	13, column (f))		15	98.43 %
16	Public support percentage from 2021 Sch	nedule A, Part	III, line 15 .			16	98.32 %
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2022 (line 10c, colun	nn (f), divided l	by line 13, colu	mn (f))	17	1.00 %
18	Investment income percentage from 2021						2.00 %
19a	33 1/3% support tests - 2022. If the orga	anization did no	ot check the bo	ox on line 14, a	nd line 15 is m	ore than 33 1/	3%, and line
	17 is not more than 33 1/3%, check this b	oox and stop h	ere. The organ	nization qualifie	es as a publicly	v supported org	ganization 🗴
b	33 1/3% support tests - 2021. If the organization	tion did not chec	k a box on line 1	4 or line 19a, an	d line 16 is more	e than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, check this be	-	-			-	
20	Private foundation. If the organization d	id not check a	box on line 14	, 19a, or 19b, c	heck this box	and see instruc	ctions 🗌

Page 4

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Keepers of the Wild 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). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below. b Did the organization confirm that each supported organization gualified 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. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) С purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked 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. Did the organization support any foreign supported organization that does not have an IRS determination С 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). Type I or Type II only. Was any added or substituted supported organization part of a class already b designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control? С 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 disgualified 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. Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI. С 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. Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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.)

 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 directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization of the organization core to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization (s) that operated, supporting 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)? If "No," describe in Part VI how control or management of the supporting Organizations. 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's supported organizations, by the last day of the fifth month of the organization syster. (i) a written notice describing the type and amount of support provided during the prior tax year. (ii) a written notice describing the type and amount of supported organization? 2 Were any of the organization's directors, or trustees either (i) appointed or ganization's supported organization's supported organization's supported organization's sup	Yes	No
 a A person who directly or indirectly controls, either alone or logether with persons described on lines 11b and 11c below, the governing body of a supported organization? A 15% controlled entity of a person described on 11a or 11b above? A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 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 teats a majority of the organization's officers, directors, or trustees at all lines during the tay year? If "No," describe in Part VI how the supported organization's officers, directors, or trustees and what confide the organization's activities. If the organization's during the tax year? If "No," describe in Part VI how the supported organization's organization, fary, applied to such power during the tax year. 2 Did the organization operate for the benefit of any supported organization (s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations subported organization(s) that operated, supervised, or controlled the supported organization(s). 3 Were a majority 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 supported organization(s)? If "No," describe in Part VI how control or management of the supporting Organizations. 1 Did the organization provide to each of its supported organization(s)? If "No," describe in Part VI how control or management of the supporting Organizations. 1 Did the organization invoite to each of its supported organization(s)? If "No," describe in Part VI how control		-
11c below, the governing body of a supported organization? 11 b A family member of a person described on line 11 a above? 11 c A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11 Section B. Type I Supporting Organizations 11 1 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 diffectively operated, supervised, or controlled the organization stactivities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization and what conditions or restrictions, if any, applied to such powers during the tax year. 1 2 Did the organization operated for the benefit of any supported organization of ther than the support of organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supporting organization? If "Yes," explain in Part VI how control or management of the supporting organization. 2 Section D. Type II Supporting Organizations 1 1 Were a majority of the organization's supported organization, supported organization, supporting organization. 2 2 Were a majority of the organization's supported organization, supported organization for trustees of each of the organizat		
b A family member of a person described on line 11 a above? 11 c A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11 Section B. Type I Supporting Organizations 11 Section B. Type I Supporting organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all lines during the tax yea? ("No," describe NP arV IN ow the supported organization's officers, directors, or trustees were all lines during the tax yea? ("No," describe NP arV IN ow the supported organization (s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization operate for the benefit carried out the purposes of the supporting organization? (I "Yes," explain in Part V N bw rowiding such benefit carried out the purposes of the supporting organization? I "Yes," explain in Part V I how control or management of the supporting organization. 2 Section C. Type II Supporting Organization's directors or trustees during the tax year. (I No," describe in Part V How control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). If "No," describe in Part V how control or management of the supporting Organizations. 1 Section D. All Type III Supporting Organizations 1 Note the supported organization's directors, or trustees either (I) appointed organization? If "No," describe in Part V how control or management of the supporting Organization. 1 Section C. Type III Supporting O		
c A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11 Section B. Type I Supporting Organizations 1 10 Idt 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, describe how the powers to appoint and/or remove officers. directors, or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove officers. directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supported organization(s) that operated. Supervised, or controlled the supporting organization) the provement or result of any supported organization(s) that operated. Supervised, or controlled the supported organization(s) that operated. Supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization, supporting organization. 1 Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organization, to the supported organization's supported organization's differs, directors, or trustees either (i) appointed organization (ii) popointed organization (iii) the governing body of a sup		
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Section B. Type I Supporting Organizations 1 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 teast a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,'' describe in Part W how the supported organization (s) effectively operated, supported organization s activities. If the organization and more supported organization and what conditions or restrictions, if any, applied to such power during the tax year. 1 2 Did the organization operate for the benefit of any supported organization of ther than the supported organization (s) that operated, supported organization. 2 2 Did the organization operate for the benefit of any supported organization(s) that operated, supporting organization. 2 Section C. Type II Supporting Organizations 2 3 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). 1 1 Did the organization provide to each of its supported organization(s)? If 'No,'' describe in Part VI how control or management of the supporting organizations, by the last day of the fifth month of the organization (s) directors, or trustees during the tax year also a majority of the supported organization (s) day of the form 990 that was most recently field as of the date of notification, and (iii) copies of the supported organizations, by the last day of the fifth month of the organization's usypanted organization's supported organization's su		
 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 directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization of the organization core to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization (s) that operated, supporting 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)? If "No," describe in Part VI how control or management of the supporting Organizations. 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's supported organizations, by the last day of the fifth month of the organization syster. (i) a written notice describing the type and amount of support provided during the prior tax year. (ii) a written notice describing the type and amount of supported organization? 2 Were any of the organization's directors, or trustees either (i) appointed or ganization's supported organization's supported organization's supported organization's sup	;	
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 of an exupported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization other than the supported organization so the the benefit of any supported organization of the tax year. 1 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supported organization supported organizations are settly for the supported organization supported organization(s). 2 Section D. All Type III Supporting Organizations 1 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's diffectry, or trustees either (i) appointed organization(s). 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed organiza	Yes	No
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? <i>I'</i> No, "describe in Part VI how the supported organization or controlled the organization activities. If the organization activities at the organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization other than the supported organization operate for the benefit of any supported organization of the tax year. 1 2 Did the organization operate for the benefit of any supported organization of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supported organization(s). 2 Section C. Type II Supporting Organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting Organizations . 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's officers, directors, or trustees either (i) appointed organization(s). 1 Did the organization organization's officers, directors, or trustees either (i) appointed organization		
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how the organization was responsive to those supported organizations, and how the organization determined		
that these activities constituted substantially all of its activities.	_	-
b 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.		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a 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.		
EEA Schedule A	Form 9	90) 202

88-0345277 Page 5

Schedule A (Form 990) 2022Keepers of the WildPart IVSupporting Organizations (continued)

Part	, , , , , , , , , , , , , , , , , , ,			
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			,
	instructions. All other Type III non-functionally integrated supporting organ	izatio	ns must complete Sect	
Secti	on 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		
Secti	on 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		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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		
Secti	on 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-functiona	ally inte	egrated Type III suppo	ting organization

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

Schedule A (Form 990) 2022

Keepers of the Wild

Schedule A (Form 990) 2022

88-0345277

Page 6

	e A (Form 990) 2022 Keepers of the Wild	2) Supporting Organ	88-03	
Part	V Type III Non-Functionally Integrated 509(a)(3	s) Supporting Organ	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes	1	
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi	zations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	<i>VI</i>) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2022	Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
C	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
C	Excess from 2020			
d	Excess from 2021			
e	Excess from 2022			
EEA				Schedule A (Form 990) 2022

	France Representation Provide the explorections required by Part II, line 40, Part II, line 47, or 47, Part
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 B (Form 990)

Department of the Treasury

Schedule of Contributors

OMB No. 1545-0047

2022

Attach to Form 990 or Form 990-PF.

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

Internal Revenue Service			
Name of the organization		Employer ider	ntification number
Keepers of the Wild	1	88-034	15277
Organization type (check or	ne):		

Filers of:	Section:
Form 990 or 990-EZ	■ 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

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during 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; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$

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) (2022)		Page 2
	organization		Employer identification number
	s of the Wild		88-0345277
Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space	ce is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 1 </u>	Waldemar W Sadownski	- \$ <u>5</u> ,	Person Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	James J Santiago Trust	\$15,	Person x Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) S Type of contribution
3	Audrey Hebling Estate Losi M Rosenb	- _\$14, -	Person x Payroll Moncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) S Type of contribution
4	Tracey A Galland Lincoln Invest Pla	\$15,	Person x Payroll 673 Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Debra Turner Shearer Living Trust	- _ \$19,	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
6	Marjorie A Sikes Revocable Trust	_ \$5, _	Person x Payroll Image: Complete Part II for noncash contributions.)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7	Charlotte Rashmi-Graff Charitable T	\$21,925	PersonxPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	Joann Hinkle	\$25,000	PersonxPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9	Dede Anderson Estate Higgins, Rober	\$10,000	PersonxPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
10	Sylvia Johnson American Equity Inv	\$ <u>9,737</u>	PersonxPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
11	Peter Laskas	\$8,000	PersonxPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>12</u>	Joan B Ballitch	\$9,000	PersonxPayrollNoncash(Complete Part II for noncash contributions.)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Employer identification number

88-0345277

Schedule B (Form 990) (2022) Name of organization

Keepers of the Wild

Part I

	s (Form 990) (2022)		Page 2
	organization s of the Wild		Employer identification number 88-0345277
		an of Dort Life delition of one of	
Part I	Contributors (see instructions). Use duplicate copi	es of Part I il additional spac	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Scarlett Makeilsla Foundation	\$16,	Person x Payroll
			noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_14	Fidelity Charitable	\$5,	Person x Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>15</u>	M Alice Grinnell Trust Kerry S Keel	\$15,	Person x Payroll 540 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.)
(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.)

SCHEDULE D	
(Form 990)	

Open to Public

SCHEDULE D		Supplementa	al Financial S	tatements		OMB No. 1545-004	7
(Forn	n 990)	••	nization answered "Y	es" on Form 990,		2022	
	nent of the Treasury		Attach to Form 990.			Open to Public	С
	Revenue Service	Go to www.irs.gov/Form9	90 for instructions an			Inspection	
	of the organization						
Reepe Pa	ers of the W	zations Maintaining Donor Advised	Funda ar Othar Sin	ilar Eunda ar Acca		345277	
Га		te if the organization answered "Yes" of			unis.		
	Comple	te il the organization answered Tes t	(a) Donor ad		0	Euroda and other appaulate	
1	Total number at	end of year	(a) Donor ad		u U	b) Funds and other accounts	
2		of contributions to (during year)					
3		e of grants from (during year)					
4		e at end of year					
5		tion inform all donors and donor advisors in	writing that the assets	held in donor advised			
	funds are the or	ganization's property, subject to the organiza	ation's exclusive legal c	ontrol?		Yes	No
6		tion inform all grantees, donors, and donor a	-				
	only for charitabl	e purposes and not for the benefit of the dor	nor or donor advisor, or	for any other purpose			
	conferring imper	missible private benefit?				Yes	No
Par	t II Conse	rvation Easements.					
	Comple	te if the organization answered "Yes" o	on Form 990, Part I∖	', line 7.			
1	Purpose(s) of co	onservation easements held by the organizat	tion (check all that apply	<i>y</i>).			
	=	of land for public use (for example, recreation	on or education)	Preservation of a his		•	
		natural habitat		Preservation of a ce	rtified hist	oric structure	
		of open space					
2	•	a through 2d if the organization held a qualit	fied conservation contri	bution in the form of a c	onservati	on	
		e last day of the tax year.				Held at the End of the Tax	Year
a		conservation easements					
b	•	estricted by conservation easements					
C		ervation easements on a certified historic str	. ,		2c		
d		ervation easements included in (c) acquired	•		24		
3		listed in the National Register ervation easements modified, transferred, re				during the	
3	tax year	ervation easements modified, transferred, re	eleaseu, extiliguisileu, c	in terminated by the org	anization		
4	·	s where property subject to conservation ea	sement is located				
5		zation have a written policy regarding the pe		ction handling of			
Ū		nforcement of the conservation easements it				Yes	No
6		eer hours devoted to monitoring, inspecting, h					
		3, 1, 3,		3 • • • •		3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
7	Amount of exper	 nses incurred in monitoring, inspecting, hand	lling of violations, and e	enforcing conservation e	asements	during the year	
			-	-			
8	Does each cons	ervation easement reported on line 2(d) abc	ove satisfy the requirem	ents of section 170(h)(4	4)(B)(i)		
	and section 170	(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, desc	cribe how the organization reports conservat	tion easements in its re	venue and expense stat	tement an	d	
	balance sheet, a	nd include, if applicable, the text of the footn	ote to the organization	s financial statements th	nat describ	oes the	
		ccounting for conservation easements.					
Par	t III Organi	zations Maintaining Collections	of Art, Historical	Treasures, or Ot	her Sim	ilar Assets.	
		te if the organization answered "Yes" o					
1a		on elected, as permitted under FASB ASC 9					
		reasures, or other similar assets held for pu			ance of p	ublic	
		in Part XIII the text of the footnote to its fina					
b	-	on elected, as permitted under FASB ASC 9					
		asures, or other similar assets held for public	c exhibition, education,	or research in furtherar	ice of publ	lic service,	
	•	wing amounts relating to these items:				•	
		cluded on Form 990, Part VIII, line 1		•••••		• \$	
		ided in Form 990 Part X				*	

	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the	
	following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	\$

Schedu	e D (Form 990) 2022 Keepers of the							88-034				age 2
Par	t III Organizations Maintaining	g Colle	ections of	Art, His	torical T	reasures	, or Ot	her Similar A	sse	ts (cor	ntinu	ied)
3	Using the organization's acquisition, acces	sion, an	d other record	ds, check a	ny of the fo	blowing that	make się	gnificant use of its				
	collection items (check all that apply):											
а	Public exhibition			d	Loan o	r exchange p	orogram					
b	Scholarly research			е	Other							
с	Preservation for future generations											
4	Provide a description of the organization's	collectio	ons and explai	in how they	y further the	e organizatio	n's exen	npt purpose in Pa	rt			
	XIII.					-						
5	During the year, did the organization solicit	or rece	ive donations	of art, histo	orical treas	ures, or othe	r similar					
	assets to be sold to raise funds rather than									Yes		No
Par	t IV Escrow and Custodial Arr				<u> </u>							_
	Complete if the organization			" on Forr	n 990. P	art IV, line	9. or	reported an ar	nou	nt on F	orm	1
	990, Part X, line 21.	i anon				arer , me	, 0, 0		near		•	
1a	Is the organization an agent, trustee, custo	dian or d	other intermed	liary for cou	otributions	or other ass	ats not					
Ia	included on Form 990, Part X?			-						Yes		No
h	If "Yes," explain the arrangement in Part X					• • • • • •			•••	165		NO
b		in and c	ompiete trie it	ulowing tai	Jie.			•				
-	Designing heleses								moun	L		
C	Beginning balance											
d	Additions during the year											
e	Distributions during the year											
f	Ending balance									—		
2a	Did the organization include an amount on			-							Ц	No
b	If "Yes," explain the arrangement in Part X	III. Cheo	ck here if the e	explanatior	has been	provided on	Part XIII		••			
Par												
	Complete if the organization	nansw	ered "Yes'	on Forr	n 990, P	art IV, line	9 10.	1				
		(a)	Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years bac	<u>k</u>	(e) Four ye	ars ba	ack
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 cu	irrent ve	ar end haland	re (line 1a	column (a))) held as:						
-	Board designated or quasi-endowment			o (into 19,		// 11010 00.						
b		%	/0									
		/0										
С			ual 1000/									
20	The percentages on lines 2a, 2b, and 2c sl			totion that	ara hald an	d a desisiator	ad for th					
3a	Are there endowment funds not in the pos	session	or the organiz		are neio ar	ia administer		e				N -
	organization by:										/es	No
	(i) Unrelated organizations								••	3a(i)		
	(ii) Related organizations									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organ	nizations	listed as requ	uired on Sc	hedule R?	• • • • • •			•	3b		
	Describe in Part XIII the intended uses of			dowment fu	inds.							
Par												
	Complete if the organization	n answ	/ered "Yes'	" on Forr	<u>n 990, P</u>	art IV, line	<u>, 11a. </u>	See Form 990	, Pa	rt X, lir	ie 10	0.
	Description of property		(a) Cost or oth	er basis	(b) Cost o	r other basis	(c)	Accumulated		(d) Book v	alue	
			(investme	ent)	(0	other)	d	epreciation				
1a	Land		20	67,000						26	57,0	00
b	Buildings			46,406				135,185			1,2	
С	Leasehold improvements	1		93,865				1,140,087			53 , 7	
d				50,922				732,882			.8,0	
e	Other	-		73,328				110,207			53,1	
	Add lines 1a through 1e. (Column (d) mus			-	n (R) line	10c.)	1	-		1,51		
EEA		. oquur i	5111 000, i d		(,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	,			hedui	e D (Forr		
								30	nouul	(i°0/I	330	1 -044

Schedule D (Form 990) 2022

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.).		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Direct Mail Account	68,467
(2)peposit with Mail Shops	20,272
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).	88,739

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal inco	ome taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 25	5.)

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.

	le D (Form 990) 2022 Keepers of the Wild	88-0345277	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		
Part		per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part	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.

SCHEDULE G (Form 990)		Supplement Complete if	ng Activities or 19, or if the	OMB No. 1545-0047				
Department of the T Internal Revenue Se		G		tach to Form 9 Fo <i>rm</i> 990 for in		990-EZ. nd the latest informati	on.	Open to Public Inspection
Name of the organization			ie te ministrige m				Employer identifica	
Keepers of							88-034	
		-	-	-		vered "Yes" on F	Form 990, Part IV,	line 17.
		-EZ filers are not				ties. Check all that a	oply	
a x Mail s		-		e	-	of non-government		
b 🗌 Interne	et and e	mail solicitations		f	Solicitation	of government gran	ts	
	e solicita			g	Special fur	ndraising events		
	son solic		oral agroomont w	ith any individ	dual (includir	ng officers, directors,	trustoos	
	-		-	-		sional fundraising se		X Yes 🗌 No
b If "Yes," I	ist the 1		luals or entities (fo		•	•	ch the fundraiser is to b	e
	nd addres	s of individual draiser)	(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No			
1Fund Rais	sing S	Strategies I						
2					X	1,314,776	76,754	1,238,022
-								
3								
4								
5								
6								
7								
8								
9								
10								
Total						1,314,776	76,754	1,238,022
							tified it is exempt from	1/250/022
registratic All States	on or lice	ensing.						

Schedule G	(Form	990	2022

Keepers of the Wild

88-0345277

Page **2**

		gross receipts greater than	¢5 000		n 990-EZ, lines 1 and 6b	
		gross receipts greater than	(a) Event #1 <u>Direct Mail</u> (event type)	(b) Event #2 (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts				
ľ	2 3	Less: Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
səsuə	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses				
Pa	10 11 rt III	Direct expense summary. Add lin Net income summary. Subtract lin Gaming. Complete if the or	ne 10 from line 3, column (d)		nore than
		\$15,000 on Form 990-EZ, li	-			
e				1		1
venu			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenu	1	Gross revenue			(c) Other gaming	
	12	Gross revenue			(c) Other gaming	
Expenses					(c) Other gaming	
Expenses	2	Cash prizes			(c) Other gaming	
Expenses	2 3	Cash prizes	(a) Bingo	bingo/progressive bingo		
Expenses	2 3 4	Cash prizes		bingo/progressive bingo	(c) Other gaming	
	2 3 4 5	Cash prizes	(a) Bingo (a) Bingo (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	bingo/progressive bingo	□ Yes% □ No	
Expenses	2 3 4 5 6	Cash prizes	(a) Bingo	bingo/progressive bingo	☐ Yes% ☐ No	
9	2 3 4 5 6 7 8 En a lst	Cash prizes	(a) Bingo	bingo/progressive bingo	☐ Yes% ☐ No	col. (a) through col. (c))

SCHEDULE O (Form 990)

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. OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number

88-0345277

Department of the Treasury Internal Revenue Service

Name of the organization

Keepers of the Wild

01. Officer, directors, etc. family relationship (Part VI, line 2)

D. Jory (Chairperson) and T. Jory (Board Member): family relation.

K. Burkett (Secretary) and J. Burkett (Board Member): family relation.

02. Members or stockholder classes and rights (Part VI, line 6)

Organization has Board Members.

03. Form 990 governing body review (Part VI, line 11)

Form 990 reviewed by J. Kraft (Director).

04. Conflict of interest policy compliance (Part VI, line 12c)

Conflict of Interest policy is regularly monitored and enforced by the Board.

05. CEO, executive director, top management comp (Part VI, line 15a)

Comparable data was used to determine compensation for the Executive Director and was

approved by the Board.

06. Governing documents, etc, available to public (Part VI, line 19)

Copies provided upon request.

	4562		Depreciatio	on and A	mortizatio	on		OMB No. 1545-0172
Form	4302		(Including Inform			rty)		2022
	nent of the Treasury Revenue Service	Go to	Attacl www.irs.gov/Form4562	h to your tax re for instructio		at information		Attachment Sequence No. 179
	(s) shown on return				nich this form relate			ifying number
	epers of the W	ild	2001100	-	990 - 1	•		345277
Par			rtain Property Und					
	Note: If you	have any listed	property, complete Pa	art V before y	ou complete P	art I.		
1		•	s)				1	
2			placed in service (see				2	
3			perty before reduction	,		·	3	
4			ne 3 from line 2. If zero				4	
5		-	act line 4 from line 1.			-	5	
6			<u></u>				5	
0	(a) L	Description of property	y	(b) Cost (busin	ess use only)	(c) Elected cost		
								-
7	Listed property, E	nter the amount	from line 29		7			
8			property. Add amounts				8	-
9			aller of line 5 or line 8	•			9	
10			from line 13 of your 2				10	
11	Business income lim	itation. Enter the sr	maller of business income	e (not less than	zero) or line 5. S	See instructions	11	
12	Section 179 exper	nse deduction. A	dd lines 9 and 10, but	don't enter n	nore than line	<u>11</u>	12	
13			to 2023. Add lines 9 a			13		
			for listed property. Ins					
						lude listed property. S	ee inst	ructions.)
14			qualified property (otl					
45			NS				14	
15 16			1) election				15 16	18,156
			on't include listed pro				10	10,150
i ui				ection A	Structions.			
17	MACRS deduction	ns for assets place	ced in service in tax ye		a before 2022		17	120,129
18			sets placed in service					
	asset accounts, cl	neck here	· · · · · · · · · · · · · ·					
	Section	B - Assets Plac	ed in Service During	2022 Tax Y	ear Using the	General Depreciatior	n Syste	em
(a)	Classification of propert	(b) Month and yea y placed in service	r (c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) 🛙	Depreciation deduction
19a b	, , , ,		23,382	3	НҮ	200 DB		7,793
	7-yeas pagente/n	t #567						6,981
d								
е		t #568						468
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential renta	I		27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential re	al		39 yrs.	MM	S/L		
	property Section (d in Convine During	2022 Tax Va	MM or Using the (S/L	ion Su	atam
200	Class life	- Assets Place	a in Service During		ar Using the P	Alternative Depreciati	on Sy	stem
	12-year			12 yrs.		S/L S/L		
-	30-year			30 yrs.	MM	S/L	+	
	40-year			40 yrs.	MM	S/L	+	
Par		See instructions.)	10 910.				
21	Listed property. E						21	16,394
			ines 14 through 17, lir	nes 19 and 20) in column (g)	, and line 21. Enter		
			of your return. Partner				22	169,921
23			ed in service during th		-			
	portion of the basi	s attributable to	section 263A costs			23		

Par		I Property (In			certain o	ther ve	hicles,	certai	n aircraft	, and pr	operty	used for			
		inment, recreatio													
		For any vehicle for	•		•		-			•	ase ex	pense, c	omple	te only	24a,
		blumns (a) throug Depreciation an									rnace	ander al	itomoh	ا عمان	
24a		idence to support the				<u>IOII. 00</u>	Yes	No				ence writt			No
			(c)				(e)	,						(i)	
٦	(a) Type of property (li vehicles first)	st Date placed in service	Business/ investment use		(d) other basi	s Basis (busi	s for depre ness/inve	eciation stment	(f) Recovery period	(g Meth Conve	od/	(h) Deprecia deductio		Elected section 17	
			percentage				use only	/				acaucii			
25		eciation allowanc				-			-		0.5				
		and used more th				ess use	. See Ir	ISTRUC	lions	• • •	25				
		d more than 50%		a busine	ess use.							1.0	204		
St	atement #5	69	%									Τ0	,394		
			%												
27	Property use	d 50% or less in a		icinocc	1100:										
21	Flopenty use			15111655	use.					S/L-					
			%							S/L-					
			%							S/L-					
20	Add amounts	in column (h), lir		nh 27 E	ntor hor	o and i	on ling (21 no	go 1		28	10	204		
28 20		in column (i), lin	-	-				-	-		-		,394 29		
29	Add amounts				- Infor r					• • • •	• • • •	• • •	29		
Comr	lata this agation	for vehicles used b								latad na	roop If y		lad vab	ioloo	
		st answer the quest									-			ICIES	
10 y0	ui empioyees, m				(a)		(b)		(c)		d)		es. e)	(f)
20	Total husiness	ínvestment miles di	rivon during		nicle 1		icle 2	Ve	hicle 3	-	cle 4	Vehi		Vehi	
30			0												
24		include commuting	,												
31 32		ig miles driven durir ersonal (noncomi													
52	-														
22		riven during the y													
55		igh 32													
34		cle available for p		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
54		f-duty hours?		163	INU	163		163		163		163	NU	163	NO
35	•	cle used primarily													
55		er or related pers													
36		cle available for per													
50	IS another vern	Section C - Q		Emplo	vers WI	no Pro	uide Ve	hicle	s for Us	 e by Th	eir Fm	nlovee	2		
Ansv	wer these que	stions to determin												/ho are r	\' +
	•	ers or related pe	•		•	.0 0011	ploting	00000		01110100	0000.0	y ompio	,000 ,		
37		ain a written poli				ll perso	onal use	of ve	hicles in	cluding	comm	uting by	/	Yes	No
•	-	es?	-	-		-				-			,		
38		ain a written poli											r		
	-	See the instruction		-	-					-	-				
39		all use of vehicle													
40		de more than five													
-		hicles, and retain													
41		the requirements													
		answer to 37, 38													
Par		rtization	, , - , -		-,										
			(b)			(a)			(4)		(e)			(6)	
	(a Descriptio		Date amortiz begins		Amor	(c) tizable a	mount		(d) Code sectio	n	Amortiza period percent	or	Amortiza	(f) Ition for thi	s year
42	Amortization	of costs that beg	ins during yo	ur 2022	2 tax yea	r (see	instruct	ions):		I		<u> </u>			
43	Amortization	of costs that beg	an before yo	ur 2022	tax yea	r		•••		••••		43			

44 Total. Add amounts in column (f). See the instructions for where to report

Form 4562 (2022)

Keepers of the Wild

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. .

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88-0345277

		Federal Supporting Stateme	ents	2022 PG01
Name(s) as shown on return Keepers of				Tax ID Number 88-0345277
		Form 4562 - Line 19c		Statement #56
Basis 5,436 11,352 6,262 21,800 4,000 Total	RP 7 7 7 7 7	CV HY HY HY HY	Method 200 DB 200 DB 200 DB 200 DB 200 DB	Deduction 777 1,622 895 3,115 572 6,981
		Form 4562 - Line 19e		PG01 Statement #56
Basis 5,400 3,969	RP 15 15	CV HY HY	Method 150 DB 150 DB	Deduction 270 198
Total				

		Feo	leral Supr	orting Stat	eme	ents			2022 PG01
me(s) as shown on return				g etal					Tax ID Number
pers of the Wild									88-0345277
			Form 45	62 - Line 26					Statement #569
scription	Date	%Bus	Cost	Depr Basis	RP	Method	Deduction	179 Ded	
Mercedes	02-06-2014	100	60,108	60,108	5	200DBHY	1,875		
2006 Ford F350 4X4	05-09-2006	100	38,357	38,357	5	200DBHY			
Vehicle - Tour Bus	09-18-2007	100	14,500	14,500	5	200DBHY			
2001 Cadillac DTS	12-17-2012	100	4,500	4,500	5	200DBHY			
1997 Tramstar LFT Power Car & Trailer	01-13-2016	100	34,210	34,210	7	200DBHY	3,055		
2019 Lincoln Navigator	06-19-2019	100	99,513	99,513	5	200DBHY	11,464		
otal							16,394		

* Item is included in UBIA

for Section 199A calculations.

See "UBIA" in lower right corner.

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Social security number/EIN

2022

ł	Ceepers of the Wild	1					I			1		88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
1	F&F: Smoker Recept &	01172014	1,731		100.00			1,731	7		0	1,731		1,731	
2	H: Fencing	01182014	8,000		100.00			8,000	15	150 DB HY	5.91	4,456	473	4,929	473
3	I: Dirt & Gravel for	01242014	4,079		100.00			4,079	15	150 DB HY	5.91	2,274	241	2,515	241
4	H: Fencing	02052014	18,000		100.00			18,000	15	150 DB HY	5.91	10,027	1,064	11,091	1,064
5	V: Mercedes	02062014	60,108		100.00			60,108	5	200 DB HY	0	20,685	1,875	22,560	1,875
6	H: 3 Utility Barns	02122014	6,375		100.00			6,375	15	150 DB HY	5.91	3,552	377	3,929	377
7	V: Polaris ATV	02122014	14,710		100.00			14,710	7		0	14,709		14,709	
8	V: Polaris ATV	02122014	14,710		100.00			14,710	7		0	14,709		14,709	
9	E: Freezer, Cold Boxe	02142014	3,762		100.00			3,762	7		0	3,762		3,762	
10	F&F: File Cabinets, D	02142014	15,855		100.00			15,855	7		0	15,854		15,854	
11	H: Fencing	02252014	13,034		100.00			13,034	15	150 DB HY	5.91	7,261	770	8,031	770
12	E: Hoofstock Barn Equ	03082014	500		100.00			500	7		0	499		499	
13	H: Fencing	03122014	6,000		100.00			6,000	7		0	5,658		5,658	
14	F&F: Desk	03202014	400		100.00			400	7		0	400		400	
15	OE: Computer Equipmen	03202014	893		100.00			893	5		0	893		893	
16	H: Habitat Sheathing	03312014	773		100.00			773	15	150 DB HY	5.91	432	46	478	46
17	BI: Heating & Cooling	04022014	10,844		100.00			10,844	7		0	10,843		10,843	
18	H: Racoon Habitat	04042014	6,333		100.00			6,333	15	150 DB HY	5.91	3,530	374	3,904	374
19	BI: Cabinets in Main	04072014	25,925		100.00			25,925	7		0	25,924		25,924	
20	BI: Kitchen Improv. i	04202014	20,873		100.00			20,873	7		0	20,873		20,873	
21	H: Goat & Llama Habit	04212014	14,996		100.00			14,996	15	150 DB HY	5.91	8,355	886	9,241	886
22	H: Bobcat Cages	04212014	12,866		100.00			12,866	15	150 DB HY	5.91	7,168	760	7,928	760
23	OE: Canon T31 Camera	04232014	749		100.00			749	5		0	749		749	
24	I: Well	05052014	29,943		100.00			29,943	15	150 DB HY	5.91	16,682	1,770	18,452	1,770
25	H: Flight Caging	05142014	7,746		100.00			7,746	15	150 DB HY	5.91	4,315	458	4,773	458
26	I: Privacy Vinyl Fenc	05202014	1,262		100.00			1,262	15	150 DB HY	5.91	702	75	777	75
27	H: Bobcat Enclosure	06022014	7,910		100.00			7,910	15	150 DB HY	5.91	4,407	467	4,874	467
28	H: Animal Boxes	06032014	509		100.00			509	15	150 DB HY	5.91	283	30	313	30
29	BI: Grounds House Rem	06052014	18,814		100.00			18,814	15	150 DB HY	5.91	10,482	1,112	11,594	1,112
30	H: Habitat Panels	06062014	4,028		100.00			4,028	15	150 DB HY	5.91	2,244	238	2,482	238

* Item is included in UBIA

for Section 199A calculations.

See "UBIA" in lower right corner.

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Social security number/EIN

K	eepers of the Wild							Т		T	1	88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
31	BI: Generator, Hookup	06202014	1,539		100.00			1,539	7		0	1,538		1,538	
32	H: Fencng	07012014	6,000		100.00			6,000	15	150 DB HY	5.91	3,343	355	3,698	355
33	H: Hoofstock Habitat	07042014	6,866		100.00			6,866	15	150 DB HY	5.91	3,825	406	4,231	406
34	OE: Apple Computer	07252014	2,157		100.00			2,157	5		0	2,155		2,155	
35	OE: Toshiba Laptop	07252014	1,004		100.00			1,004	5		0	1,004		1,004	
36	OE: Dell Printer	07252014	1,304		100.00			1,304	5		0	1,303		1,303	
37	H: Bird Fencing	07302014	7,775		100.00			7,775	15	150 DB HY	5.91	4,333	460	4,793	460
38	H: Coyote Pen	08072014	7,943		100.00			7,943	15	150 DB HY	5.91	4,426	469	4,895	469
39	H: Coyote Cage	08072014	1,299		100.00			1,299	15	150 DB HY	5.91	724	77	801	77
40	H: Bird Flight Cages	09042014	3,207		100.00			3,207	15	150 DB HY	5.91	1,786	190	1,976	190
41	H: Bear Habitat	09042014	27,399		100.00			27,399	15	150 DB HY	5.91	15,266	1,619	16,885	1,619
42	F&F: Office Furniture	09092014	1,300		100.00			1,300	7		0	1,299		1,299	
43	H: Bird House	10112014	1,500		100.00			1,500	15	150 DB HY	5.91	833	89	922	89
44	H: Animal Boxes	11302014	915		100.00			915	15	150 DB HY	5.91	509	54	563	54
45	E: Washer/Dryer for C	11302014	824		100.00			824	7		0	824		824	
46	E: Water Heater for C	12022014	1,262		100.00			1,262	7		0	1,262		1,262	
47	I: Trees	12192014	1,097		100.00			1,097	15	150 DB HY	5.91	611	65	676	65
48	I: Property Improveme	01011990	14,332		100.00			14,332	15		0	14,332		14,332	
49	B: Buildings - Prior	01011990	2,613		100.00			2,613	15		0	2,613		2,613	
50	E: Equipment - Park	01012000	60,562		100.00			60,562	7		0	60,562		60,562	
51	F&F: Fixtures & Furni	01012000	1,403		100.00			1,403	7		0	1,403		1,403	
52	F&F: Fixtures - Gift	01012000	1,027		100.00			1,027	7		0	1,027		1,027	
53	F&F: Fixtures	01012001	4,770		100.00			4,770	7		0	4,770		4,770	
54	E: Equipment	01012001	3,917		100.00			3,917	7		0	3,917		3,917	
55	E: Equipment	01012001	285		100.00			285	7		0	285		285	
56	E: Equipment	09042001	5,456		100.00			5,456	7		0	5,456		5,456	
57	F&F: Fixtures - Deli	09042001	1,125		100.00			1,125	7		0	1,125		1,125	
58	F&F: Fixtures - Park	09212001	1,531		100.00			1,531	7		0	1,531		1,531	
59	I: Fencing	04092002	5,247		100.00			5,247	15		0	5,247		5,247	
60	F&F: Fixtures	07012002	6,752		100.00			6,752	7		0	6,752		6,752	



Depreciation	Detail	Listing
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2022

* Item is included in UBIA for Section 199A calculations.

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Cost 1,51 1,20 5,24 1,60 3,11 2,11 18 1,56 84,94 15 2,62 9,00 3,00 7,38 112,929 55,60 1,73	0 8 0 3 1 3 7 7 5 6 6 0 0 7 5	Business percentage 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00	Section 179	Bonus depreciation		7 15 7 7 7 15 39 7	Method SL I	Rate 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Base Prior Depreciation 1,514 1,200 5,248 1,600 3,113 2,111 183 1,567 40,203 155 2,626	2,178	Accumulated Depreciation 1,514 1,200 5,248 1,600 3,113 2,111 183 1,567 42,381 155 2,626	AMT Current
1,51- 1,200 5,244 1,600 3,11- 2,11- 18 1,566 84,94 15 2,620 9,000 3,000 7,38 112,929 55,60	Adjustment 4 5	percentage 100.00 10			Basis 1,514 1,200 5,248 1,600 3,113 2,111 183 1,567 84,947 155 2,626 0	7 7 15 7 5 7 7 15 39 7 7 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Depreciation 1,514 1,200 5,248 1,600 3,113 2,111 183 1,567 40,203 155	Depreciation	Depreciation 1,514 1,200 5,248 1,600 3,113 2,111 183 1,567 42,381 155	Current
1,200 5,241 1,600 3,111 2,111 18 1,56' 84,94 15 2,620 9,000 3,000 7,38 112,929 55,60	0 8 0 3 1 3 7 7 5 6 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00			1,200 5,248 1,600 3,113 2,111 183 1,567 84,947 155 2,626 0	7 15 7 5 7 15 39 7 7 0	SL I	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1,200 5,248 1,600 3,113 2,111 183 1,567 40,203 155	2,178	1,200 5,248 1,600 3,113 2,111 183 1,567 42,381 155	2,17
5,244 1,600 3,11 2,11 18 1,56 84,94 15 2,620 9,000 3,000 7,38 112,929 55,60	8 0 3 1 3 7 7 5 6 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00			5,248 1,600 3,113 2,111 183 1,567 84,947 155 2,626 0	15 7 7 15 39 7 7 0	SL I	0 0 0 0 0 0 0 M 2.564 0 0	5,248 1,600 3,113 2,111 183 1,567 40,203 155	2,178	5,248 1,600 3,113 2,111 183 1,567 42,381 155	2,17
1,600 3,11 2,11 18 1,56 84,94 15 2,62 9,000 3,000 7,38 112,925 55,60	0 3 1 3 7 7 5 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00			1,600 3,113 2,111 183 1,567 84,947 155 2,626 0	7 5 7 15 39 7 7 0	SL I	0 0 0 0 0 0 0 0 0 0 0 0 0	1,600 3,113 2,111 183 1,567 40,203 155	2,178	1,600 3,113 2,111 183 1,567 42,381 155	2,17
3,111 2,11 18 1,56 84,94 15 2,62 9,000 3,000 7,38 112,925 55,60	3 1 3 7 7 5 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00			3,113 2,111 183 1,567 84,947 155 2,626 0	5 7 15 39 7 7 0	SL I	0 0 0 0 2.564 0 0	3,113 2,111 183 1,567 40,203 155	2,178	3,113 2,111 183 1,567 42,381 155	2,17
2,111 18 1,56 84,94 15 2,62 9,00 3,00 7,38 112,92 55,60	1 3 7 7 5 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00			2,111 183 1,567 84,947 155 2,626 0	7 7 15 39 7 7 0	SL I	0 0 0 2.564 0 0	2,111 183 1,567 40,203 155	2,178	2,111 183 1,567 42,381 155	2,17
18 1,56 84,94 15 2,62 9,00 3,00 7,38 112,92 55,60	3 7 5 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00			183 1,567 84,947 155 2,626 0	7 15 39 7 7 0	SL I	0 0 2.564 0 0	183 1,567 40,203 155	2,178	183 1,567 42,381 155	2,17
1,56 84,94 15 2,62 9,00 3,00 7,38 112,92 55,60	7 5 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00			1,567 84,947 155 2,626 0	15 39 7 7 0	SL I	0 2.564 0 0	1,567 40,203 155	2,178	1,567 42,381 155	2,17
84,94 15 2,620 9,000 3,000 7,38 112,929 55,60	7 5 6 0 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00 100.00			84,947 155 2,626 0	39 7 7 0	SL I	IM 2.564 0 0	40,203 155	2,178	42,381 155	2,17
15 2,620 9,000 3,000 7,38 112,925 55,60	5 6 0 7 5	100.00 100.00 100.00 100.00 100.00 100.00			155 2,626 0	7 7 0	SL I	0	155	2,178	155	2,17
2,62 9,000 3,000 7,38 112,92 55,60	6 0 7 5	100.00 100.00 100.00 100.00 100.00			2,626	7 0		0				
9,000 3,000 7,38 112,929 55,60	0 0 7 5	100.00 100.00 100.00 100.00 100.00			0	0			2,626		2,626	
9,000 3,000 7,38 112,92 55,60	0 7 5	100.00 100.00 100.00 100.00						0				
3,000 7,38 112,92 55,60	0 7 5	100.00 100.00 100.00			0	0	1					
3,000 7,38 112,92 55,60	7 5	100.00 100.00			0		NDA					
7,38 112,92 55,60	7 5	100.00				0		0				
112,929 55,60	5					0	NDA					
55,60		100.00			7,387	39	SL I	м 2.564	3,396	189	3,585	18
					112,925	15		0	71,464		71,464	
1 73	0 55,600	100.00			0	0		0				
1 +, / 3.	2	100.00			1,732	7		0	1,732		1,732	
1,07	5	100.00			1,075	7		0	1,075		1,075	
		100.00			0	0		0				
250,000	0	100.00				0	NDA					
1,25	5	100.00			1,255	7		0	1,255		1,255	
6,13	2	100.00			6,132	3		0	6,132		6,132	
6,90	0	100.00			6,900	15		0	6,900		6,900	
49	3	100.00			493	15		0	493		493	
13,41	1	100.00			13,411	15		0	13,411		13,411	
2,50	0	100.00			2,500	7		0	2,500		2,500	
		100.00			0	0		0				
5,00	0	100.00				0	NDA					
03092006 03302006 04252006	03092006 13,41 03302006 2,50 04252006	03092006 13,411 03302006 2,500 04252006	03092006 13,411 100.00 03302006 2,500 100.00 04252006 100.00	03092006 13,411 100.00 03302006 2,500 100.00 04252006 100.00	03092006 13,411 100.00 03302006 2,500 100.00 04252006 100.00	03092006 13,411 100.00 13,411 03302006 2,500 100.00 2,500 04252006 100.00 0 0	03092006 13,411 100.00 13,411 15 03302006 2,500 100.00 2,500 7 04252006 100.00 0 0	03092006 13,411 100.00 13,411 15 03302006 2,500 100.00 2,500 7 04252006 100.00 0 0	03092006 13,411 100.00 13,411 15 0 03302006 2,500 100.00 2,500 7 0 04252006 100.00 0 0 0	03092006 13,411 100.00 13,411 15 0 13,411 03302006 2,500 100.00 2,500 7 0 2,500 04252006 100.00 100.00 0 0 0 10	03092006 13,411 100.00 13,411 15 0 13,411 03302006 2,500 100.00 2,500 7 0 2,500 04252006 100.00 100.00 0 0 0 0	03092006 13,411 100.00 13,411 15 0 13,411 13,411 0302006 2,500 100.00 2,500 7 0 2,500 2,500 04252006 100.00 100.00 0 0 0 0 13,411
	13,41 2,50	13,411 2,500	13,411 100.00 2,500 100.00 100.00 100.00	13,411 100.00 2,500 100.00 100.00 100.00	13,411 100.00 2,500 100.00 100.00 100.00	13,411 100.00 13,411 2,500 100.00 2,500 100.00 0	13,411 100.00 13,411 15 2,500 100.00 2,500 7 100.00 0 0	13,411 100.00 13,411 15 2,500 100.00 2,500 7 100.00 0 0	13,411 100.00 13,411 15 0 2,500 100.00 2,500 7 0 100.00 0 0 0	13,411 100.00 13,411 15 0 13,411 2,500 100.00 2,500 7 0 2,500 100.00 0 0 0 0	13,411 100.00 13,411 15 0 13,411 2,500 100.00 2,500 7 0 2,500 100.00 0 0 0 0	13,411 100.00 13,411 15 0 13,411 13,411 2,500 100.00 100.00 7 0 2,500 2,500 100.00 0 0 0 0 0

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Social security number/EIN

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K	Ceepers of the Wild						1	1	-	1		88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
87	I: Property Improveme	05012006	57,400		100.00			57,400	15		0	57,398		57,398	
88	V: Trailer	05032006	1,082		100.00			1,082	7		0	1,082		1,082	
89	V: 2006 Ford F350 4X4	05092006	38,357		100.00			38,357	5	200 DB HY	0	38,357		38,357	
90	I: Property Improveme	05232006	2,724		100.00			2,724	15		0	2,724		2,724	
91	E: Equipment	05242006	920		100.00			920	7		0	920		920	
92	E: Equipment	06192006	2,400		100.00			2,400	7		0	2,400		2,400	
93	BI: Building Improvem	07012006	32,617		100.00			32,617	39	SL MM	2.564	12,923	836	13,759	836
94	E: Satellite Equipmen	08152006	1,050		100.00			1,050	7		0	1,050		1,050	
95	H: Habitat Fencing	08312006	19,568		100.00			19,568	15		0	19,567		19,567	
96	H: Habitat Excavation	08312006	91,561		100.00			91,561	15		0	91,559		91,559	
97	I: Fencing	09012006	65,734		100.00			65,734	15		0	65,732		65,732	
98	I: Portable Wood Shed	10102006	5,340		100.00			5,340	15		0	5,340		5,340	
99	I: Property Improveme	10312006	113,015		100.00			113,015	15		0	113,012		113,012	
100	H: Bird Habitat	11072006	400		100.00			400	15		0	400		400	
101	F&F: Furniture & Fixt	12012006	12,782		100.00			12,782	7		0	12,782		12,782	
102	I: Portable Wood Shed	12082006	15,825		100.00			15,825	15		0	15,825		15,825	
103	I: Rigid Corrals	12232006	8,194		100.00			8,194	15		0	8,193		8,193	
104	E: Equipment	12282006	10,207		100.00			10,207	7		0	10,207		10,207	
105	F&F: Furniture & Fixt	01192007	323		100.00			323	7		0	323		323	
106	E: Equipment	01192007	528		100.00			528	7		0	528		528	
107	BI: Building Improvme	01192007	625		100.00			625	39	SL MM	2.564	239	16	255	16
108	I: Property Improveme	01262007	20,825		100.00			20,825	15	150 DB HY	2.95	20,214	611	20,825	611
109	I: Property Imrovemen	01312007	16,479		100.00			16,479	15	150 DB HY	2.95	15,993	486	16,479	486
110	I: Property Improveme	02082007	2,538		100.00			2,538	15	150 DB HY	2.95	2,464	74	2,538	74
111	E: Equipment	02202007	2,940		100.00			2,940	7		0	2,940		2,940	
112	E: Equipment	03202007	1,460		100.00			1,460	7		0	1,460		1,460	
113	H: Habitats	03292007	4,057		100.00			4,057	15	150 DB HY	2.95	3,938	119	4,057	119
114	I: Property Improveme	03302007	9,145		100.00			9,145	15	150 DB HY	2.95	8,875	270	9,145	270
115	I: Property Improveme	04092007	9,517		100.00			9,517	15	150 DB HY	2.95	9,236	281	9,517	281
116	I: Property Improveme	05072007	20,517		100.00			20,517	15	150 DB HY	2.95	19,916	601	20,517	601
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ŀ	eepers of the Wild							1				88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
117	H: Habitats	05162007	6,024		100.00			6,024	15	150 DB HY	2.95	5,846	178	6,024	178
118	F&F: Furniture & Fixt	05212007	1,193		100.00			1,193	7		0	1,193		1,193	
119	I: Property Improveme	05302007	8,703		100.00			8,703	15	150 DB HY	2.95	8,444	257	8,701	257
120	I: Property Improveme	06062007	6,289		100.00			6,289	15	150 DB HY	2.95	6,105	184	6,289	184
121	OE: Equipment - Offic	06072007	147		100.00			147	5		0	147		147	
122	H: Habitats	06282007	1,705		100.00			1,705	15	150 DB HY	2.95	1,657	48	1,705	48
123	H: Habitats	07042007	8,924		100.00			8,924	15	150 DB HY	2.95	8,661	263	8,924	263
124	BI: Building Improvem	07182007	5,864		100.00			5,864	39	SL MM	2.564	2,169	150	2,319	150
125	F&F: Furniture & Fixt	07192007	1,138		100.00			1,138	7		0	1,138		1,138	
126	E: Equipment	07242007	4,298		100.00			4,298	7		0	4,298		4,298	
127	H: Habitats	08222007	5,855		100.00			5,855	15	150 DB HY	2.95	5,682	173	5,855	173
128	V: Vehicle - Tour Bus	09182007	14,500		100.00			14,500	5	200 DB HY	0	14,500		14,500	
129	H: Habitats	09302007	773		100.00			773	15	150 DB HY	2.95	754	19	773	19
130	BI: Building Improvem	10242007	488		100.00			488	39	SL MM	2.564	182	13	195	13
131	H: Habitats	10312007	2,038		100.00			2,038	15	150 DB HY	2.95	1,975	60	2,035	60
132	H: Habitats	11292007	1,065		100.00			1,065	15	150 DB HY	2.95	1,034	31	1,065	31
133	I: Property Improvmen	12142007	3,753		100.00			3,753	15	150 DB HY	2.95	3,643	110	3,753	110
134	S: Signs	02012008	5,315		100.00			5,315	15	150 DB HY	5.91	4,845	314	5,159	314
135	F&F: Furniture & Fixt	03012008	918		100.00			918	7		0	918		918	
136	E: Equipment	04012008	3,559		100.00			3,559	7		0	3,559		3,559	
137	I: Property Improveme	05012008	2,704		100.00			2,704	15	150 DB HY	5.91	2,467	160	2,627	160
138	H: Habitats	06102008	8,504		100.00			8,504	15	150 DB HY	5.91	7,752	503	8,255	503
139	I: Trees for Property	04272009	1,100		100.00			1,100	15	150 DB HY	5.9	939	65	1,004	65
140	H: Bird House Window	06132009	468		100.00			468	15	150 DB HY	5.9	401	28	429	28
141	H: Bird Habitat	07312009	981		100.00			981	15	150 DB HY	5.9	837	58	895	58
142	H: Concrete for Birdh	08172009	359		100.00			359	15	150 DB HY	5.9	305	21	326	21
143	B: Mobile Home	08272009	20,000		100.00			20,000	39	SL MM	2.564	6,348	513	6,861	513
144	E: Bank Saw and Used	10162009	600		100.00			600	7		0	600		600	
145	E: Reach in Freezer	12162009	660		100.00			660	7		0	660		660	
146	E: Two-Way Radios	05212010	538		100.00			538	5		0	538		538	

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Ke	epers of the Wild												-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
147 I	: Fence Cover	05212010	1,071		100.00			1,071	15	150 DB HY	5.91	849	63	912	63
148E	: Food Prep Freezer	06202010	526		100.00			526	7		0	526		526	
149 A	: Website Creation	07212010	460		100.00			460	5		0	459		459	
150I	: Septic System	11182010	548		100.00			548	15	150 DB HY	5.91	432	32	464	32
151H	: Den Boxes (habitat	11302010	569		100.00			569	15	150 DB HY	5.91	453	34	487	34
152E	: Gas Dryer	02112011	752		100.00			752	7		0	752		752	
153E	: Washing Machine	02272011	562		100.00			562	7		0	561		561	
154 I	: Gift Shop Security	03232011	3,144		100.00			3,144	15	SL HY	6.667	2,205	210	2,415	210
155S	: Truck Sign	04012011	688		100.00			688	15	SL HY	6.667	483	46	529	46
156E	: Vacuum	05012011	438		100.00			438	7		0	438		438	
157B	I: Office Improvemen	05032011	800		100.00			800	15	SL HY	6.667	557	53	610	53
158H	: Monkey Habitats	05242011	1,254		100.00			1,254	15	150 DB HY	5.9	921	74	995	74
159E	: Water Pump & Switc	05312011	839		100.00			839	7		0	839		839	
160 A	: Artwork for Advert	06202011	450		100.00			450	5		0	450		450	
161H	: Monkey Cages	07112011	877		100.00			877	15	150 DB HY	5.9	646	52	698	52
1620	E: Giftworks Softwar	07212011	75		100.00			75	3		0	75		75	
1630	E: ExoPro C270N Offi	07212011	291		100.00			291	5		0	291		291	
164 I	: Lion Run Fencing	07212011	677		100.00			677	15	150 DB HY	5.9	497	40	537	40
165 H	: Animal Habitats -	07312011	1,148		100.00			1,148	15	150 DB HY	5.9	844	68	912	68
1660	E: Epson All-In-One	11202011	236		100.00			236	5		0	236		236	
167H	: Animal Habitats	11302011	2,243		100.00			2,243	15	150 DB HY	5.9	1,647	132	1,779	132
1680	E: Quickbooks Pro 20	12312011	154		100.00			154	3		0	154		154	
169 V	: Lift Gate for 2006	12312011	2,570		100.00			2,570	5		0	2,570		2,570	
170I	: Animal Kitchen Imp	12312011	558		100.00			558	15	SL HY	6.667	389	37	426	37
171 I	: Animal Care Facili	01052012	708		100.00			708	39	SL MM	2.564	179	18	197	18
172E	: Trencher Equipment	04022012	650		100.00			650	7		0	650		650	
173E	: Sea Box Cold Stora	04182012	24,995		100.00			24,995	7		0	24,994		24,994	
174F	&F: Furniture & Fixt	04272012	2,650		100.00			2,650	7		0	2,649		2,649	
175F	&F: Cabinets in Main	08092012	1,101		100.00			1,101	7		0	1,101		1,101	
1760	E: Office Equipment	09212012	316		100.00			316	5		0	316		316	

Depreciation	Detail	Listing
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Ke	epers of the Wild						1			1		88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
1771	I: Tiger Dens/Habitat	10312012	22,800		100.00			22,800	15	150 DB MQ	5.9	14,888	1,345	16,233	1,345
1781	I: Tiger Habitats	11022013	7,377		100.00			7,377	15	150 DB HY	5.9	4,953	435	5,388	435
179	7: 2001 Harm Custom T	11092012	20,000		100.00			20,000	7		0	20,000		20,000	
1801	: Well Motor & Contr	12062012	2,459		100.00			2,459	7		0	2,459		2,459	
181	7: 2001 Cadillac DTS	12172012	4,500		100.00			4,500	5	200 DB HY	0	4,500		4,500	
1821	: 4 Radios & Accesso	01312013	1,457		100.00			1,457	7		0	1,457		1,457	
1830	E: 2 Computers & Sof	01312013	776		100.00			776	5		0	775		775	
184	: Well Parts	02132013	3,377		100.00			3,377	15	150 DB HY	5.9	2,081	199	2,280	199
1851	: Food Prep Refriger	02182013	2,900		100.00			2,900	7		0	2,899		2,899	
186	7: 1979 Penzg	02182013	15,000		100.00			15,000	5		0	15,000		15,000	
1871	I: Habitat Fence	02202013	752		100.00			752	15	150 DB HY	5.9	462	44	506	44
1881	: Transport Cage Whe	02282013	1,055		100.00			1,055	7		0	1,055		1,055	
1891	I: Coyote Habitat	05222013	472		100.00			472	15	150 DB HY	5.9	291	28	319	28
190	7: Polaris 1	07172013	7,782		100.00			7,782	7		0	7,782		7,782	
191	7: 2008 Polaris 2	07292013	8,182		100.00			8,182	7		0	8,182		8,182	
1921	: Refrigerator Compr	07292013	1,217		100.00			1,217	7		0	1,217		1,217	
1931	Cold Storage for A	08212013	3,967		100.00			3,967	7		0	3,966		3,966	
1941	3I: Storage Trailers	09102013	10,875		100.00			10,875	15	150 DB HY	5.9	6,703	642	7,345	642
195	: Fence Improvements	09112013	17,646		100.00			17,646	15	150 DB HY	5.9	10,873	1,041	11,914	1,041
1961	: Man Basket for For	09172013	592		100.00			592	7		0	592		592	
1971	: Tractor Rebuild	10222013	1,531		100.00			1,531	7		0	1,531		1,531	
1981	I: Wallaby Cabin & ha	11192013	14,130		100.00			14,130	15	150 DB HY	5.9	8,707	834	9,541	834
199	: Fencing	12262013	2,586		100.00			2,586	15	150 DB HY	5.9	1,594	153	1,747	153
200	: Front Gate	12262013	6,540		100.00			6,540	15	150 DB HY	5.9	4,030	386	4,416	386
201	: Washer for Animal	02282015	299		100.00			299	7	200 DB HY	4.46	286	13	299	13
202)E: Printer	05252015	628		100.00			628	5		0	628		628	
203)E: HP Computer	09212015	472		100.00			472	5		0	471		471	
204	G&F: New Display Case	03202015	4,344		100.00			4,344	7	200 DB HY	4.46	4,151	193	4,344	193
2051	%F: Display Items -	05252015	4,701		100.00			4,701	7	200 DB HY	4.46	4,491	210	4,701	210
2061	7&F: Display Cases -	06192015	1,836		100.00			1,836	7	200 DB HY	4.46	1,754	82	1,836	82
															

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No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
207	F&F: Storeroom Shelve	06292015	1,700		100.00			1,700	7	200 DB HY	4.46	1,624	76	1,700	76
208	F&F: Ceiling Fans & L	06302015	1,031		100.00			1,031	7	200 DB HY	4.46	984	46	1,030	47
209	F&F: Shelving - Gift	07032015	1,300		100.00			1,300	7	200 DB HY	4.46	1,241	58	1,299	59
210	F&F: Display & Equipm	07242015	6,838		100.00			6,838	7	200 DB HY	4.46	6,534	304	6,838	304
211	F&F: Equipment - Gift	08202015	2,581		100.00			2,581	5		0	2,581		2,581	
212	F&F: Registers, Coffe	08312015	1,013		100.00			1,013	5		0	1,013		1,013	
213	F&F: Equipment - Gift	09212015	1,225		100.00			1,225	5		0	1,225		1,225	
214	F&F: Patio Furniture	09212015	703		100.00			703	7	200 DB HY	4.46	672	31	703	31
215	I: Commercial Well Re	12222015	1,761		100.00			1,761	15	150 DB HY	5.9	878	104	982	104
216	OE: Security System	11102015	2,440		100.00			2,440	5		0	2,440		2,440	
217	V: 2014 Ford F-250 Hi	01092015	1,064		100.00			1,064	5		0	1,064		1,064	
218	V: Truck Bumper	01152015	756		100.00			756	5		0	756		756	
219	V: TramStar Viewing T	11102015	31,450		100.00			31,450	7	200 DB HY	4.46	30,046	1,403	31,449	1,404
220	H: BamBam Habitat	01092015	7,782		100.00			7,782	15	150 DB HY	5.9	3,875	459	4,334	459
221	H: Habitat Feeders	03172015	3,000		100.00			3,000	15	150 DB HY	5.9	1,494	177	1,671	177
222	H: Feeding Tubes, Dis	03262015	2,906		100.00			2,906	15	150 DB HY	5.9	1,446	171	1,617	171
223	H: Metal Roof Shade	07012015	1,313		100.00			1,313	15	150 DB HY	5.9	654	77	731	77
224	H: Lion Feeder Powder	07222015	525		100.00			525	15	150 DB HY	5.9	261	31	292	31
225	H: Wolf Habitat	12172015	7,500		100.00			7,500	15	150 DB HY	5.9	3,734	442	4,176	443
226	S: Signs	02092015	603		100.00			603	15	150 DB HY	5.9	301	36	337	36
227	I: AB/Dirt	02092015	630		100.00			630	15	150 DB HY	5.9	315	37	352	37
228	I: Well Booster Syste	07072015	349		100.00			349	15	150 DB HY	5.9	174	21	195	21
229	I: White Fencing - Gi	08132015	10,252		100.00			10,252	15	150 DB HY	5.9	5,107	605	5,712	605
230	I: Landscaping - Gift	09292015	3,350		100.00			3,350	15	150 DB HY	5.9	1,669	198	1,867	198
231	I: Ground Irrigation	10022015	1,118		100.00			1,118	15	150 DB HY	5.9	557	66	623	66
232	I: Dirt, Rock & Sand	10222015	1,634		100.00			1,634	15	150 DB HY	5.9	814	96	910	96
233	BI: Security System -	08182015	5,345		100.00			5,345	7	200 DB HY	4.46	5,107	238	5,345	238
234	BI: New Roof on Main	08212015	10,126		100.00			10,126	15	150 DB HY	5.9	5,044	597	5,641	597
235	B: Gift Shop	10272015	431,458		100.00			431,458	39	SL MM	2.564	68,682	11,063	79,745	11,063
236	E: Washer for Animal	08232016	298		100.00			298	7	200 DB HY	8.93	259	27	286	27

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No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
237	F&F: New Tub in Care	12142016	1,000		100.00			1,000	7	200 DB HY	8.93	866	89	955	89
238	F&F: Patio Furniture	05202016	729		100.00			729	7	200 DB HY	8.93	632	65	697	65
239	E: Washer & Dryer for	01292016	709		100.00			709	7	200 DB HY	8.93	614	63	677	63
240	E: Camera Equipment	03202016	790		100.00			790	7	200 DB HY	8.93	684	71	755	71
241	E: New Radios for Par	06202016	4,051		100.00			4,051	7	200 DB HY	8.93	3,509	362	3,871	362
242	E: Meat Saw	12202016	4,787		100.00			4,787	7	200 DB HY	8.93	4,145	427	4,572	427
243	V: 1997 Tramstar LFT	01132016	34,210		100.00			34,210	7	200 DB HY	8.93	29,630	3,055	32,685	3,055
244	H: Monkey Habitats	03182016	50,261		100.00			50,261	15	150 DB HY	5.9	22,069	2,965	25,034	2,965
245	H: Monkey Fencing	07192016	23,830		100.00			23,830	15	150 DB HY	5.9	10,464	1,406	11,870	1,406
246	H: Bird Cages	06162016	870		100.00			870	15	150 DB HY	5.9	382	51	433	51
247	H: Coyote Habitat	10032016	4,233		100.00			4,233	15	150 DB HY	5.9	1,859	250	2,109	250
248	H: Lion Habitats	12202016	55,628		100.00			55,628	15	150 DB HY	5.9	24,426	3,282	27,708	3,282
249	I: Property Improv-Sa	07132016	1,126		100.00			1,126	15	150 DB HY	5.9	494	66	560	66
250	BI: Kitchen Floor	11142016	3,523		100.00			3,523	15	150 DB HY	5.9	1,546	208	1,754	208
251	S: Park Sign	03202017	1,873		100.00			1,873	15	SL HY	6.667	562	125	687	125
252	F&F: Tub Surround in	01042017	941		100.00			941	7	200 DB HY	8.92	731	84	815	84
253	F&F: Director House F	02202017	7,018		100.00			7,018	7	200 DB HY	8.92	5,453	626	6,079	626
254	F&F: 4 Office Chairs	09192017	566		100.00			566	7	200 DB HY	8.92	441	50	491	50
255	OE: Credit Card Syste	03202017	2,288		100.00			2,288	5	200 DB HY	5.76	2,157	131	2,288	131
256	E: 2016 Bobcat Loader	08212017	81,427		100.00			81,427	7	200 DB HY	8.92	63,260	7,263	70,523	7,263
257	V: 2017 Yamaha 6-Seat	08312017	18,071		100.00			18,071	7	200 DB HY	8.92	14,040	1,612	15,652	1,612
258	H: Fencing & Habitats	02152017	15,000		100.00			15,000	15	150 DB HY	6.23	5,651	934	6,585	934
259	H: Big Cats Habitat	04192017	16,432		100.00			16,432	15	150 DB HY	6.23	6,192	1,024	7,216	1,024
260	H: Habitat Fence	05312017	5,337		100.00			5,337	15	150 DB HY	6.23	2,011	332	2,343	332
261	H: Habitat Fence	06142017	15,758		100.00			15,758	15	150 DB HY	6.23	5,937	982	6,919	982
262	H: Habitat Fence	07272017	15,000		100.00			15,000	15	150 DB HY	6.23	5,651	934	6,585	934
263	H: Habitat Fence	09062017	18,642		100.00			18,642	15	150 DB HY	6.23	7,024	1,161	8,185	1,161
264	H: Paint for Hay Barn	09272017	1,226		100.00			1,226	15	150 DB HY	6.23	461	76	537	76
265	H: Camel Pen	10172017	8,266		100.00			8,266	15	150 DB HY	6.23	3,114	515	3,629	515
266	H: Hodor Habitat	12082017	4,547		100.00			4,547	15	150 DB HY	6.23	1,713	283	1,996	283

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Ke	epers of the Wild						1	T		1	1	88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
2671	: Rock/Sand for Grou	08012017	1,440		100.00			1,440	15	150 DB HY	6.23	543	90	633	9
268 E	I: Tub Plumbing	01032017	1,249		100.00			1,249	15	150 DB HY	6.23	471	78	549	7
269 E	I: New Roof on Care	02172017	11,420		100.00			11,420	39	SL MM	2.564	1,428	293	1,721	29
270 E	I: Painting Kitchen	02282017	700		100.00			700	7	200 DB HY	8.92	543	62	605	6
271	: Well Repair	06012017	1,111		100.00			1,111	15	150 DB HY	6.23	420	69	489	6
272 E	I: Flood Repairs	08232017	1,078		100.00			1,078	39	SL MM	2.564	122	28	150	2
2730	E: Office Computer	09202018	953		100.00			953	5	200 DB HY	11.52	789	110	899	11
274 F	&F: Desks, File Cabi	11202018	4,734		100.00			4,734	7	200 DB HY	8.93	3,254	423	3,677	42
275 E	: Machinery for Anim	02182018	503		100.00			503	7	200 DB HY	8.93	346	45	391	4
276 E	: Dryer for Towels	07312018	414		100.00			414	7	200 DB HY	8.93	284	37	321	3
277 E	: Tools	08032018	2,000		100.00			2,000	7	200 DB HY	8.93	1,376	179	1,555	17
278 V	: Trailer 2005 HHTRL	08032018	4,000		100.00			4,000	7	200 DB HY	8.93	2,752	357	3,109	35
2790	E: Camera	01202018	2,397		100.00			2,397	5	200 DB HY	11.52	1,982	276	2,258	27
280 H	: Roof for Deer	07172018	2,906		100.00			2,906	15	150 DB HY	6.93	893	201	1,094	20
281 H	: Bobcat Platforms	02152018	664		100.00			664	15	150 DB HY	6.93	204	46	250	4
282 H	: Fencing for Bear H	04252018	16,313		100.00			16,313	15	150 DB HY	6.93	5,017	1,130	6,147	1,13
283 H	: Swimming Pool for	04162018	1,500		100.00			1,500	15	150 DB HY	6.93	460	104	564	10
284 H	: Fence for Rental H	05092018	845		100.00			845	15	150 DB HY	6.93	259	59	318	5
285 H	: Ground Hog Habitat	07102018	5,000		100.00			5,000	15	150 DB HY	6.93	1,537	346	1,883	34
286 H	: Prairie Dog Pen Ma	07202018	1,626		100.00			1,626	15	150 DB HY	6.93	499	113	612	11
287 H	: Habitats	08212018	5,831		100.00			5,831	15	150 DB HY	6.93	1,794	404	2,198	40
2881	: Landscaping	03162018	1,600		100.00			1,600	15	150 DB HY	6.93	492	111	603	11
2891	: 3/4 AB	09082018	690		100.00			690	15	150 DB HY	6.93	213	48	261	4
290 E	I: New Heat A/C Unit	01082018	7,385		100.00			7,385	7	200 DB HY	8.93	5,078	659	5,737	65
291 F	&F: Office Safe	02252019	1,850		100.00			1,850	7	200 DB HY	12.49	1,041	231	1,272	23
292E	I: Plumbing Repairs	03112019	1,781		100.00			1,781	7	200 DB HY	12.49	1,002	222	1,224	22
293 E	: Washer & Dryer	03062019	900		100.00			900	7	200 DB HY	12.49	506	112	618	11
294 F	&F: Jonathan's Offic	06202019	2,680		100.00			2,680	7	200 DB HY	12.49	1,508	335	1,843	33
00-1-	&F: Office Furniture	09202019	535		100.00			535	7	200 DB HY	12.49	301	67	368	6
295	: Park Trash Cans	01212019	4,980		100.00			4,980	7	200 DB HY	12.49	2,803	622	3,425	62

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. Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
97V: Golf Cart	03182019	16,319		100.00			16,319	7	200 DB HY	12.49	9,183	2,038	11,221	2,038
98 V: Golf Cart	04192019	13,055		100.00			13,055	7	200 DB HY	12.49	7,346	1,631	8,977	1,631
299E: Washer & Dryer	03202019	4,610		100.00			4,610	7	200 DB HY	12.49	2,594	576	3,170	576
800E: Yard Chipper	04202019	3,100		100.00			3,100	7	200 DB HY	12.49	1,744	387	2,131	387
01I: Well Repairs	08292019	6,433		100.00			6,433	15	150 DB HY	7.7	1,483	495	1,978	495
02 OE: Computer, Monito:	r 03202019	4,614		100.00			4,614	7	200 DB HY	12.49	2,596	576	3,172	576
03OE: HP Computer	05222019	1,058		100.00			1,058	5	200 DB HY	11.52	754	122	876	122
04 V: 2019 Lincoln Navi	g 06192019	99,513		100.00			99,513	5	200 DB HY	11.52	70,853	11,464	82,317	11,464
05H: Habitat Fencing	03062019	16,167		100.00			16,167	15	150 DB HY	7.7	3,726	1,245	4,971	1,245
06H: Den Boxes	04182019	6,003		100.00			6,003	15	150 DB HY	7.7	1,383	462	1,845	462
307 I: Gift Shop Landsca	p 08262019	399		100.00			399	15	150 DB HY	7.7	92	31	123	31
308 I: Driveway Rock	08272019	782		100.00			782	15	150 DB HY	7.7	180	60	240	60
309 BI: Office Addition	01142019	15,669		100.00			15,669	39	SL MM	2.564	1,189	402	1,591	402
310 BI: Steel Awning	09232019	15,721		100.00			15,721	39	SL MM	2.564	924	403	1,327	403
B11BI: Office Patio	12032019	46,486		100.00			46,486	39	SL MM	2.564	2,434	1,192	3,626	1,192
12 F&F: Norton Door Clo	s 06292020	658		100.00			658	7	200 DB HY	17.49	255	115	370	115
13E: Faucet with Hose	04132020	261		100.00			261	7	200 DB HY	17.49	101	46	147	46
14 E: Animal Clinic Equ	i 04142020	2,724		100.00			2,724	7	200 DB HY	17.49	1,056	476	1,532	476
15 E: Animal Clinic Equ	i 04142020	5,029		100.00			5,029	7	200 DB HY	17.49	1,951	880	2,831	880
16 E: Animal Clinic Equ	i 04162020	6,746		100.00			6,746	7	200 DB HY	17.49	2,616	1,180	3,796	1,180
17 E: New Clinic Tool B	04202020	3,145		100.00			3,145	7	200 DB HY	17.49	1,219	550	1,769	550
18 E: Diagnostic Tool f	04202020	703		100.00			703	7	200 DB HY	17.49	272	123	395	123
319 E: Portable Floor Mod	d 04222020	3,005		100.00			3,005	7	200 DB HY	17.49	1,165	526	1,691	526
320 E: Clinic Equipment	04222020	1,228		100.00			1,228	7	200 DB HY	17.49	476	215	691	215
21 I: New Well Pump Mot	04232020	3,669		100.00			3,669	15	150 DB HY	8.55	532	314	846	314
322 E: Tub on Legs with 1	R 04272020	2,871		100.00			2,871	7	200 DB HY	17.49	1,113	502	1,615	502
23 E: Large Animal ANES	04292020	4,564		100.00			4,564	7	200 DB HY	17.49	1,770	798	2,568	798
24 I: Well Repairs	05182020	5,435		100.00			5,435	15	150 DB HY	8.55	788	465	1,253	465
25 E: Animal Clinic Equ	i 05262020	493		100.00			493	7	200 DB HY	17.49	191	86	277	86
326 E: Animal Clinic Equ	i 05262020	2,920		100.00			2,920	7	200 DB HY	17.49	1,132	511	1,643	511



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No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
327	E: Animal Clinic Equi	05312020	6,106		100.00			6,106	7	200 DB HY	17.49	2,368	1,068	3,436	1,068
328	E: Animal Clinic Equi	06302020	3,520		100.00			3,520	7	200 DB HY	17.49	1,365	616	1,981	616
329	E: Clinic X-ray Table	07142020	872		100.00			872	7	200 DB HY	17.49	339	153	492	153
330	E: Medical Equipment	07212020	8,976		100.00			8,976	7	200 DB HY	17.49	3,481	1,570	5,051	1,570
331	E: Animal Clinic Equi	07312020	1,108		100.00			1,108	7	200 DB HY	17.49	429	194	623	194
332	E: Animal Clinic Equi	08072020	311		100.00			311	7	200 DB HY	17.49	120	54	174	54
333	I: New Well	08072020	3,241		100.00			3,241	15	150 DB HY	8.55	470	277	747	277
334	I: Well Repair	11182020	5,404		100.00			5,404	15	150 DB HY	8.55	783	462	1,245	462
335	E: Animal Clinic Equi	03202020	1,489		100.00			1,489	7	200 DB HY	17.49	578	260	838	260
336	H: Fencing	03102020	2,458		100.00			2,458	15	150 DB HY	8.55	357	210	567	210
337	H: Fencing	04302020	3,497		100.00			3,497	15	150 DB HY	8.55	507	299	806	299
338	H: Fencing	07142020	1,736		100.00			1,736	15	150 DB HY	8.55	252	148	400	148
339	H: Fencing	09152020	1,917		100.00			1,917	15	150 DB HY	8.55	278	164	442	164
340	H: Bottom Tray for Mo	09152020	119		100.00			119	15	150 DB HY	8.55	17	10	27	10
341	H: Javalina Pen	09282020	1,080		100.00			1,080	15	150 DB HY	8.55	157	92	249	92
342	I: New Well	06172020	17,208		100.00			17,208	15	150 DB HY	8.55	2,495	1,471	3,966	1,471
343	BI: Electric Upgrades	02182020	2,380		100.00			2,380	39	SL MM	2.564	114	61	175	61
344	F&F: Blinds for Offic	02182020	1,129		100.00			1,129	7	200 DB HY	17.49	437	197	634	197
345	BI: Animal Medical Ce	02182020	3,872		100.00			3,872	39	SL MM	2.564	186	99	285	99
346	F&F: New Blinds for C	01272020	1,100		100.00			1,100	7	200 DB HY	17.49	426	192	618	192
347	BI: Animal Clinic	03312020	469		100.00			469	39	SL MM	2.564	22	12	34	12
348	BI: Clinic Carpentry	04072010	2,000		100.00			2,000	39	SL MM	2.564	102	51	153	51
349	F&F: Ceiling Fan for	04302020	387		100.00			387	7	200 DB HY	17.49	150	68	218	68
350	BI: New Clinic Electr	05052020	2,926		100.00			2,926	39	SL MM	2.564	122	75	197	75
351	BI: Clinic Carpentry	05062020	2,066		100.00			2,066	39	SL MM	2.564	86	53	139	53
352	BI: New Floor for Car	01232020	2,019		100.00			2,019	39	SL MM	2.564	102	52	154	52
353	I: Concrete for Offic	03062020	3,400		100.00			3,400	15	150 DB HY	8.55	493	291	784	291
354	F&F: Shelving for Car	04202021	695		100.00			695	7	200 DB HY	24.49	99	170	269	170
355	E: Refridgerator	07122021	1,103		100.00			1,103	7	200 DB HY	24.49	158	270	428	270
356	OE: IT Software	07212021	4,950		100.00			4,950	3	200 DB HY	44.45	1,650	2,200	3,850	2,200



* Item is included in UBIA

for Section 199A calculations.

See "UBIA" in lower right corner.

Program Services (This page is not filed with the return. It is for your records only.) PAGE 13

Social security number/EIN

Ŀ	eepers of the Wild											88	-0345277		
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current
357	F&F: Office Lighting	09202021	402		100.00			402	7	200 DB HY	24.49	57	98	155	98
358	F&F: Security Cameras	01132021	639		100.00			639	7	200 DB HY	24.49	91	156	247	156
359	F&F: Wedding Chapel	03212021	1,895		100.00			1,895	7	200 DB HY	24.49	271	464	735	464
360	E: Dental Station	05312021	6,120		100.00			6,120	7	200 DB HY	24.49	875	1,499	2,374	1,499
361	E: X-Ray Machine	06082021	17,404		100.00			17,404	7	200 DB HY	24.49	2,487	4,262	6,749	4,262
362	E: Forceps,Scissors,	06092021	608		100.00			608	7	200 DB HY	24.49	87	149	236	149
363	E: Aaron A1250S ESU G	06172021	6,588		100.00			6,588	7	200 DB HY	24.49	941	1,613	2,554	1,613
364	E: Bovie Electrosurgi	06222021	2,865		100.00			2,865	7	200 DB HY	24.49	409	702	1,111	702
365	E: Park Radios	07122021	623		100.00			623	7	200 DB HY	24.49	89	153	242	153
366	E: Office Freezer	07212021	368		100.00			368	7	200 DB HY	24.49	53	90	143	90
367	E: Well Pump	12202021	4,005		100.00			4,005	7	200 DB HY	24.49	572	981	1,553	981
368	OE: Fundraising Softw	01212021	4,950		100.00			4,950	3	200 DB HY	44.45	1,650	2,200	3,850	2,200
369	OE: Gift Ware Softwar	04202021	4,950		100.00			4,950	3	200 DB HY	44.45	1,650	2,200	3,850	2,200
370	OE: Sony Camera for P	06202021	4,198		100.00			4,198	5	200 DB HY	32	840	1,343	2,183	1,343
371	OE: Sony Camera Lens	08182021	1,469		100.00			1,469	5	200 DB HY	32	294	470	764	470
372	OE: Security System	08272021	1,654		100.00			1,654	5	200 DB HY	32	331	529	860	529
373	OE: Virtuous Software	10212021	5,643		100.00			5,643	3	200 DB HY	44.45	1,881	2,508	4,389	2,508
374	V: Engine Rehaul on P	04202021	4,475		100.00			4,475	5	200 DB HY	32	895	1,432	2,327	1,432
375	V: Honda 2 Seater 4x4	05112021	30,615		100.00			30,615	5	200 DB HY	32	6,123	9,797	15,920	9,797
376	H: Fencing	04102021	13,495		100.00			13,495	15	150 DB HY	9.5	675	1,282	1,957	1,282
377	H: Habitat Boxes	05122021	887		100.00			887	15	150 DB HY	9.5	44	84	128	84
378	H: Fencing	12162021	7,592		100.00			7,592	15	150 DB HY	9.5	380	721	1,101	721
379	H: Rebar for Pond	11032021	800		100.00			800	15	150 DB HY	9.5	40	76	116	76
380	H: Pool Construction	12042021	2,000		100.00			2,000	15	150 DB HY	9.5	100	190	290	190
381	H: Box Trees	12202021	2,879		100.00			2,879	15	150 DB HY	9.5	144	274	418	274
382	I: Screening for Fenc	04202021	710		100.00			710	15	150 DB HY	9.5	36	67	103	67
383	I: Park Benches	05212021	8,242		100.00			8,242	15	150 DB HY	9.5	412	783	1,195	783
384	I: AB & Sand for Road	09282021	642		100.00			642	15	150 DB HY	9.5	32	61	93	61
385	E: Care Center Refrid	06202022	5,436		100.00			5,436	7	200 DB HY	14.29		777	777	777
386	E: Special Water Tank	06202022	11,352		100.00			11,352	7	200 DB HY	14.29		1,622	1,622	1,622



* Item is included in UBIA for Section 199A calculations. See "UBIA" in lower right corner.			Depreciation Detail Listing Program Services (This page is not filed with the return. It is for your records only.)										2022 PAGE 14				
Name(s)	as shown on return											Social se	curity number/El	N			
Kee	epers of the Wild	1	1											88-0345277			
No.	Description	Date	Cost	Basis Adjustment	Business percentage	Section 179	Bonus depreciation	Depreciable Basis	Life	Method	Rate	Prior Depreciation	Current Depreciation	Accumulated Depreciation	AMT Current		
387E	: Emer Backup Pump S	08222022	6,262		100.00			6,262	7	200 DB HY	14.29		895	895	895		
38801	E: IT Virtuous Softw	10212022	23,382		100.00			23,382		200 DB HY	33.33		7,793	7,793	7,793		
389 V	: New Tram	04052022	21,800		100.00			21,800	7	200 DB HY	14.29		3,115	3,115	3,115		
390 V	: New Motor on Origi	03212022	4,000		100.00			4,000	7	200 DB HY	14.29		572	572	572		
391H	: Pool Fence	01072022 08312022			100.00			5,400	15	150 DB HY	5 5		270	270	270		
T	otals		3,631,521					3,308,919				1,948,439	169,921	2,118,360	169,925		