Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Α	For the	2018 calendar year, or tax year beginning January 1 , 2018, and e	ending Dece	ember 31	, 20 18						
В	Check if a	applicable: C Name of organization Jackson Hole Wildlife Foundation		D Employ	er identification n	umber					
	Address o	change Doing business as			83-0302830						
	Name cha		om/suite	E Telephor							
	Initial retu			100	307-739-0968						
Ī		/terminated City or town, state or province, country, and ZIP or foreign postal code			001 100 0000						
	Amended			G Gross re	oninto 6	295,239					
H		in pending F Name and address of principal officer:	10010-465-	-							
	Application	Jon Mobeck, Executive Director, PO Box 8042, Jackson, WY 83002			subordinates? Yes						
-	T		10.0		s included? Yes						
-	Tax-exem Website:					2115/					
v				p exemption		14/1/					
_	art	ganization: ☐ Corporation ☐ Trust ☐ Association ☑ Other ► Foundation ☐ L Year of to Summary	ormation: 1992	M State	of legal domicile:	WY					
			alasas III-ta Milli	W. F		51100140					
m		Briefly describe the organization's mission or most significant activities: Ja	ickson Hole Wild	life Found	ation works to	promote					
nce	7	ways for our community to live compatibly with wildlife.									
ELL											
ove.		Check this box ▶☐ if the organization discontinued its operations or dispos			its net assets.						
Ö		Number of voting members of the governing body (Part VI, line 1a)				9					
Activities & Governance		Number of independent voting members of the governing body (Part VI, line									
		Total number of individuals employed in calendar year 2018 (Part V, line 2a)				4					
		Total number of volunteers (estimate if necessary)		-		150					
		Total unrelated business revenue from Part VIII, column (C), line 12		. 7a							
	b 1	Net unrelated business taxable income from Form 990-T, line 38	9 9 3 3 4	. 7b							
			Prior \	fear	Current Y	ear					
Revenue	8 (Contributions and grants (Part VIII, line 1h)		248,578		288,626					
	9 F	Program service revenue (Part VIII, line 2g)									
	10 i	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	71	534 417							
ш	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)									
	12	Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	249,482		295,239					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)									
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)									
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		155,044	149,77						
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)									
be		Total fundraising expenses (Part IX column (D) line 25)									
ŵ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		76,033		135,415					
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		231,077		285,185					
		Revenue less expenses. Subtract line 18 from line 12		18,405		10,054					
35			Beginning of C		End of Ye						
ets	20 7	Total assets (Part X, line 16)		241,845		201,159					
Ass Bal		Total liabilities (Part X, line 26)	'	85,777		35.039					
Net	22 1	Net assets or fund balances. Subtract line 21 from line 20									
P	art II	Signature Block		156,067		166,120					
			A del polici a l'agri	4.5.		No.					
tru	e, correct,	ies of perjury, I declare that I have examined this return, including accompanying schedules and and complete. Declaration of preparer (other than officer) is based on all information of which pre	statements, and to parer has any know	the best of m	ny knowledge and	belief, it is					
-		1 MAPA MALL	The state of the s	, ougu	1-110						
Sig	in l	Signature of officer		ate	12/17						
He		() Jan Mobeck Executive Director	D	ale	1						
110	, .	Type or print name and title									
-	2.	Print/Type preparer's name Preparer's signature	Date	-	DTIN						
Pa			Date	Check [] If PTIN						
	eparer		1	self-emp	loyed						
Us	e Only		Fir	m's EIN 🕨							
		Firm's address >	Ph	one no.		_					
		discuss this return with the preparer shown above? (see instructions) .		(-a - b - c	Tyes						
For	Paperwo	ork Reduction Act Notice, see the separate instructions.	Cat. No. 11282Y		Form 9	90 (2018)					

_				
P	a	a	e	4
	-	0	-	

Part	
_	Check if Schedule O contains a response or note to any line in this Part III
1	Jackson Hole Wildlife Foundation works to promote ways for our community to live compatibly with wildlife.
	Jackson Flore Winding Foundation Works to promote ways to be a community to the company with the company of the
2	Did the organization undertake any significant program services during the year which were not listed on the
) 100 .)	prior Form 990 or 990-EZ?
	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?
	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 be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	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.
	the total expenses, and revenue, if any, for each program solvide reported.
4a	(Code:) (Expenses \$ 86,691 including grants of \$) (Revenue \$)
	Nature Mapping Jackson Hole program: citizen science research project with the goals of: 1) keeping common species common,
	2) increasing citizen's knowledge of and appreciation for wildlife in Teton County, Wyoming, 3) engaging citizens in long-term wildlife
	data collection, 4) informing managment decisions that favor willdife sustainability, and 5) contributing data to the Wyoming Game
	and Fish Department's Wildlife Observation System to augment state data. Through Nature Mapping Jackson Hole, we have recorded
	more than 50,000 wildlife observations with more than 500 trained citizen scientists. Our weekly floats of the Snake River give us 7
	years of data on wildlife activity in a crucial riparian corridor. We trained 65 citizen scientists in 2018. We captured 656 birds for
	banding in 2018, including 44 species. Our Moose Day project included 91 moose observations to supplement agency aerial surveys.
	We banded 72 Mountain Bluebirds via the Mountain Bluebird Nestbox Monitoring Project.
4b	(Code:) (Expenses \$ 79,644 including grants of \$) (Revenue \$)
	Wildlife Friendlier Fencing program: improving landscape permeability for migrating wildlife through modification and removal of
	fences. Through 2018, we have improved more than 200 miles of fences to benefit wildlife. In 2018, we benefited from 325 volunteer
	days, contributing more than 1,700 hours in the field to improve almost 14 miles of fence. We work with many key agency partners
	and private landowners through this program.

	(Code:) (Expenses \$ 51,318 including grants of \$) (Revenue \$
4c	
	Give Wildlife a Brake: Utilizing various mitigation tools, we aim to reduce wildlife-vehicle collisions on our roadways. These tools
	include digital message boards, fixed radar speed feedback signs, speed limit reductions, wildlife crossing structure planning. We
	also continue to compile the most comprehensive wildlife-vehicle collision report in the county to inform transportation planning
	and wildlife conservation efforts. We also used wildlife-vehicle collision data to move 7 digital message boards around the county
	to alert drivers to wildlife movement - protecting wildlife and improving driver safety.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 15,618 including grants of \$) (Revenue \$)
4e	Total program service expenses ► 233,271

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

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		√
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c 24d		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		·
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		V
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		√
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	
Pari	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		=	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable)		-
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a . 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			18
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		√
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			,
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		· ·
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		· ·
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- 00	-	-
0a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			4
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
3	required to file Form 8282?	7c		√
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/		
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	W.	R Se	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	101		
а		13a		1
	Note. See the instructions for additional information the organization must report on Schedule O.			10.
b	Enter the amount of reserves the organization is required to maintain by the states in which			
ST6	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	03000		
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		-
	If "Yes," complete Form 4720, Schedule O.			1

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
C41	Check if Schedule O contains a response or note to any line in this Part VI		• •	✓
Secti	on A. Governing Body and Management		Yes	No
	E. I. II		res	NO
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	9		
	If there are material differences in voting rights among members of the governing body, or		100	1.2
	if the governing body delegated broad authority to an executive committee or similar	1 1		
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		√
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve		ode.)	
0000	on bit office (the could be separate to the co	-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			·
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	-	-
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√	-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10-	,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	V	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		,	
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	/	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		✓
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b				<u> </u>
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on 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-			
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	1 1000		001(0)
	✓ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	torost	nalia	/ 255
19	financial statements available to the public during the tax year.	ILDI EST	holic,	y, aric
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	ecords	•	
	Jon Mobeck, Executive Director, PO Box 8042, Jackson, WY 83002; 307-739-0968			

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01111 000 (201	5)							
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.

List persons in the following order: individ compensated employees; and former such persons the compensated employees; and the compensated employees are compensated employees; and the compensated employees are compensated employees.	ual trustees sons.	s or	dire	ecto	rs;	instit	tutio	onal trustees;	officers; key e	employees; highes
☐ Check this box if neither the organization no	r any related	d orga	aniz	atio	n co	ompe	nsa	ted any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	do x, office Individua	ot ch	Posi neck is pe	ition more	than or trust Highest compensated employee	one an	(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
(1) Alyson Courtemanch President, Board of Directors	5	√		1						
(2) Steve Brandenburg	1									
Vice President, Board of Directors		✓		✓						
(3) Geneva Chong	1									
Secretary, Board of Directors		1		1						
(4) Dan Zelenko	1									
Treasurer, Board of Directors		✓		1			L			
(5) Dawson Smith	1									
Board of Directors		✓								
(6) Mark Newcomb	1									
Board of Directors		1								
(7) Sue Consolo-Murphy	1									
Board of Directors		✓								
(8) Leslie Steen	1									
Board of Directors		1		_						
(9) Ben Wise	1									
Board of Directors		✓								
(10) Bruce Pasfield	1									
Board of Directors		V								
(11)										
(12)										
(13)		-								
(14)										

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (contin	nued)		
	(A) Name and title	(B) Average hours per week (list any	box, t	unles	s pe	ition more	than of the the than of the	an	(D) Reportable compensation from	(E) Reportable compensation from related	Esti	(F) mated ount of ther	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	comp fro orgai and	ensation m the nization related nization	n I
15)		+										-	
16)													
17)													
18)													
(19)		<u> </u>											
(20)													
(21)													
(22)													
(23)													
(24)							-	-					
(25)		1						+					
C	Sub-total . Total from continuation sheets to Par Total (add lines 1b and 1c)	t VII, Sectio			·			A A A					
2	Total number of individuals (including bureportable compensation from the organ	at not limited							vho received m	ore than \$100,00	00 of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	officer, direc	tor, o	or tr	rust	ee,	key i	em;	oloyee, or high	nest compensate	ed 3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$	ble 150,	con	npe	nsatio	on a	and other comp				1
5	Did any person listed on line 1a receive for services rendered to the organization	or accrue co	ompe	nsa	tion								1
	on B. Independent Contractors			_			595550						
1	Complete this table for your five highest compensation from the organization. Reyear.												ах
	(A) Name and business ac	dress							(B) Description of s	services	(C) Compen		
2	Total number of independent contract received more than \$100,000 of compen							o ti	nose listed ab	ove) who			Y

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a res	sponse or note to				
				(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns 1a		THE REAL PROPERTY.			-80" . 54 1 . 12
Grants	b	Membership dues 1b				100	
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events 1c					mark to
	d	Related organizations 1d				132- T	
	е	Government grants (contributions) 1e				December 1	
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	288,626				
ntri d O	g	Noncash contributions included in lines 1a-1f: \$					1477
Cor	h	Total. Add lines 1a-1f	>	288,626			
			Business Code				
ven	2a	Merchandise Sales		125			
Program Service Revenue	b	Program and Professional Svc Fees		6,071			
vice	С						
Ser	d						
E	е						
ogra	f	All other program service revenue.					
<u> </u>	g	Total. Add lines 2a-2f	>	6,196			
	3	Investment income (including dividence)					
			>	417		ļ	
	4	Income from investment of tax-exempt b				ļ	
	5	Royalties	(ii) Personal				
			(II) Personal				
	6a	Gross rents	+				
	b	Less: rental expenses	+				
	С	Rental income or (loss)					-
	d	# C 4E	, , , , ▶ (ii) Other				
	7a	GIUSS AITIOUTIL TIUTTI SAIGS UI	(II) Other				
		assets other than inventory	ļ				
	Ь	Less: cost or other basis and sales expenses .					
	c	Gain or (loss)	+				
	- 2	Net gain or (loss)	•	417		 	
0	d			- "		F29-	
venue	8a	Gross income from fundraising				- 15	
		events (not including \$					
æ		of contributions reported on line 1c). See Part IV, line 18					
Other Re		The state of the s	3				
ō			0				
		Net income or (loss) from fundraising	events .				
	98	Gross income from gaming activities. See Part IV, line 19					
			-				
	10000	Less: direct expenses I Net income or (loss) from gaming ac	tivities >				
		Gross sales of inventory, less	tivities			 	
	Iva	returns and allowances					
	b	POR DE ART HE RE UT	0				
		Net income or (loss) from sales of inv				 	
	-	Miscellaneous Revenue	Business Code			1	
	11a	Wildowillandous Havehille	Dualitess Gode			+	+
	11a					-	
	C		-			+	1
	d	All other revenue				<u> </u>	
		Total. Add lines 11a-11d	.			1	
		Total revenue. See instructions	•	295,239		1	

Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, , 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	67,534	48,847	8,853	9,834
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 8	Other salaries and wages	82,236	72,463	1,533	8,240
9	Other employee benefits	12,248	10,434	824	990
10	Payroll taxes	13,447	10,677	1,630	1,140
11	Fees for services (non-employees):			1	
а	Management	21,530	19,490	2,040	0
b	Legal				
С	Accounting	4,815	0	4,815	0
ď	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees				
12	Advertising and promotion	7,698	6.308	0	1,390
13	Office expenses	51,389	45,228	2,744	3,417
14	Information technology	4,757	4,757	0	C
15	Royalties				
16	Occupancy	12,612	9,332	1,640	1,640
17	Travel	3,127	3,127	0	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	330	330	0	(
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	2.460	2 270	920	25/
23	Insurance	3,462	2,278	830	354
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount list line 24s expenses on Schodule (A)				
	(A) amount, list line 24e expenses on Schedule O.)			- PSU5	
a					
b					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	285,185	233,271	24,909	27.005
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 if following SOP 98-2 (ASC 958-720)	200,100	200,211	11,000	2.,000

Form 990 (2018)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 129,217 133,828 1 108,015 48.432 2 2 Savings and temporary cash investments 11,994 3 3 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 8 8 9 Prepaid expenses and deferred charges . Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 13,288 Less: accumulated depreciation 10b -1.772 10c 11.516 ь 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 . 12 12 Investments - program-related. See Part IV, line 11 . . . 13 13 14 14 15 15 241.843 16 201,159 Total assets. Add lines 1 through 15 (must equal line 34) . . 16 3.039 17 5,039 17 18 18 82,739 19 19 30,000 20 21 Escrow or custodial account liability, Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 iabilities trustees, key employees, highest compensated employees, and 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 85,777 26 35,039 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 156,066 27 27 142,610 Temporarily restricted net assets . . . 28 Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 0 Capital stock or trust principal, or current funds , , 30 Assets 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 Retained earnings, endowment, accumulated income, or other funds . 32 32 Net 156.066 33 166,120 33 241,843 34 201,159 Total liabilities and net assets/fund balances

-			-	-
P	80	18	- 1	2

	Reconciliation of Net Assets	Part
	Check if Schedule O contains a response or note	
	Total revenue (must equal Part VIII, column (A), line 12)	1
	Total expenses (must equal Part IX, column (A), line 25)	2
	Revenue less expenses. Subtract line 2 from line 1	3
	Net assets or fund balances at beginning of year (must eq	4
	Net unrealized gains (losses) on investments	5
	Donated services and use of facilities	6
	Investment expenses	7
	Prior period adjustments	8
	Other changes in net assets or fund balances (explain in S	9
	Net assets or fund balances at end of year. Combine line 33, column (B))	10
	TXII Financial Statements and Reporting Check if Schedule O contains a response or note	Part
Yes No	Check is scriedule o contains a response of note	-
	Accounting method used to prepare the Form 990: Call f the organization changed its method of accounting f Schedule O.	1
statements for the year were compiled or	Were the organization's financial statements compiled or If "Yes," check a box below to indicate whether the fin reviewed on a separate basis, consolidated basis, or both	2a
	☐ Separate basis ☐ Consolidated basis ☐ Both co	
endent accountant?	Were the organization's financial statements audited by a	b
ted and separate basis	If "Yes," check a box below to indicate whether the fin- separate basis, consolidated basis, or both: Separate basis Consolidated basis Both co	
e that assumes responsibility for oversight selection of an independent accountant?	of the audit, review, or compilation of its financial statement	С
ion process during the tax year, explain in	If the organization changed either its oversight process of Schedule O.	
	As a result of a federal award, was the organization requested Single Audit Act and OMB Circular A-133?	37.5
ts? If the organization did not undergo the	o If "Yes," did the organization undergo the required audit required audit or audits, explain why in Schedule O and d	b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust, ► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

acks	on Ho	ole Wildlife Foundation					83-030	2830
Par	T	Reason for Public Cha	rity Status (A	l organizations must	comple	te this p	art.) See instruction	ns.
he o	rgani	zation is not a private founda	ation because it	is: (For lines 1 through	12, chec	k only or	ne box.)	
1	ĎΑ	church, convention of churc	hes, or associa	tion of churches descri	bed in se	ection 17	0(b)(1)(A)(i).	
2	□ A	school described in section	170(b)(1)(A)(ii)	(Attach Schedule E (F	orm 990	or 990-E2	Z).)	
3	DA	hospital or a cooperative ho	spital service o	rganization described in	section	170(b)(1)(A)(iii).	
4		medical research organizationspital's name, city, and state		conjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)(iii). Enter the
5	DA	n organization operated for ection 170(b)(1)(A)(iv). (Com	the benefit of	a college or university	owned o	r operate	ed by a government	al unit described in
6		federal, state, or local gover						
7		n organization that normally escribed in section 170(b)(1)			port from	a govern	nmental unit or from	the general public
8	DA	community trust described i	n section 170(b)(1)(A)(vi). (Complete F	Part II.)			
9	0	n agricultural research organ r university or a non-land-gra niversity:						
10	re	n organization that normally eceipts from activities related upport from gross investmen equired by the organization a	to its exempt f	unctions - subject to con nrelated business taxal	ertain exc	ceptions, ne (less se	and (2) no more than ection 511 tax) from	1 331/3% of its
11		n organization organized and						
12		n organization organized and						
		f one or more publicly suppliched the box in lines 12a thro						
а		Type I. A supporting organithe supported organization supporting organization. Y	n(s) the power t	o regularly appoint or e	lect a ma	ajority of t		
b		Type II. A supporting orga control or management of organization(s). You must	the supporting	organization vested in	the same			
C		Type III functionally integ its supported organization						Illy integrated with,
d		Type III non-functionally that is not functionally inte requirement (see instructional see instructions).	grated. The org	anization generally mu	st satisfy	a distribu	ution requirement an	
e		Check this box if the organ functionally integrated, or	nization receive Type III non-fur	d a written determination	on from toporting	he IRS th organizat	at it is a Type I, Type ion.	II, Type III
f	Ent	ter the number of supported				1-1-1		
g	Pro	ovide the following information	n about the sup	oported organization(s)				
	(i) Na	ime of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in yo	organization ur governing iment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
+-4-						1		

18

Par	(Complete only if you checked the Part III. If the organization fails to	e box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	alify under
Coot	ion A. Public Support	quality unde	er the tests in	sted below, p	rease comple	ite i ait iii.j	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
Caler	Gifts, grants, contributions, and	(a) 2014	(b) 2013	(6) 2010	(a) 2017	(6) 2010	(1) 1014
	membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10					7-14-77	
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	nd, third, fourt	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he			(A) (4 A A A	* * * * *	* * * * * :	🕨 🛚
Sect	tion C. Computation of Public Suppor	t Percentag	ge				
14	Public support percentage for 2018 (line	3, column (f) d	livided by line	11, column (f))	at at 247 (47	14	%
15	Public support percentage from 2017 Sch					15	%
16a							
	box and stop here. The organization qua						
b	331/3% support test - 2017. If the organithis box and stop here. The organization						
17a	10%-facts-and-circumstances test – 2 10% or more, and if the organization me Part VI how the organization meets the 'organization'.	eets the "facts 'facts-and-circ	s-and-circums cumstances" t	tances" test, c	heck this box	and stop here	. Explain in
b	10%-facts-and-circumstances test – 2 15 is 10% or more, and if the organization recognization in Part VI how the organization recognization recognization.	ation meets th	he "facts-and-	-circumstances	" test, check	this box and	stop here.

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

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

(Complete only if you checked the box on line 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.)

Conti	an A Public Support	311001 1110 100		., p		7	
	on A. Public Support	(2) 2014	(b) 2015	(a) 2016	(d) 2017	(e) 2018	(f) Total
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(u) 2017	(6) 2010	(i) iotai
1	Gifts, grants, contributions, and membership fees	4		007.070	040 570	200 000	1 007 000
•	received. (Do not include any "unusual grants.")	174,456	178,477	207,072	248,578	288,626	1,097,209
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
7	organization's benefit and either paid to						
	or expended on its behalf				1		
_	The value of services or facilities						
5	furnished by a governmental unit to the					,	
	organization without charge		1				
		474 450	470 477	207.270	040 570	202 202	1 007 000
6	Total. Add lines 1 through 5	174,456	178,477	207,072	248,578	288,626	1,097,209
7a							
	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						1,097,209
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	174,456	178,477	207,072	248,578	288,626	1,097,209
	Gross income from interest, dividends,						
100	payments received on securities loans, rents,						
	royalties, and income from similar sources .	257	255	280	534	417	1,743
L	Unrelated business taxable income (less	201	200			711	- 1,1 10
b	section 511 taxes) from businesses						
	acquired after June 30, 1975					1	
		057	055	280	534	417	1.743
	Add lines 10a and 10b	257	255	280	534	417	1,743
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			1			
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	174,713	178,734	207,352	249,112		1,098,954
14	First five years. If the Form 990 is for the	e organization	's first, second	l, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop her						🕨 🗆
Secti	on C. Computation of Public Suppor	t Percentage					
15	Public support percentage for 2018 (line 8	, column (f), di	vided by line 1	3, column (f))	* * * *	15	99 %
16	Public support percentage from 2017 Sch	edule A, Part I	II, line 15 .			16	99 %
Secti	on D. Computation of Investment Inc	come Percer	itage				
17	Investment income percentage for 2018 (i	ine 10c, colum	n (f), divided b	y line 13, colur	mn (f))	17	.001 %
18	Investment income percentage from 2017	Schedule A, F	art III, line 17			18	.001 %
19a	331/3% support tests - 2018. If the organi	zation did not	check the box	on line 14, an	d line 15 is mo	ore than 331/39/	
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2017. If the organiz						
5	line 18 is not more than 331/3%, check this b	oox and stop he	ere. The organi	zation qualifies	as a publicly su	upported organi	zation >
20	Private foundation. If the organization di						
20	r invate iounidation. Il the organization di	a Hot offect a t	75 OIT 11110 14,	. 54, 5, 155, 6	Joh Line Dox		

Part IV

Supporting Organizations

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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).	5a		
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?	5b	B,E	
С		5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		17.
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
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? If "Yes," provide detail in Part VI.	9b		
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11c		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	110		
Secti	on B. Type I Supporting Organizations		Yes	No
	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	140
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		- "
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Sect	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity Activities Test. Answer (a) and (b) below.		nstruci	
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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

instructions).

instructions. All other Type III non-functionally integrated supporting organ	ization	ns must complete Sec	lain in Part VI). See tions A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Ye (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 Yea (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	10			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d.	3			
4 Cash deemed held for exempt use. Enter 1-1/2% 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 .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 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). 7 Check here if the current year is the organization's first as a non-functional 	6			

Part	Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continued)	
Secti	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E-Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016		NE DELIVERY PART IN THE	
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.		MAN HE STATE	
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			- 1,-34
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017		V IX	1.00
е				

-				
- 0	9	a	0	

Part VI	Ill, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B

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

Department of the Treasury Internal Revenue Service

Jackson Hole Wildlife Foundation

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

83-0302830

2018

Organization type (check one): Section: Filers of: √ 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 331/2% 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) filling 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

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).

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Employer identification number

Part I	Contributors (see instructions). Use duplicate co	ppies of Part I if additional space is r	needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Meg and Bert Raynes Wildlife Fund 3180 Mallard Drive Jackson, WY 83001	\$ 18,000	Person Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions		
	Louise and Ralph Haberfeld PO Box 13015 Jackson, WY 83002	\$ 15,095	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
******	Holly McAllister PO Box 9288 Jackson, WY 83002	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
P	Teton Conservation District 230 E. Broadway Ave Jackson, WY 83001	\$\$11,994	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Knobloch Family Foundation PO Box 1530 Wilson, WY 83014	\$ 10,000	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	Dan and Sharon Zelenko PMB 447 Jackson, WY 83002	\$ 5,000	Person Payroll Noncash (Complete Part II for noncash contributions.)	

Employer identification number 83-0302830

Part I	Contributors (see instructions). Use duplicate co		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Terry, Stu, Elliot Bauman Family Foundation 2035 West 59th Street Mission Hills, KS 66208	\$\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part If for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Employer identification number

Part II No			
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	******************************
n) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
 		\$	5
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Part III

Employer identification number

		e year. (Enter this information of	orice. See instructions.)		
	Ise duplicate copies of Part III if add	litional space is needed.			
No. om ert I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, at	(e) Transfer of gift	Relationship of transferor to transferee		
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee		
12-1-					
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel		
	(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/Form990.

Note: Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

What's New

For tax years ending on or after December 31, 2018, certain tax-exempt organizations are no longer required to report the names and addresses of their contributors on Schedule B (Form 990 or 990-EZ). However, these organizations must continue to keep this information in their books and records. Organizations described in section 501(c)(3) and section 527 are still required to report the names and addresses of their contributors on Schedule B. See Rev. Proc. 2018-38, 2018-31 I.R.B. 280, and General Rule, below.

Purpose of Schedule

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990, Return of Organization Exempt From Income Tax, Part VIII, Statement of Revenue, line 1;
- Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, Part I, line 1; or
- Form 990-PF, Return of Private Foundation, Part I, line 1.

Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it doesn't meet the filing requirements of this schedule by:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2; or
- · Checking the box on:
 - . Form 990-EZ, line H; or
 - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization isn't required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

Accounting Method

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, Financial Statements and Reporting, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

Public Inspection

Note: Don't include social security numbers of contributors as this information may be made public.

- Schedule B is open to public inspection for an organization that files Form 990-PF.
- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.
- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors aren't required to be made available for public inspection. All other information, including the amount of contributions, the description of noncash contributions, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it shouldn't include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that don't require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

Contributions To Be Included on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report governmental units as contributors.

Contributions

Contributions reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions don't include fees for the performance of services. See the instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

General Rule

Unless the organization is covered by one of the Special Rules, later, it must report in Part I contributions from all persons who contribute \$5,000 or more (in money or other property) during the tax year. As described below, certain organizations report only total contribution amounts. Contributions may be made directly or indirectly and may take the form of money, securities, or any other type of property.

Include all separate and independent gifts that are \$1,000 or more to determine a contributor's total contribution. Gifts that are less than \$1,000 may be disregarded. Include each contribution reported on Form 990, Part VIII, line 1. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization didn't receive the property during the tax year.

Certain organizations not required to report contributor names and addresses. Certain organizations are no longer required to report the names and addresses of their contributors on Schedule B. Such organizations are those other than:

- Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), or
- Section 527 political organizations.

Organizations not required to report the names and addresses should enter "N/A" in Part I, column (b). These organizations must continue to:

- Collect the names and addresses of their contributors.
- Keep this information in their records and books, and
- Make the information available to the IRS upon request.

Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), and section 527 political organizations must continue to report the names and addresses of their contributors in Part I, column (b), on Schedule B.

Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A); or Form 990-EZ, line 1. An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990 or 990-EZ), Part II, that it met the 331/3% support test for the current year or prior year; or (2) check the box on Schedule A (Form 990 or 990-EZ), Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(1)(A)(vi) organization in its first 5 years.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who

contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 wouldn't be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it didn't exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that weren't for an exclusively religious, charitable, etc., purpose, list in Part I contributions from each contributor who contributed \$5,000 or more during the tax year, as described under General Rule, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (section 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I contributions from each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

All section 501(c)(7), (8), or (10) organizations listing contributions under this special rule should enter "N/A" in Part I, column (b), and should not enter the name and address of any contributor.

However, if a section 501(c)(7), (8), or (10) organization didn't receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently wasn't required to complete Parts I through III with respect to these contributions, it need only check the third Special Rules box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

Specific Instructions



Don't attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II, and III of

Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number

consecutively. In column (b), section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and section 501(c)(3) nonexempt private foundations) and section 527 organizations enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization doesn't know the donor's identity. Other organizations enter "N/A" in place of each contributor's name, address, and ZIP code. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a cash contribution came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an employee's cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address or "N/A," as applicable, and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a piedge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization didn't receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that aren't reported on Form 8872, Political Organization Report of Contributions and Expenditures, don't need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the noncash contribution received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, market quotations for securities) by listing its fair market value (FMV). If the organization immediately sells securities contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net

proceeds plus the broker's fees and expenses. See the instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property isn't immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20,2031-2 to determine the value of contributed stocks and bonds. When FMV can't be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any qualified conservation contributions and contributions of conservation easements listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

Name of the organization 83-0302830 Jackson Hole Wildlife Foundation Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes No 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? Yes No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and 9 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (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. b If the organization elected, as permitted under SFAS 116 (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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: \$

Part	Organizations Maintaining	Collections of A	rt, Hist	orical Tre	asures, c	or Oth	er Similar Ass	sets (co	ntinu	red)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and other	er recor	ds, check	any of the	followi	ng that are a si	gnificant	use	of its
а	Public exhibition		d [_ Loan or	exchange	progra	ims			
b	Scholarly research		e [Other						
C	Preservation for future generations									
4	Provide a description of the organizat XIII.								se in	Part
5	During the year, did the organization assets to be sold to raise funds rather	than to be maintain	onation ned as p	s of art, his part of the o	storical trea organization	asures, n's coll	or other simila ection?	☐ Ye	s [No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes"					the same of		Forr	n
	Is the organization an agent, trustee, included on Form 990, Part X?								s [No
ь	If "Yes," explain the arrangement in Pa	art XIII and complet	e the fo	llowing tab	le:		Ar	nount		
c	Beginning balance					10				
d	Additions during the year		1 6	1117	4 4 6	1d				
e	Distributions during the year					1e				
f	Ending balance	3 8 8 9 9 9			F F R	1f				
2a	Did the organization include an amour	nt on Form 990, Par	t X, line	21, for esc	row or cus	todial	account liability	? 🗌 Ye	s [No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	if the ex	xplanation I	nas been p	rovide	d on Part XIII .			
Pari	V Endowment Funds.									
	Complete if the organization				rt IV, line	10.				
-		(a) Current year	(b) Prid	or 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									_
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t	he current year end	balanc	e (line 1g,	column (a))	held a	S:			
a b	Board designated or quasi-endowment Permanent endowment	nt ▶	%							
c	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and	2c should equal 10	0%.							
3a	Are there endowment funds not in the	e possession of the	organi	zation that	are held a	nd adr	ninistered for th			
	organization by:							1	Yes	No
	(i) unrelated organizations		Y Y	1 1 1 1 1 1	1. 11. 10.11	111 8		3a(i)		
	(ii) related organizations				400	~ ~		3a(ii)		_
b	If "Yes" on line 3a(ii), are the related o					e . 1911 19		3b		
4	Describe in Part XIII the intended uses		n's endo	owment fur	ds.					
Pari										
	Complete if the organization	answered "Yes"	on For	m 990, Pa	art IV, line	11a. S	See Form 990,	Part X,	ine '	10.
	Description of property	(a) Cost or oth (investme		(b) Cost or (oth			occumulated preciation	(d) Boo	k value	В
1a	Land ,									
b	Buildings									
C	Leasehold improvements	-								
d	Equipment				13,288		1,772			11,516
е	Other ,				4.2.1					
Total	Add lines 1a through 1e. (Column (d) r	nust equal Form 99	0. Part	X, column (B). line 100	.)			-	11,516

	Investments – Other Securities. Complete if the organization answered "Yes" on Fo	orm 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) Financia	derivatives		
2) Closely-	neld equity interests		
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Column	(b) must equal Form 990, Part X. col. (B) line 12.) ▶		
art VIII	Investments - Program Related.		
	Complete if the organization answered "Yes" on Fo	orm 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)	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on F. (a) Description	orm 990, Part IV, line	11d. See Form 990, Part X, line 15 (b) Book value
(1)		orm 990, Part IV, line	
		orm 990, Part IV, line	
(2)		orm 990, Part IV, line	
(2)		orm 990, Part IV, line	
(2) (3) (4)		orm 990, Part IV, line	
(2) (3) (4) (5)		orm 990, Part IV, line	
(2) (3) (4) (5)		orm 990, Part IV, line	
(2) (3) (4) (5) (6)		orm 990, Part IV, line	
(2) (3) (4) (5) (6) (7) (8)	(a) Description	orm 990, Part IV, line	
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Colu			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (otal. (Colu	umn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (otal. (Colu	umn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25.	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (otal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (otal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (otal. (Columbia) Part X	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Part X (1) Federal i (2) (3) (4) (5) (6) (7) (8)	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
Part X (1) Federal i (2) (3) (4) (5) (6) (7) (8) (9)	(a) Description Imn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on F line 25. (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value

Part XI	Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, F		Return.
1 Tota	al revenue, gains, and other support per audited financial statements		1
	ounts included on line 1 but not on Form 990, Part VIII, line 12:		
	unrealized gains (losses) on investments	2a	
	nated services and use of facilities		
	coveries of prior year grants		
	er (Describe in Part XIII.)		
	lines 2a through 2d		2e
	otract line 2e from line 1		3
	ounts included on Form 990, Part VIII, line 12, but not on line 1:		
	estment expenses not included on Form 990, Part VIII, line 7b	4a	
	er (Describe in Part XIII.)	4b	
	d lines 4a and 4b		4c
	al revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part XII			er Return.
	Complete if the organization answered "Yes" on Form 990, F		
1 Tot	al expenses and losses per audited financial statements		1
	ounts included on line 1 but not on Form 990, Part IX, line 25:		
a Dor	nated services and use of facilities	2a	
b Pric	or year adjustments	2b	
	er losses		
d Oth	er (Describe in Part XIII.)	2d	
e Add	lines 2a through 2d	THE SERVICE SERVICES	2e
3 Sub	otract line 2e from line 1		3
4 Am	ounts included on Form 990, Part IX, line 25, but not on line 1:		
a Inve	estment expenses not included on Form 990, Part VIII, line 7b	4a	
b Oth	er (Describe in Part XIII.)	4b	
c Add	d lines 4a and 4b		4c
5 Tot	al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 18.)	5
Part XIII	Supplemental Information. e descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and		
Part VI, Lin	e 1d: Asset is a truck used for Wildlife Friendlier Fencing program and Nat	ure Mapping Jackson Hole	

Schedule D (Form 990) 2018 Page 5					
Part XIII	Supplementa	Information (continued)			
	40.44 (Leannada				

Callagorani					
