

Return of Organization Exempt From Income Tax

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

2020

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

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

A For the 2020 calendar year, or tax year beginning , 2020, and ending , 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **Keepers of the Wild**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
13441 E Highway 66
 City or town, state or province, country, and ZIP or foreign postal code
Valentine, AZ 86437

D Employer identification number
88-0345277

E Telephone number
(928) 769-1800

G Gross receipts
\$ **2,307,121**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

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

J Website: ▶ **www.keepersofthewild.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1995** **M** State of legal domicile: **AZ**

H(c) Group exemption number ▶

Part I Summary			
1 Briefly describe the organization's mission or most significant activities: Protect and Care for Exotic Animals			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	30
	6 Total number of volunteers (estimate if necessary)	6	10
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,716,887	Current Year 1,773,445
	9 Program service revenue (Part VIII, line 2g)	201,596	188,089
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	56,891	62,406
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	88,877	205,475
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,064,251	2,229,415
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	671,837	556,140
	16a Professional fundraising fees (Part IX, column (A), line 11e)	70,209	86,625
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 219,887		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,515,074	1,479,212	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,257,120	2,121,977	
19 Revenue less expenses. Subtract line 18 from line 12	(192,869)	107,438	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2,252,021	End of Year 2,256,251
	21 Total liabilities (Part X, line 26)	357,195	235,019
	22 Net assets or fund balances. Subtract line 21 from line 20	1,894,826	2,021,232

Part II Signature Block

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

Sign Here

▶ **Jonathan Kraft**
Signature of officer

▶ **Jonathan Kraft, President**
Type or print name and title

Date

Paid Preparer Use Only

Print/Type preparer's name: **Christina Talley**
 Preparer's signature: _____
 Date: **05-25-2021**
 Check if self-employed PTIN: **P00852911**

Firm's name ▶ **Christina R Talley, CPA, PLLC**
 Firm's address ▶ **401 N San Francisco Street**
Flagstaff AZ 86001
 Firm's EIN ▶ _____
 Phone no. **928-774-8900**

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

Part 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
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes 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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 1,766,213 including grants of \$ _____) (Revenue \$ 2,229,415)
Protect and care for exotic animals that have been either neglected or abused.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **▶ 1,766,213**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, 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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I See instructions</i>	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c detailing IRS filing and tax compliance information.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee reporting, tax shelter transactions, foreign accounts, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 5 columns: Question ID, Question Text, Line Number, Yes, No. Rows include 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 5 columns: Question ID, Question Text, Line Number, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
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.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

Dianna Kenney (928)769-1800, 13441 E Highway 66, Valentine, AZ 86437

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Jonathan Kraft President	50.00			X			97,000	0	0	
(2) Nikki Seegers Board Member		X					0	0	0	
(3) Theodora Jory Board Member		X					0	0	0	
(4) Charles McHaffie Board Member		X					0	0	0	
(5) James C Burkett Board Member		X					0	0	0	
(6) Mike Daves Board Member		X					0	0	0	
(7) Dwight Jory Chairperson		X					0	0	0	
(8) Mimi Morissette Vice Chairperson		X					0	0	0	
(9) Kelsey Burkett Secretary	50.00			X			0	0	0	
(10) Nick Terlesky Treasurer	50.00			X			0	0	0	
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							97,000	0	0	

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,284,983				
	d Related organizations	1d					
	e Government grants (contributions) . .	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	488,462				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f ▶		1,773,445				
Program Service Revenue			Business Code				
	2a Adoptions	900099	925	925			
	b Tours	900099	187,164	187,164			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f ▶		188,089					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		6,764	6,764			
	4 Income from investment of tax-exempt bond proceeds . . . ▶						
	5 Royalties ▶						
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss) ▶						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	78,676	14,037		
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	37,071				
	c Gain or (loss)	7c	41,605	14,037			
d Net gain or (loss) ▶		55,642	55,642				
8a Gross income from fundraising events (not including \$ 1,284,983 of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events ▶							
9a Gross income from gaming activities, See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities ▶							
10a Gross sales of inventory, less returns and allowances	10a		115,210				
b Less: cost of goods sold	10b	40,635					
c Net income or (loss) from sales of inventory ▶		74,575	74,575				
Miscellaneous Revenue			Business Code				
	11a PPP Funds Received	900099	130,900	130,900			
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d ▶		130,900					
12 Total revenue. See instructions ▶		2,229,415	455,970	0	0		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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, trustees, and key employees	107,639	69,992	26,910	10,737
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	403,552	363,197	40,355	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .				
9	Other employee benefits	605	303	302	
10	Payroll taxes	44,344	36,544	6,726	1,074
11	Fees for services (nonemployees):				
a	Management				
b	Legal	56,310	41,273	15,037	
c	Accounting	25,705		8,900	16,805
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17 .	86,625			86,625
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . .				
12	Advertising and promotion	142,762	75,109		67,653
13	Office expenses	54,677	27,394	5,435	21,848
14	Information technology	59,256	56,293		2,963
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	2,202		2,202	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	196,177	196,177		
23	Insurance	58,291	54,211	4,080	
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	256,542	256,542		
b	Animal Supplies	222,784	222,784		
c	Education Materials	204,902	204,902		
d	Postage Expense	84,214	58,950	16,843	8,421
e	All other expenses _____	115,390	102,542	9,087	3,761
25	Total functional expenses. Add lines 1 through 24e. .	2,121,977	1,766,213	135,877	219,887
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)		
		Beginning of year		End of year		
Assets	1	Cash - non-interest-bearing	284,934	1	424,426	
	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 officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use	33,956	8	29,289	
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,412,456		
	b	Less: accumulated depreciation	10b	1,800,553	10c	1,611,903
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	112,970	15	190,633	
16	Total assets. Add lines 1 through 15 (must equal line 33)	2,252,021	16	2,256,251		
Liabilities	17	Accounts payable and accrued expenses	150,143	17	164,072	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	96,309	22		
	23	Secured mortgages and notes payable to unrelated third parties	110,743	23	70,947	
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25	357,195	26	235,019	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/>					
	and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		27		
	28	Net assets with donor restrictions		28		
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/>					
	and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		29		
	30	Paid-in or capital surplus, or land, building, or equipment fund		30		
31	Retained earnings, endowment, accumulated income, or other funds	1,894,826	31	2,021,232		
32	Total net assets or fund balances	1,894,826	32	2,021,232		
33	Total liabilities and net assets/fund balances	2,252,021	33	2,256,251		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,229,415
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,121,977
3	Revenue less expenses. Subtract line 2 from line 1	3	107,438
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,894,826
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	18,968
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	2,021,232

Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	x	
b	Were the organization's financial statements audited by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	x	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	x	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

Employer identification number

Keepers of the Wild

88-0345277

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 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 instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)); 15 Public support percentage from 2019 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2020; b 33 1/3% support test - 2019; 17a 10%-facts-and-circumstances test - 2020; b 10%-facts-and-circumstances test - 2019; 18 Private foundation.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,810,146	1,919,271	2,098,068	1,716,887	1,773,445	9,317,817
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	273,821	298,118	313,685	285,173	262,664	1,433,461
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	2,083,967	2,217,389	2,411,753	2,002,060	2,036,109	10,751,278
7a Amounts included on lines 1, 2, and 3 received from disqualified 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						10,751,278

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	2,083,967	2,217,389	2,411,753	2,002,060	2,036,109	10,751,278
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . .	18,594	13,470	12,597	56,891	62,406	163,958
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	18,594	13,470	12,597	56,891	62,406	163,958
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	7,950	4,200	3,075	5,300		20,525
13 Total support. (Add lines 9, 10c, 11, and 12.)	2,110,511	2,235,059	2,427,425	2,064,251	2,098,515	10,935,761
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	98.31 %
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	99.13 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	1.00 %
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	1.00 %

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . ▶

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described in line 11a above?		
c A 35% controlled entity of a person described in 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
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 officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in 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? <i>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.</i>		
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? <i>If "Yes" or "No," provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	
Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	
Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required) - <i>provide details in Part VI</i>	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.		
3	Excess distributions carryover, if any, to 2020		
a	From 2015		
b	From 2016		
c	From 2017		
d	From 2018		
e	From 2019		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016		
b	Excess from 2017		
c	Excess from 2018		
d	Excess from 2019		
e	Excess from 2020		

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2020

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

Name of the organization

Keepers of the Wild

Employer identification number

88-0345277

Organization type (check one):

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

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 or 990-EZ), 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Keepers of the Wild

88-0345277

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Mary Ann Yoder [REDACTED] [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	James Santiago Trust [REDACTED] [REDACTED]	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Lakin Family Foundation [REDACTED] [REDACTED]	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	R Stephen Dorsey Trust [REDACTED] [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Donald Boettcher Living Trust [REDACTED] [REDACTED]	\$ 5,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Lee Merrick Foundation Inc [REDACTED] [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Keepers of the Wild**88-0345277****Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Charlotte Rashmi-Graff Charitable T [REDACTED] [REDACTED]	\$ 6,377	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Joann Hinkle [REDACTED] [REDACTED]	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Denise Roman [REDACTED] [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Rettig Foundation Trust [REDACTED] [REDACTED]	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	Moore & Rutt PA [REDACTED] [REDACTED]	\$ 9,131	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	Evelyn A Gaul 2008 Living Trust [REDACTED] [REDACTED]	\$ 42,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2020

Attach to Form 990.

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Keepers of the Wild

88-0345277

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: Revenue included on Form 990, Part VIII, line 1; Assets included in Form 990, Part X. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Term endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	267,000			267,000
b Buildings	546,406		137,099	409,307
c Leasehold improvements	1,647,249		1,001,575	645,674
d Equipment	782,104		562,680	219,424
e Other	169,697		99,199	70,498
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				1,611,903

Part VII Investments - Other Securities.

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) Loan - Wild Planet	1,000
(2) Direct Mail Account	122,313
(3) Deposit with Mail Shops	67,320
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). ▶	190,633

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 income taxes		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
Total. (Column (b) must equal Form 990 Part X col (B) line 25). ▶		

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.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include description, sub-row labels (2a-2d, 4a-4b), and totals (1, 2e, 3, 4c, 5).

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include description, sub-row labels (2a-2d, 4a-4b), and totals (1, 2e, 3, 4c, 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.

Multiple horizontal lines provided for entering supplemental information.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Employer identification number

Keepers of the Wild

88-0345277

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 Fund Raising Strategies I			X	1,284,983	86,625	1,198,358
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				1,284,983	86,625	1,198,358

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

All States

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>Direct Mail</u> (event type)	(b) Event #2 _____ (event type)	(c) Other events <u>None</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶			
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

**SCHEDULE D
(Form 1120)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2020

Name Keepers of the Wild	Employer identification number 88-0345277
------------------------------------	---

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Enter gain from Form 4797, line 7 or 9				11 43,649
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions (see instructions)				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				15 43,649

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	43,649
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns	18	43,649

Note: If losses exceed gains, see *Capital Losses* in the instructions.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Employer identification number

Keepers of the Wild

88-0345277

01. Amended return information

Part VII: Amended return filed to list key officer salary.

02. 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.

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

Organization has Board Members.

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

Form 990 reviewed by J. Kraft (Director).

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

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

06. 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.

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

Copies provided upon request.

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return Keepers of the Wild	Business or activity to which this form relates FORM 990 - 1	Identifying number 88-0345277
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions).	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 ▶	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	19,258

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020.	17	128,930
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property Statement	#567					8,477
d 10-year property						
e 15-year property Statement	#568					2,458
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property Statement	#569		39 yrs.	MM	S/L	280
				MM	S/L	

Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	36,774
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	196,177
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? **Yes** **No** **24b** If "Yes," is the evidence written? **Yes** **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							25		
26 Property used more than 50% in a qualified business use:									
Statement #570		%					36,774		
		%							
		%							
27 Property used 50% or less in a qualified business use:									
		%				S/L-			
		%				S/L-			
		%				S/L-			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	36,774	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2020 tax year (see instructions):					
43 Amortization of costs that began before your 2020 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report.					44

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

▶ **Attach to your tax return.**
▶ **Go to www.irs.gov/Form4797 for instructions and the latest information.**

Name(s) shown on return Keepers of the Wild	Identifying number 88-0345277
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1 Enter the gross proceeds from sales or exchanges reported to you for 2020 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions **1** **161,885**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4684, line 39						3
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6	Gain, if any, from line 32, from other than casualty or theft						6 43,649
7	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows						7 43,649
8	Nonrecaptured net section 1231 losses from prior years. See instructions						8
9	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions						9

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

B:	VV Rental House Improvement	06-08-2019	04-08-2020	487	147	445	189
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11	Loss, if any, from line 7	11	()
12	Gain, if any, from line 7 or amount from line 8, if applicable	12	
13	Gain, if any, from line 31	13	0
14	Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15	Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17	Combine lines 10 through 16	17	189
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.		
a	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions	18a	
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4	18b	

For Paperwork Reduction Act Notice, see separate instructions. Form **4797** (2020)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255
(see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)		
AB: Rental House		04-08-2014	04-08-2020		
B					
C					
D					
These columns relate to the properties on lines 19A through 19D.▶		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20 161,885			
21	Cost or other basis plus expense of sale	21 147,889			
22	Depreciation (or depletion) allowed or allowable	22 29,653			
23	Adjusted basis. Subtract line 22 from line 21	23 118,236			
24	Total gain. Subtract line 23 from line 20	24 43,649			
25 If section 1245 property:					
a	Depreciation allowed or allowable from line 22	25a			
b	Enter the smaller of line 24 or 25a	25b			
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291					
a	Additional depreciation after 1975. See instructions	26a			
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b			
c	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c			
d	Additional depreciation after 1969 and before 1976	26d			
e	Enter the smaller of line 26c or 26d	26e			
f	Section 291 amount (corporations only)	26f			
g	Add lines 26b, 26e, and 26f	26g 0			
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.					
a	Soil, water, and land clearing expenses	27a			
b	Line 27a multiplied by applicable percentage. See instructions	27b			
c	Enter the smaller of line 24 or 27b	27c			
28 If section 1254 property:					
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a			
b	Enter the smaller of line 24 or 28a	28b			
29 If section 1255 property:					
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a			
b	Enter the smaller of line 24 or 29a. See instructions	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30 43,649
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31 0
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32 43,649

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33	
34	Recomputed depreciation. See instructions	34	
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Federal Supporting Statements

2020 PG01

Name(s) as shown on return

Tax ID Number

Keepers of the Wild

88-0345277

Form 4562 - Line 19c

Statement #567

Basis	RP	CV	Method	Deduction
658	7	HY	200 DB	94
261	7	HY	200 DB	37
2,724	7	HY	200 DB	389
5,029	7	HY	200 DB	719
6,746	7	HY	200 DB	964
3,145	7	HY	200 DB	449
703	7	HY	200 DB	100
3,005	7	HY	200 DB	429
1,228	7	HY	200 DB	175
2,871	7	HY	200 DB	410
4,564	7	HY	200 DB	652
493	7	HY	200 DB	70
2,920	7	HY	200 DB	417
6,106	7	HY	200 DB	873
3,520	7	HY	200 DB	503
872	7	HY	200 DB	125
8,976	7	HY	200 DB	1,283
1,108	7	HY	200 DB	158
311	7	HY	200 DB	44
1,489	7	HY	200 DB	213
1,129	7	HY	200 DB	161
1,100	7	HY	200 DB	157
387	7	HY	200 DB	55
Total				<u><u>8,477</u></u>

Federal Supporting Statements

2020 PG01

Name(s) as shown on return

Tax ID Number

Keepers of the Wild

88-0345277

Form 4562 - Line 19e

Statement #568

Basis	RP	CV	Method	Deduction
3,669	15	HY	150 DB	183
5,435	15	HY	150 DB	272
3,241	15	HY	150 DB	162
5,404	15	HY	150 DB	270
2,458	15	HY	150 DB	123
3,497	15	HY	150 DB	175
1,736	15	HY	150 DB	87
1,917	15	HY	150 DB	96
119	15	HY	150 DB	6
1,080	15	HY	150 DB	54
17,208	15	HY	150 DB	860
3,400	15	HY	150 DB	170
Total				<u><u>2,458</u></u>

Form 4562 - Line 19i

PG01
Statement #569

Date	Cost	Deduction
02-2020	2,380	53
02-2020	3,872	87
03-2020	469	10
05-2020	2,926	47
05-2020	2,066	33
01-2020	2,019	50
Total		<u><u>280</u></u>

Federal Supporting Statements

2020 PG01

Name(s) as shown on return

Tax ID Number

Keepers of the Wild

88-0345277

Form 4562 - Line 26

Statement #570

Description	Date	%Bus	Cost	Depr Basis	RP	Method	Deduction	179 Ded
V: Mercedes	02-06-2014	100	60,108	60,108	5	200DBHY	1,875	
V: 2006 Ford F350 4X4	05-09-2006	100	38,357	38,357	5	200DBHY		
V: Vehicle - Tour Bus	09-18-2007	100	14,500	14,500	5	200DBHY		
V: 2001 Cadillac DTS	12-17-2012	100	4,500	4,500	5	200DBHY		
V: 1997 Tramstar LFT Power Car & Trailer	01-13-2016	100	34,210	34,210	7	200DBHY	3,055	
V: 2019 Lincoln Navigator	06-19-2019	100	99,513	99,513	5	200DBHY	<u>31,844</u>	
Total							<u><u>36,774</u></u>	

* Item is included in UBIA
for Section 199A calculations.
See "UBIA" in lower right corner.

Depreciation Detail Listing

Program Services
For your records only

2020

PAGE 1

Name(s) as shown on return

Social security number/EIN

Keepers 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
1	F&F: Smoker Recept &	01172014	1,731		100.00			1,731	7	200 DB HY	8.93	1,499	155	1,654	212
2	H: Fencing	01182014	8,000		100.00			8,000	15	150 DB HY	5.9	3,512	472	3,984	472
3	I: Dirt & Gravel for	01242014	4,079		100.00			4,079	15	150 DB HY	5.9	1,792	241	2,033	241
4	H: Fencing	02052014	18,000		100.00			18,000	15	150 DB HY	5.9	7,903	1,062	8,965	1,062
5	V: Mercedes	02062014	60,108		100.00			60,108	5	200 DB HY	0	16,935	1,875	18,810	1,875
6	H: 3 Utility Barns	02122014	6,375		100.00			6,375	15	150 DB HY	5.9	2,800	376	3,176	376
7	V: Polaris ATV	02122014	14,710		100.00			14,710	7	200 DB HY	8.93	12,739	1,314	14,053	1,802
8	V: Polaris ATV	02122014	14,710		100.00			14,710	7	200 DB HY	8.93	12,739	1,314	14,053	1,802
9	E: Freezer, Cold Boxe	02142014	3,762		100.00			3,762	7	200 DB HY	8.93	3,258	336	3,594	461
10	F&F: File Cabinets, D	02142014	15,855		100.00			15,855	7	200 DB HY	8.93	13,731	1,416	15,147	1,942
11	H: Fencing	02252014	13,034		100.00			13,034	15	150 DB HY	5.9	5,723	769	6,492	769
12	E: Hoofstock Barn Equ	03082014	500		100.00			500	7	200 DB HY	8.93	432	45	477	61
13	H: Fencing	03122014	6,000		100.00			6,000	7	150 DB HY	12.25	4,555	735	5,290	735
14	F&F: Desk	03202014	400		100.00			400	7	200 DB HY	8.93	347	36	383	49
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	5.9	340	46	386	46
17	BI: Heating & Cooling	04022014	10,844		100.00			10,844	7	200 DB HY	8.93	9,391	968	10,359	1,328
18	H: Raccoon Habitat	04042014	6,333		100.00			6,333	15	150 DB HY	5.9	2,782	374	3,156	374
19	BI: Cabinets in Main	04072014	25,925		100.00			25,925	7	200 DB HY	8.93	22,453	2,315	24,768	3,176
21	BI: Kitchen Improv. i	04202014	20,873		100.00			20,873	7	200 DB HY	8.93	18,078	1,864	19,942	2,557
22	H: Goat & Llama Habit	04212014	14,996		100.00			14,996	15	150 DB HY	5.9	6,585	885	7,470	885
23	H: Bobcat Cages	04212014	12,866		100.00			12,866	15	150 DB HY	5.9	5,650	759	6,409	759
24	OE: Canon T31 Camera	04232014	749		100.00			749	5		0	749		749	
25	I: Well	05052014	29,943		100.00			29,943	15	150 DB HY	5.9	13,148	1,767	14,915	1,767
26	H: Flight Caging	05142014	7,746		100.00			7,746	15	150 DB HY	5.9	3,401	457	3,858	457
27	I: Privacy Vinyl Fenc	05202014	1,262		100.00			1,262	15	150 DB HY	5.9	554	74	628	74
28	H: Bobcat Enclosure	06022014	7,910		100.00			7,910	15	150 DB HY	5.9	3,473	467	3,940	467
29	H: Animal Boxes	06032014	509		100.00			509	15	150 DB HY	5.9	223	30	253	30
30	BI: Grounds House Rem	06052014	18,814		100.00			18,814	15	150 DB HY	5.9	8,262	1,110	9,372	1,110
31	H: Habitat Panels	06062014	4,028		100.00			4,028	15	150 DB HY	5.9	1,768	238	2,006	238

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Depreciation Detail Listing

Program Services
For your records only

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Name(s) as shown on return

Social security number/EIN

Keepers 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
32	BI: Generator, Hookup	06202014	1,539		100.00			1,539	7	200 DB HY	8.93	1,332	137	1,469	189
33	H: Fencng	07012014	6,000		100.00			6,000	15	150 DB HY	5.9	2,635	354	2,989	354
34	H: Hoofstock Habitat	07042014	6,866		100.00			6,866	15	150 DB HY	5.9	3,015	405	3,420	405
35	OE: Apple Computer	07252014	2,157		100.00			2,157	5		0	2,155		2,155	
36	OE: Toshiba Laptop	07252014	1,004		100.00			1,004	5		0	1,004		1,004	
37	OE: Dell Printer	07252014	1,304		100.00			1,304	5		0	1,303		1,303	
38	H: Bird Fencing	07302014	7,775		100.00			7,775	15	150 DB HY	5.9	3,415	459	3,874	459
39	H: Coyote Pen	08072014	7,943		100.00			7,943	15	150 DB HY	5.9	3,488	469	3,957	469
40	H: Coyote Cage	08072014	1,299		100.00			1,299	15	150 DB HY	5.9	570	77	647	77
41	H: Bird Flight Cages	09042014	3,207		100.00			3,207	15	150 DB HY	5.9	1,408	189	1,597	189
42	H: Bear Habitat	09042014	27,399		100.00			27,399	15	150 DB HY	5.9	12,032	1,617	13,649	1,617
43	F&F: Office Furniture	09092014	1,300		100.00			1,300	7	200 DB HY	8.93	1,125	116	1,241	159
44	H: Bird House	10112014	1,500		100.00			1,500	15	150 DB HY	5.9	657	88	745	89
45	H: Animal Boxes	11302014	915		100.00			915	15	150 DB HY	5.9	401	54	455	54
46	E: Washer/Dryer for C	11302014	824		100.00			824	7	200 DB HY	8.93	715	74	789	101
47	E: Water Heater for C	12022014	1,262		100.00			1,262	7	200 DB HY	8.93	1,094	113	1,207	155
48	I: Trees	12192014	1,097		100.00			1,097	15	150 DB HY	5.9	481	65	546	65
49	I: Property Improveme	01011990	14,332		100.00			14,332	15		0	14,332		14,332	
50	B: Buildings - Prior	01011990	2,613		100.00			2,613	15		0	2,613		2,613	
51	E: Equipment - Park	01012000	60,562		100.00			60,562	7		0	60,562		60,562	
52	F&F: Fixtures & Furni	01012000	1,403		100.00			1,403	7		0	1,403		1,403	
53	F&F: Fixtures - Gift	01012000	1,027		100.00			1,027	7		0	1,027		1,027	
54	F&F: Fixtures	01012001	4,770		100.00			4,770	7		0	4,770		4,770	
55	E: Equipment	01012001	3,917		100.00			3,917	7		0	3,917		3,917	
56	E: Equipment	01012001	285		100.00			285	7		0	285		285	
57	E: Equipment	09042001	5,456		100.00			5,456	7		0	5,456		5,456	
58	F&F: Fixtures - Deli	09042001	1,125		100.00			1,125	7		0	1,125		1,125	
59	F&F: Fixtures - Park	09212001	1,531		100.00			1,531	7		0	1,531		1,531	
60	I: Fencing	04092002	5,247		100.00			5,247	15		0	5,247		5,247	
61	F&F: Fixtures	07012002	6,752		100.00			6,752	7		0	6,752		6,752	

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Depreciation Detail Listing

Program Services
For your records only

2020

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Name(s) as shown on return

Social security number/EIN

Keepers 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
62	F&F: Fixtures - Gift	07012002	1,514		100.00			1,514	7		0	1,514		1,514	
63	E: Equipment	08162002	1,200		100.00			1,200	7		0	1,200		1,200	
64	I: Fencing	08202002	5,248		100.00			5,248	15		0	5,248		5,248	
65	E: Refrigerator - Com	09192002	1,600		100.00			1,600	7		0	1,600		1,600	
66	V: Hitching Post Trai	10152002	3,113		100.00			3,113	5		0	3,113		3,113	
67	F&F: 2003 Fixtures -	07012003	2,111		100.00			2,111	7		0	2,111		2,111	
68	F&F: 2003 Fixtures -	07012003	183		100.00			183	7		0	183		183	
69	H: Habitats	07012003	1,567		100.00			1,567	15		0	1,567		1,567	
70	B: Building	07012003	84,947		100.00			84,947	39	SL MM	2.564	35,847	2,178	38,025	2,178
71	F&F: 2003 Fixtures -	07012003	155		100.00			155	7		0	155		155	
72	F&F: Furniture & Fixt	07012003	2,626		100.00			2,626	7		0	2,626		2,626	
73	L: Land Lot 475 Golde	07012003			100.00			0	0		0				
73	LAND	07012003	9,000		100.00				0	NDA					
74	L: Land - Showlow, AZ	07012003			100.00			0	0		0				
74	LAND	07012003	3,000		100.00				0	NDA					
75	B: Buildings - Prior	01012004	7,387		100.00			7,387	39	SL MM	2.564	3,018	189	3,207	189
76	H: Habitats	01012004	112,925		100.00			112,925	15		0	71,464		71,464	
77	A: Art	01012004	55,600	55,600	100.00			0	0		0				
78	E: Pizza Oven & Stack	05152004	1,732		100.00			1,732	7		0	1,732		1,732	
79	E: Pizza Oven	06152004	1,075		100.00			1,075	7		0	1,075		1,075	
80	L: Land - Valentine,	01012005			100.00			0	0		0				
80	LAND	01012005	250,000		100.00				0	NDA					
81	OE: Office Equipment	03012005	1,255		100.00			1,255	7		0	1,255		1,255	
82	V: ATV Arctic Cat	07012005	6,132		100.00			6,132	3		0	6,132		6,132	
83	I: Fencing for Valent	08152005	6,900		100.00			6,900	15	150 DB HY	2.95	6,697	203	6,900	203
84	H: Habitat Materials	10152005	493		100.00			493	15	150 DB HY	2.95	478	15	493	15
85	I: Landscaping	03092006	13,411		100.00			13,411	15	150 DB HY	5.91	12,224	793	13,017	793
86	E: Equipment	03302006	2,500		100.00			2,500	7		0	2,500		2,500	
87	L: Land	04252006			100.00			0	0		0				
87	LAND	04252006	5,000		100.00				0	NDA					

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Depreciation Detail Listing

Program Services
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Name(s) as shown on return

Social security number/EIN

Keepers 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
88	I: Property Improve	05012006	57,400		100.00			57,400	15	150 DB HY	5.91	52,313	3,392	55,705	3,392
89	V: Trailer	05032006	1,082		100.00			1,082	7		0	1,082		1,082	
90	V: 2006 Ford F350 4X4	05092006	38,357		100.00			38,357	5	200 DB HY	0	38,357		38,357	
91	I: Property Improve	05232006	2,724		100.00			2,724	15	150 DB HY	5.91	2,485	161	2,646	161
92	E: Equipment	05242006	920		100.00			920	7		0	920		920	
93	E: Equipment	06192006	2,400		100.00			2,400	7		0	2,400		2,400	
94	BI: Building Improvem	07012006	32,617		100.00			32,617	39	SL MM	2.564	11,251	836	12,087	836
95	E: Satellite Equipmen	08152006	1,050		100.00			1,050	7		0	1,050		1,050	
96	H: Habitat Fencing	08312006	19,568		100.00			19,568	15	150 DB HY	5.91	17,834	1,156	18,990	1,156
97	H: Habitat Excavation	08312006	91,561		100.00			91,561	15	150 DB HY	5.91	83,447	5,411	88,858	5,411
98	I: Fencing	09012006	65,734		100.00			65,734	15	150 DB HY	5.91	59,908	3,885	63,793	3,885
99	I: Portable Wood Shed	10102006	5,340		100.00			5,340	15	150 DB HY	5.91	4,867	316	5,183	316
100	I: Property Improve	10312006	113,015		100.00			113,015	15	150 DB HY	5.91	102,999	6,679	109,678	6,679
101	H: Bird Habitat	11072006	400		100.00			400	15	150 DB HY	5.91	367	24	391	24
102	F&F: Furniture & Fixt	12012006	12,782		100.00			12,782	7		0	12,782		12,782	
103	I: Portable Wood Shed	12082006	15,825		100.00			15,825	15	150 DB HY	5.91	14,423	935	15,358	935
104	I: Rigid Corrals	12232006	8,194		100.00			8,194	15	150 DB HY	5.91	7,467	484	7,951	484
105	E: Equipment	12282006	10,207		100.00			10,207	7		0	10,207		10,207	
106	F&F: Furniture & Fixt	01192007	323		100.00			323	7		0	323		323	
107	E: Equipment	01192007	528		100.00			528	7		0	528		528	
108	BI: Building Improvme	01192007	625		100.00			625	39	SL MM	2.564	207	16	223	16
109	I: Property Improve	01262007	20,825		100.00			20,825	15	150 DB HY	5.9	17,754	1,229	18,983	1,229
110	I: Property Improvemen	01312007	16,479		100.00			16,479	15	150 DB HY	5.9	14,047	972	15,019	972
111	I: Property Improve	02082007	2,538		100.00			2,538	15	150 DB HY	5.9	2,164	150	2,314	150
112	E: Equipment	02202007	2,940		100.00			2,940	7		0	2,940		2,940	
113	E: Equipment	03202007	1,460		100.00			1,460	7		0	1,460		1,460	
114	H: Habitats	03292007	4,057		100.00			4,057	15	150 DB HY	5.9	3,459	239	3,698	239
115	I: Property Improve	03302007	9,145		100.00			9,145	15	150 DB HY	5.9	7,795	540	8,335	540
116	I: Property Improve	04092007	9,517		100.00			9,517	15	150 DB HY	5.9	8,112	562	8,674	562
117	I: Property Improve	05072007	20,517		100.00			20,517	15	150 DB HY	5.9	17,492	1,211	18,703	1,211

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118	H: Habitats	05162007	6,024		100.00			6,024	15	150 DB HY	5.9	5,135	355	5,490	355
119	F&F: Furniture & Fixt	05212007	1,193		100.00			1,193	7		0	1,193		1,193	
120	I: Property Improveme	05302007	8,703		100.00			8,703	15	150 DB HY	5.9	7,417	513	7,930	513
121	I: Property Improveme	06062007	6,289		100.00			6,289	15	150 DB HY	5.9	5,362	371	5,733	371
122	OE: Equipment - Offic	06072007	147		100.00			147	5		0	147		147	
123	H: Habitats	06282007	1,705		100.00			1,705	15	150 DB HY	5.9	1,455	101	1,556	101
124	H: Habitats	07042007	8,924		100.00			8,924	15	150 DB HY	5.9	7,607	527	8,134	527
125	BI: Building Improvem	07182007	5,864		100.00			5,864	39	SL MM	2.564	1,869	150	2,019	150
126	F&F: Furniture & Fixt	07192007	1,138		100.00			1,138	7		0	1,138		1,138	
127	E: Equipment	07242007	4,298		100.00			4,298	7		0	4,298		4,298	
128	H: Habitats	08222007	5,855		100.00			5,855	15	150 DB HY	5.9	4,991	345	5,336	345
129	V: Vehicle - Tour Bus	09182007	14,500		100.00			14,500	5	200 DB HY	0	14,500		14,500	
130	H: Habitats	09302007	773		100.00			773	15	150 DB HY	5.9	662	46	708	46
131	BI: Building Improvem	10242007	488		100.00			488	39	SL MM	2.564	156	13	169	13
132	H: Habitats	10312007	2,038		100.00			2,038	15	150 DB HY	5.9	1,735	120	1,855	120
133	H: Habitats	11292007	1,065		100.00			1,065	15	150 DB HY	5.9	908	63	971	63
134	I: Property Improvmen	12142007	3,753		100.00			3,753	15	150 DB HY	5.9	3,200	221	3,421	221
135	S: Signs	02012008	5,315		100.00			5,315	15	150 DB HY	5.91	4,217	314	4,531	314
136	F&F: Furniture & Fixt	03012008	918		100.00			918	7		0	918		918	
137	E: Equipment	04012008	3,559		100.00			3,559	7		0	3,559		3,559	
138	I: Property Improveme	05012008	2,704		100.00			2,704	15	150 DB HY	5.91	2,147	160	2,307	160
139	H: Habitats	06102008	8,504		100.00			8,504	15	150 DB HY	5.91	6,747	503	7,250	503
140	I: Trees for Property	04272009	1,100		100.00			1,100	15	150 DB HY	5.9	809	65	874	65
141	H: Bird House Window	06132009	468		100.00			468	15	150 DB HY	5.9	345	28	373	28
142	H: Bird Habitat	07312009	981		100.00			981	15	150 DB HY	5.9	721	58	779	58
143	H: Concrete for Birdh	08172009	359		100.00			359	15	150 DB HY	5.9	263	21	284	21
144	B: Mobile Home	08272009	20,000		100.00			20,000	39	SL MM	2.564	5,322	513	5,835	513
145	E: Bank Saw and Used	10162009	600		100.00			600	7		0	600		600	
146	E: Reach in Freezer	12162009	660		100.00			660	7		0	660		660	
147	E: Two-Way Radios	05212010	538		100.00			538	5		0	538		538	

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148	I: Fence Cover	05212010	1,071		100.00			1,071	15	150 DB HY	5.91	723	63	786	63
149	E: Food Prep Freezer	06202010	526		100.00			526	7		0	526		526	
150	A: Website Creation	07212010	460		100.00			460	5		0	459		459	
151	I: Septic System	11182010	548		100.00			548	15	150 DB HY	5.91	368	32	400	32
152	H: Den Boxes (habitat	11302010	569		100.00			569	15	150 DB HY	5.91	385	34	419	34
153	E: Gas Dryer	02112011	752		100.00			752	7		0	752		752	
154	E: Washing Machine	02272011	562		100.00			562	7		0	561		561	
155	I: Gift Shop Security	03232011	3,144		100.00			3,144	15	SL HY	6.667	1,785	210	1,995	210
156	S: Truck Sign	04012011	688		100.00			688	15	SL HY	6.667	391	46	437	46
157	E: Vacuum	05012011	438		100.00			438	7		0	438		438	
158	BI: Office Improvemen	05032011	800		100.00			800	15	SL HY	6.667	451	53	504	53
159	H: Monkey Habitats	05242011	1,254		100.00			1,254	15	150 DB HY	5.9	773	74	847	74
160	E: Water Pump & Switc	05312011	839		100.00			839	7		0	839		839	
161	A: Artwork for Advert	06202011	450		100.00			450	5		0	450		450	
162	H: Monkey Cages	07112011	877		100.00			877	15	150 DB HY	5.9	542	52	594	52
163	OE: Giftworks Softwar	07212011	75		100.00			75	3		0	75		75	
164	OE: ExoPro C270N Offi	07212011	291		100.00			291	5		0	291		291	
165	I: Lion Run Fencing	07212011	677		100.00			677	15	150 DB HY	5.9	417	40	457	40
166	H: Animal Habitats -	07312011	1,148		100.00			1,148	15	150 DB HY	5.9	708	68	776	68
167	OE: Epson All-In-One	11202011	236		100.00			236	5		0	236		236	
168	H: Animal Habitats	11302011	2,243		100.00			2,243	15	150 DB HY	5.9	1,382	132	1,514	132
169	OE: Quickbooks Pro 20	12312011	154		100.00			154	3		0	154		154	
170	V: Lift Gate for 2006	12312011	2,570		100.00			2,570	5		0	2,570		2,570	
171	I: Animal Kitchen Imp	12312011	558		100.00			558	15	SL HY	6.667	315	37	352	37
172	I: Animal Care Facili	01052012	708		100.00			708	39	SL MM	2.564	143	18	161	18
173	E: Trencher Equipment	04022012	650		100.00			650	7		0	650		650	
174	E: Sea Box Cold Stora	04182012	24,995		100.00			24,995	7		0	24,994		24,994	
175	F&F: Furniture & Fixt	04272012	2,650		100.00			2,650	7		0	2,649		2,649	
176	F&F: Cabinets in Main	08092012	1,101		100.00			1,101	7		0	1,101		1,101	
177	OE: Office Equipment	09212012	316		100.00			316	5		0	316		316	

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178	H: Tiger Dens/Habitat	10312012	22,800		100.00			22,800	15	150 DB MQ	5.9	12,196	1,345	13,541	1,345
179	H: Tiger Habitats	11022013	7,377		100.00			7,377	15	150 DB HY	5.9	4,082	435	4,517	435
180	V: 2001 Harm Custom T	11092012	20,000		100.00			20,000	7		0	20,000		20,000	
181	E: Well Motor & Contr	12062012	2,459		100.00			2,459	7		0	2,459		2,459	
182	V: 2001 Cadillac DTS	12172012	4,500		100.00			4,500	5	200 DB HY	0	4,500		4,500	
183	E: 4 Radios & Accesso	01312013	1,457		100.00			1,457	7	200 DB HY	4.46	1,392	65	1,457	65
184	OE: 2 Computers & Sof	01312013	776		100.00			776	5		0	775		775	
185	I: Well Parts	02132013	3,377		100.00			3,377	15	150 DB HY	5.9	1,682	199	1,881	199
186	E: Food Prep Refriger	02182013	2,900		100.00			2,900	7	200 DB HY	4.46	2,770	129	2,899	130
187	V: 1979 Penzng	02182013	15,000		100.00			15,000	5		0	15,000		15,000	
188	H: Habitat Fence	02202013	752		100.00			752	15	150 DB HY	5.9	374	44	418	44
189	E: Transport Cage Whe	02282013	1,055		100.00			1,055	7	200 DB HY	4.46	1,008	47	1,055	47
190	H: Coyote Habitat	05222013	472		100.00			472	15	150 DB HY	5.9	235	28	263	28
191	V: Polaris 1	07172013	7,782		100.00			7,782	7	200 DB HY	4.46	7,435	347	7,782	347
192	V: 2008 Polaris 2	07292013	8,182		100.00			8,182	7	200 DB HY	4.46	7,818	364	8,182	364
193	E: Refrigerator Compr	07292013	1,217		100.00			1,217	7	200 DB HY	4.46	1,164	53	1,217	53
194	E: Cold Storage for A	08212013	3,967		100.00			3,967	7	200 DB HY	4.46	3,789	177	3,966	178
195	BI: Storage Trailers	09102013	10,875		100.00			10,875	15	150 DB HY	5.9	5,418	642	6,060	642
196	I: Fence Improvements	09112013	17,646		100.00			17,646	15	150 DB HY	5.9	8,789	1,041	9,830	1,041
197	E: Man Basket for For	09172013	592		100.00			592	7	200 DB HY	4.46	567	25	592	25
198	E: Tractor Rebuild	10222013	1,531		100.00			1,531	7	200 DB HY	4.46	1,464	67	1,531	67
199	H: Wallaby Cabin & ha	11192013	14,130		100.00			14,130	15	150 DB HY	5.9	7,038	834	7,872	834
200	I: Fencing	12262013	2,586		100.00			2,586	15	150 DB HY	5.9	1,288	153	1,441	153
201	I: Front Gate	12262013	6,540		100.00			6,540	15	150 DB HY	5.9	3,257	386	3,643	386
202	E: Washer for Animal	02282015	299		100.00			299	7	200 DB HY	8.92	232	27	259	37
203	OE: Printer	05252015	628		100.00			628	5	200 DB HY	5.76	592	36	628	36
204	OE: HP Computer	09212015	472		100.00			472	5	200 DB HY	5.76	444	27	471	28
205	F&F: New Display Case	03202015	4,344		100.00			4,344	7	200 DB HY	8.92	3,376	387	3,763	532
206	F&F: Display Items -	05252015	4,701		100.00			4,701	7	200 DB HY	8.92	3,652	419	4,071	576
207	F&F: Display Cases -	06192015	1,836		100.00			1,836	7	200 DB HY	8.92	1,426	164	1,590	225

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208	F&F: Storeroom Shelve	06292015	1,700		100.00			1,700	7	200 DB HY	8.92	1,320	152	1,472	208
209	F&F: Ceiling Fans & L	06302015	1,031		100.00			1,031	7	200 DB HY	8.92	800	92	892	126
210	F&F: Shelving - Gift	07032015	1,300		100.00			1,300	7	200 DB HY	8.92	1,009	116	1,125	159
211	F&F: Display & Equipm	07242015	6,838		100.00			6,838	7	200 DB HY	8.92	5,313	610	5,923	838
212	F&F: Equipment - Gift	08202015	2,581		100.00			2,581	5	200 DB HY	5.76	2,432	149	2,581	149
213	F&F: Registers, Coffe	08312015	1,013		100.00			1,013	5	200 DB HY	5.76	955	58	1,013	58
214	F&F: Equipment - Gift	09212015	1,225		100.00			1,225	5	200 DB HY	5.76	1,154	71	1,225	71
215	F&F: Patio Furniture	09212015	703		100.00			703	7	200 DB HY	8.92	546	63	609	86
216	I: Commercial Well Re	12222015	1,761		100.00			1,761	15	150 DB HY	6.23	664	110	774	110
217	OE: Security System	11102015	2,440		100.00			2,440	5	200 DB HY	5.76	2,299	141	2,440	141
218	V: 2014 Ford F-250 Hi	01092015	1,064		100.00			1,064	5	200 DB HY	5.76	1,003	61	1,064	61
219	V: Truck Bumper	01152015	756		100.00			756	5	200 DB HY	5.76	712	44	756	44
220	V: TramStar Viewing T	11102015	31,450		100.00			31,450	7	200 DB HY	8.92	24,433	2,805	27,238	3,853
221	H: BamBam Habitat	01092015	7,782		100.00			7,782	15	150 DB HY	6.23	2,931	485	3,416	485
222	H: Habitat Feeders	03172015	3,000		100.00			3,000	15	150 DB HY	6.23	1,130	187	1,317	187
223	H: Feeding Tubes, Dis	03262015	2,906		100.00			2,906	15	150 DB HY	6.23	1,094	181	1,275	181
224	H: Metal Roof Shade	07012015	1,313		100.00			1,313	15	150 DB HY	6.23	495	82	577	82
225	H: Lion Feeder Powder	07222015	525		100.00			525	15	150 DB HY	6.23	197	33	230	33
226	H: Wolf Habitat	12172015	7,500		100.00			7,500	15	150 DB HY	6.23	2,825	467	3,292	467
227	S: Signs	02092015	603		100.00			603	15	150 DB HY	6.23	227	38	265	38
228	I: AB/Dirt	02092015	630		100.00			630	15	150 DB HY	6.23	239	39	278	39
229	I: Well Booster Syste	07072015	349		100.00			349	15	150 DB HY	6.23	131	22	153	22
230	I: White Fencing - Gi	08132015	10,252		100.00			10,252	15	150 DB HY	6.23	3,863	639	4,502	639
231	I: Landscaping - Gift	09292015	3,350		100.00			3,350	15	150 DB HY	6.23	1,262	209	1,471	209
232	I: Ground Irrigation	10022015	1,118		100.00			1,118	15	150 DB HY	6.23	421	70	491	70
233	I: Dirt, Rock & Sand	10222015	1,634		100.00			1,634	15	150 DB HY	6.23	616	102	718	102
234	BI: Security System -	08182015	5,345		100.00			5,345	7	200 DB HY	8.92	4,153	477	4,630	655
235	BI: New Roof on Main	08212015	10,126		100.00			10,126	15	150 DB HY	6.23	3,816	631	4,447	631
236	B: Gift Shop	10272015	431,458		100.00			431,458	39	SL MM	2.564	46,556	11,063	57,619	11,063
237	E: Washer for Animal	08232016	298		100.00			298	7	200 DB HY	8.93	205	27	232	27

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238	F&F: New Tub in Care	12142016	1,000		100.00			1,000	7	200 DB HY	8.93	688	89	777	89
239	F&F: Patio Furniture	05202016	729		100.00			729	7	200 DB HY	8.93	502	65	567	65
240	E: Washer & Dryer for	01292016	709		100.00			709	7	200 DB HY	8.93	488	63	551	63
241	E: Camera Equipment	03202016	790		100.00			790	7	200 DB HY	8.93	543	71	614	71
242	E: RV Trailer	05172016	6,000		100.00			6,000	7	200 DB HY	8.93	4,124	536	4,660	536
243	E: New Radios for Par	06202016	4,051		100.00			4,051	7	200 DB HY	8.93	2,786	362	3,148	362
244	E: Meat Saw	12202016	4,787		100.00			4,787	7	200 DB HY	8.93	3,291	427	3,718	427
245	V: 1997 Tramstar LFT	01132016	34,210		100.00			34,210	7	200 DB HY	8.93	23,523	3,055	26,578	3,055
246	H: Monkey Habitats	03182016	50,261		100.00			50,261	15	150 DB HY	6.93	15,455	3,483	18,938	3,483
247	H: Monkey Fencing	07192016	23,830		100.00			23,830	15	150 DB HY	6.93	7,328	1,651	8,979	1,651
248	H: Bird Cages	06162016	870		100.00			870	15	150 DB HY	6.93	268	60	328	60
249	H: Coyote Habitat	10032016	4,233		100.00			4,233	15	150 DB HY	6.93	1,302	293	1,595	293
250	H: Lion Habitats	12202016	55,628		100.00			55,628	15	150 DB HY	6.93	17,105	3,855	20,960	3,855
251	I: Property Improv-Sa	07132016	1,126		100.00			1,126	15	150 DB HY	6.93	346	78	424	78
252	BI: Kitchen Floor	11142016	3,523		100.00			3,523	15	150 DB HY	6.93	1,083	244	1,327	244
253	S: Park Sign	03202017	1,873		100.00			1,873	15	SL HY	6.667	312	125	437	125
254	F&F: Tub Surround in	01042017	941		100.00			941	7	200 DB HY	12.49	529	118	647	118
255	F&F: Director House F	02202017	7,018		100.00			7,018	7	200 DB HY	12.49	3,949	877	4,826	877
256	F&F: 4 Office Chairs	09192017	566		100.00			566	7	200 DB HY	12.49	319	71	390	71
257	OE: Credit Card Syste	03202017	2,288		100.00			2,288	5	200 DB HY	11.52	1,629	264	1,893	264
258	E: 2016 Bobcat Loader	08212017	81,427		100.00			81,427	7	200 DB HY	12.49	45,819	10,170	55,989	10,170
259	V: 2017 Yamaha 6-Seat	08312017	18,071		100.00			18,071	7	200 DB HY	12.49	10,169	2,257	12,426	2,257
260	H: Fencing & Habitats	02152017	15,000		100.00			15,000	15	150 DB HY	7.7	3,457	1,155	4,612	1,155
261	H: Big Cats Habitat	04192017	16,432		100.00			16,432	15	150 DB HY	7.7	3,788	1,265	5,053	1,265
262	H: Habitat Fence	05312017	5,337		100.00			5,337	15	150 DB HY	7.7	1,230	411	1,641	411
263	H: Habitat Fence	06142017	15,758		100.00			15,758	15	150 DB HY	7.7	3,632	1,213	4,845	1,213
264	H: Habitat Fence	07272017	15,000		100.00			15,000	15	150 DB HY	7.7	3,457	1,155	4,612	1,155
265	H: Habitat Fence	09062017	18,642		100.00			18,642	15	150 DB HY	7.7	4,297	1,435	5,732	1,435
266	H: Paint for Hay Barn	09272017	1,226		100.00			1,226	15	150 DB HY	7.7	282	94	376	94
267	H: Camel Pen	10172017	8,266		100.00			8,266	15	150 DB HY	7.7	1,905	636	2,541	636

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268	H: Hodor Habitat	12082017	4,547		100.00			4,547	15	150 DB HY	7.7	1,048	350	1,398	350
269	I: Rock/Sand for Grou	08012017	1,440		100.00			1,440	15	150 DB HY	7.7	332	111	443	111
270	BI: Tub Plumbing	01032017	1,249		100.00			1,249	15	150 DB HY	7.7	288	96	384	96
271	BI: New Roof on Care	02172017	11,420		100.00			11,420	39	SL MM	2.564	842	293	1,135	293
272	BI: Painting Kitchen	02282017	700		100.00			700	7	200 DB HY	12.49	393	87	480	87
273	I: Well Repair	06012017	1,111		100.00			1,111	15	150 DB HY	7.7	257	86	343	86
274	BI: Flood Repairs	08232017	1,078		100.00			1,078	39	SL MM	2.564	66	28	94	28
275	OE: Office Computer	09202018	953		100.00			953	5	200 DB HY	19.2	496	183	679	183
276	F&F: Desks, File Cabi	11202018	4,734		100.00			4,734	7	200 DB HY	17.49	1,835	828	2,663	828
277	E: Machinery for Anim	02182018	503		100.00			503	7	200 DB HY	17.49	195	88	283	88
278	E: Dryer for Towels	07312018	414		100.00			414	7	200 DB HY	17.49	160	72	232	72
279	E: Tools	08032018	2,000		100.00			2,000	7	200 DB HY	17.49	776	350	1,126	350
280	V: Trailer 2005 HHTRL	08032018	4,000		100.00			4,000	7	200 DB HY	17.49	1,552	700	2,252	700
281	OE: Camera	01202018	2,397		100.00			2,397	5	200 DB HY	19.2	1,246	460	1,706	460
282	H: Roof for Deer	07172018	2,906		100.00			2,906	15	150 DB HY	8.55	421	248	669	248
283	H: Bobcat Platforms	02152018	664		100.00			664	15	150 DB HY	8.55	96	57	153	57
284	H: Fencing for Bear H	04252018	16,313		100.00			16,313	15	150 DB HY	8.55	2,366	1,395	3,761	1,395
285	H: Swimming Pool for	04162018	1,500		100.00			1,500	15	150 DB HY	8.55	217	128	345	128
286	H: Fence for Rental H	05092018	845		100.00			845	15	150 DB HY	8.55	122	72	194	72
287	H: Ground Hog Habitat	07102018	5,000		100.00			5,000	15	150 DB HY	8.55	725	427	1,152	427
288	H: Prairie Dog Pen Ma	07202018	1,626		100.00			1,626	15	150 DB HY	8.55	235	139	374	139
289	H: Habitats	08212018	5,831		100.00			5,831	15	150 DB HY	8.55	846	499	1,345	499
290	I: Landscaping	03162018	1,600		100.00			1,600	15	150 DB HY	8.55	232	137	369	137
291	I: 3/4 AB	09082018	690		100.00			690	15	150 DB HY	8.55	101	59	160	59
292	BI: New Heat A/C Unit	01082018	7,385		100.00			7,385	7	200 DB HY	17.49	2,864	1,292	4,156	1,292
293	F&F: Office Safe	02252019	1,850		100.00			1,850	7	200 DB HY	24.49	264	453	717	453
294	BI: Plumbing Repairs	03112019	1,781		100.00			1,781	7	200 DB HY	24.49	255	436	691	436
295	E: Washer & Dryer	03062019	900		100.00			900	7	200 DB HY	24.49	129	220	349	220
296	F&F: Jonathan's Offic	06202019	2,680		100.00			2,680	7	200 DB HY	24.49	383	656	1,039	656
297	F&F: Office Furniture	09202019	535		100.00			535	7	200 DB HY	24.49	76	131	207	131

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298	E: Park Trash Cans	01212019	4,980		100.00			4,980	7	200 DB HY	24.49	712	1,220	1,932	1,220
299	V: Golf Cart	03182019	16,319		100.00			16,319	7	200 DB HY	24.49	2,332	3,997	6,329	3,997
300	V: Golf Cart	04192019	13,055		100.00			13,055	7	200 DB HY	24.49	1,866	3,197	5,063	3,197
301	E: Washer & Dryer	03202019	4,610		100.00			4,610	7	200 DB HY	24.49	659	1,129	1,788	1,129
302	E: Yard Chipper	04202019	3,100		100.00			3,100	7	200 DB HY	24.49	443	759	1,202	759
303	I: Well Repairs	08292019	6,433		100.00			6,433	15	150 DB HY	9.5	322	611	933	611
304	OE: Computer, Monitor	03202019	4,614		100.00			4,614	7	200 DB HY	24.49	659	1,130	1,789	1,130
305	OE: HP Computer	05222019	1,058		100.00			1,058	5	200 DB HY	32	212	339	551	339
306	V: 2019 Lincoln Navig	06192019	99,513		100.00			99,513	5	200 DB HY	32	19,903	31,844	51,747	31,844
307	H: Habitat Fencing	03062019	16,167		100.00			16,167	15	150 DB HY	9.5	808	1,536	2,344	1,536
308	H: Den Boxes	04182019	6,003		100.00			6,003	15	150 DB HY	9.5	300	570	870	570
309	I: Gift Shop Landscap	08262019	399		100.00			399	15	150 DB HY	9.5	20	38	58	38
310	I: Driveway Rock	08272019	782		100.00			782	15	150 DB HY	9.5	39	74	113	74
311	BI: Office Addition	01142019	15,669		100.00			15,669	39	SL MM	2.564	385	402	787	402
312	BI: Steel Awning	09232019	15,721		100.00			15,721	39	SL MM	2.564	118	403	521	403
313	BI: Office Patio	12032019	46,486		100.00			46,486	39	SL MM	2.564	50	1,192	1,242	1,192
315	F&F: Norton Door Clos	06292020	658		100.00			658	7	200 DB HY	14.29		94	94	94
316	E: Faucet with Hose	04132020	261		100.00			261	7	200 DB HY	14.29		37	37	37
317	E: Animal Clinic Equi	04142020	2,724		100.00			2,724	7	200 DB HY	14.29		389	389	389
318	E: Animal Clinic Equi	04142020	5,029		100.00			5,029	7	200 DB HY	14.29		719	719	719
319	E: Animal Clinic Equi	04162020	6,746		100.00			6,746	7	200 DB HY	14.29		964	964	964
320	E: New Clinic Tool Bo	04202020	3,145		100.00			3,145	7	200 DB HY	14.29		449	449	449
321	E: Diagnostic Tool fo	04202020	703		100.00			703	7	200 DB HY	14.29		100	100	100
322	E: Portable Floor Mod	04222020	3,005		100.00			3,005	7	200 DB HY	14.29		429	429	429
323	E: Clinic Equipment	04222020	1,228		100.00			1,228	7	200 DB HY	14.29		175	175	175
324	I: New Well Pump Moto	04232020	3,669		100.00			3,669	15	150 DB HY	5		183	183	183
325	E: Tub on Legs with R	04272020	2,871		100.00			2,871	7	200 DB HY	14.29		410	410	410
326	E: Large Animal ANES	04292020	4,564		100.00			4,564	7	200 DB HY	14.29		652	652	652
327	I: Well Repairs	05182020	5,435		100.00			5,435	15	150 DB HY	5		272	272	272
328	E: Animal Clinic Equi	05262020	493		100.00			493	7	200 DB HY	14.29		70	70	70

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329	E: Animal Clinic Equi	05262020	2,920		100.00			2,920	7	200 DB HY	14.29		417	417	417
330	E: Animal Clinic Equi	05312020	6,106		100.00			6,106	7	200 DB HY	14.29		873	873	873
331	E: Animal Clinic Equi	06302020	3,520		100.00			3,520	7	200 DB HY	14.29		503	503	503
332	E: Clinic X-ray Table	07142020	872		100.00			872	7	200 DB HY	14.29		125	125	125
333	E: Medical Equipment	07212020	8,976		100.00			8,976	7	200 DB HY	14.29		1,283	1,283	1,283
334	E: Animal Clinic Equi	07312020	1,108		100.00			1,108	7	200 DB HY	14.29		158	158	158
335	E: Animal Clinic Equi	08072020	311		100.00			311	7	200 DB HY	14.29		44	44	44
336	I: New Well	08072020	3,241		100.00			3,241	15	150 DB HY	5		162	162	162
337	I: Well Repair	11182020	5,404		100.00			5,404	15	150 DB HY	5		270	270	270
338	E: Animal Clinic Equi	03202020	1,489		100.00			1,489	7	200 DB HY	14.29		213	213	213
339	H: Fencing	03102020	2,458		100.00			2,458	15	150 DB HY	5		123	123	123
340	H: Fencing	04302020	3,497		100.00			3,497	15	150 DB HY	5		175	175	175
341	H: Fencing	07142020	1,736		100.00			1,736	15	150 DB HY	5		87	87	87
342	H: Fencing	09152020	1,917		100.00			1,917	15	150 DB HY	5		96	96	96
343	H: Bottom Tray for Mo	09152020	119		100.00			119	15	150 DB HY	5		6	6	6
344	H: Javalina Pen	09282020	1,080		100.00			1,080	15	150 DB HY	5		54	54	54
345	I: New Well	06172020	17,208		100.00			17,208	15	150 DB HY	5		860	860	860
346	BI: Electric Upgrades	02182020	2,380		100.00			2,380	39	SL MM	2.244		53	53	53
347	F&F: Blinds for Offic	02182020	1,129		100.00			1,129	7	200 DB HY	14.29		161	161	161
348	BI: Animal Medical Ce	02182020	3,872		100.00			3,872	39	SL MM	2.244		87	87	87
349	F&F: New Blinds for C	01272020	1,100		100.00			1,100	7	200 DB HY	14.29		157	157	157
350	BI: Animal Clinic	03312020	469		100.00			469	39	SL MM	2.03		10	10	10
351	BI: Clinic Carpentry	04072010	2,000		100.00			2,000	39	SL MM	2.564		51	51	51
352	F&F: Ceiling Fan for	04302020	387		100.00			387	7	200 DB HY	14.29		55	55	55
353	BI: New Clinic Electr	05052020	2,926		100.00			2,926	39	SL MM	1.603		47	47	47
354	BI: Clinic Carpentry	05062020	2,066		100.00			2,066	39	SL MM	1.603		33	33	33
355	BI: New Floor for Car	01232020	2,019		100.00			2,019	39	SL MM	2.457		50	50	50
356	I: Concrete for Offic	03062020	3,400		100.00			3,400	15	150 DB HY	5		170	170	170
20	Assets Sold/Abandoned B: Rental House	04082014	135,916		100.00			135,916	27.5	SL MM	1.061	28,211	1,442	29,653	1,442

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314	B: VV Rental House Im	06182019	409		100.00			409	5	200 DB HY	32	82	65	147	65
Totals			3,548,779					3,226,178				1,604,375	196,177	1,800,552	201,955

Land Amount 267,000
Net Depreciable Cost 3,281,779

CY 179 and CY Bonus
TOTAL CY Depr including 179/bonus 196,177

ST ADJ:

Depreciation Reconciliation for Keepers of the Wild

	Cost	Basis	Current Depreciation	Accumulated Depreciation	Bonus Depreciation
Beginning of Year	3,159,538	3,103,937	184,962	1,789,337	
Placed in Service in Current Year	122,241	122,241	11,215	11,215	
Removed from Service in Current Year	136,325	136,325	1,507	29,800	
End of Year	3,145,454	3,089,853	194,670	1,770,752	