Form **990**.

Departments of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2002
Open to Public Instruction

2002 JUN A For the 2002 calendar year, or tax year period beginning JUL 1. and ending D Employer Identification number C Name of organization Check if applicable. Please use IRS Address change ONE SHOT ANTELOPE HUNT FOUNDATION 23-7449875 ndat o type Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Initial 185 SOUTH FIFTH STREET (307)332 - 8190Final F Accounting method: X Cash Accrual City or town, state or country, and ZIP + 4 tions Amended Other (specify) LANDER, WY 82520 Application pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts H and I are not applicable to section 527 organizations must attach a completed Schedule A (Form 990 or 990-EZ) H(a) is this a group return for affiliates? Yes X No G Website ►WWW.MYWEB.WYOMING.COM/WFWL H(b) If "Yes," enter number of affiliates ▶ Organization type (check only one) \blacktriangleright X 501(c) (3) \blacktriangleleft (insert no) 4947(a)(1) or 527 N/A H(c) Are all affiliates included? (If "No," attach a list) K Check here ▶ ☐ If the organization's gross receipts are normally not more than \$25,000. The is this a separate return filed by an ororganization need not file a return with the IRS, but if the organization received a Form 990 Package ganization covered by a group ruling? Yes X No in the mail, it should file a return without financial data. Some states require a complete return Enter 4-digit GEN Check ► if the organization is not required to attach L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 140,199. Sch B (Form 990, 990-EZ, or 990-PF) Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances Contributions, gifts, grants, and similar amounts received 72,506 a Direct public support 1a b Indirect public support 1b Government contributions (grants) 1c 72,506. 72,506. noncash \$ d Total (add lines 1a through 1c) (cash \$ 10 Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 3 Membership dues and assessments Interest on savings and temporary cash investments 4 5 dends and interest from securities 15,977. SEE STATEMENT 1 бa b Less rental expense 6b OCTc (Nebreata) (neomodificos) (subtract line 6b from line 6a) 15,977. 6c Other investment income (describe INTEREST INCOME 1,965. 7 Gross amount from sale of assets other (A) Securities (B) Other than investory 82 3,161 Less cost or other basis and sales expenses 8ь <3,161 8¢ Gain or (loss) (attach schedule) STMT 2 Net gain or (loss) (combine line 8c, columns (A) and (B)) <3,161.> 8d Special events and activities (attach schedule) 0 . of contributions a Gross revenue (not including \$ _ 36,475. 9a reported on line 1a) 898. 9b Less direct expenses other than fundraising expenses SEE STATEMENT 3 35,577. Net income or (loss) from special events (subtract line 9b from line 9a) 9c <u>13,</u>276. Gross sales of inventory, less returns and allowances 10a 1,498. 10b Less cost of goods sold STMT 4 11,778. Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) 10c 11 11 Other revenue (from Part VII, line 103) 134,642. 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 87,815. 13 Program services (from line 44, column (B)) 13 14,235. 14 14 Management and general (from line 44, column (C)) 15 15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule) 102,050.17 17 Total expenses (add lines 16 and 44, column (A)) 32,592 18 Excess or (deficit) for the year (subtract line 17 from line 12) 18 373,9<u>78</u>. 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 20 Other changes in net assets or fund balances (attach explanation) 20 406,570. Net assets or fund balances at end of year (combine lines 18, 19, and 20)

406,570. Form 990 (2002)

For Paperwork Reduction Act Notice, see the separate instructions

223001 01 22 03

Part II Statement of Functional Expenses and (ganiza 1) oro	itions must complete column	n (A) Columns (B), (C), and (a)(1) nonexempt chantable	(D) are required for section	1 501(c)(3) Page 2
Do not include amounts reported on line ,6b, 8b, 9b, 10b, or 16 of Part I	+) org	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)	 		20141002	and general	· · · · · · · · · · · · · · · · · · ·
cash \$ noncash \$	22			,	
23 Specific assistance to individuals (attach schedule)	23			·	•
24 Benefits paid to or for members (attach schedule)	24			,	
25 Compensation of officers, directors, etc	25	0.	0.	0.	0.
26 Other salanes and wages	26	18,789.	12,526.	6,263.	
27 Pension plan contributions	27	,			
28 Other employee benefits	28				
29 Payroll taxes	29	4,525.	3,017.	1,508.	<u> </u>
30 Professional fundraising fees	30			·- •	
31 Accounting fees	31	4,068.	2,712.	1,356.	
32 Legal fees	32	, , , , , , , , , , , , , , , , , , ,			
33 Supplies	33				· · · · · · ·
34 Telephone	34	2,863.	1,909.	954.	
35 Postage and shipping	35	875.	583.	292.	
36 Occupancy	36	3,636.	2,424.	1,212.	
37 Equipment rental and maintenance	37	,	· · · · · · · · · · · · · · · · · · ·		
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	<u> </u>			
43 Other expenses not covered above (itemize)					
a	43a				
b	43b				
<u> </u>	43c				
d	43d	-			
SEE STATEMENT 5	43e	67,294.	64,644.	2,650.	
Total functional expenses (acid lines 22 through 43) Organizations completing columns (8)-(0) carry these totals to lines 13-15	44	102,050.	87,815.	14,235.	0.
Joint Costs Check ▶ ☐ If you are following SOP 9		<u> </u>	<u> </u>	<u> </u>	
Are any joint costs from a combined educational campa		d fundraising solicitation rej	ported in (B) Program service	es? ►	Yes X No
If "Yes," enter (i) the aggregate amount of these joint co			· ·		
(iii) the amount allocated to Management and general \$			(lv) the amount allocated to	· · · · · · · · · · · · · · · · · · ·	
Part III Statement of Program Servi	ce /	Accomplishments			
What is the organization's primary exempt purpose?	•				
PRESERVE HISTORY AND CONS		VE LAND AND	WATER RESOURCE	CES	Program Service
All organizations must describe their exempt purpose achievement					Expenses (Required for 501(c)(3) and
echievements that are not measurable. (Section 501(c)(3) and (4) o allocations to others.)	Bernse	uona and 4947(a)(1) nonaxampt o	CHANGEDIA BUSTA THUST BISO ON (OF C	- 1	(4) orgs and 4947(a)(1) trusts but optional for others)
a PRESERVATION OF THE LOC	AL	HISTORY THRO	OUGH OPERATION	ON OF A	
MUSEUM AND CONSERVATION	1 0	F THE LAND.			
			<u></u>		
		((Grants and allocations \$	<u> </u>	32,258.
b DEVELOP WATER RESOURCES	F	OR WILDLIFE,	WILDLIFE HA	BITAT AND TO	
WORK WITH OTHER LAND US					
	•	(0	Grants and allocations \$)	55,557.
c					<u> </u>
		(0	Grants and allocations \$	}	
d					
		(0	Grants and allocations \$).	
Other program services (attach schedule)		(0	Grants and allocations \$)	
f Total of Program Service Expenses (should equal	ine 4	4, column (B), Program serv	rices)	•	87,815.

Part IV Balance Sheets

Note	Wher shoul	re required, attached schedules and amounts id be for end-of-year amounts only	within the description column	(A) Beginning of year		(8) End of year
		Cash and interest because		4,586.	,.	7 220
	45 46	Cash - non-interest-bearing Savings and temporary cash investments	}	75,419.	45 46	$\frac{7,238.}{107,090.}$
	40	Savings and temporary cash investments	<u> </u>	73/413.	-10	1077030.
	47 a	Accounts receivable	47a		~~~	
	Ь	Less allowance for doubtful accounts	47b		47c	
					,	
	48 a	Pledges receivable	48a		\	
	b	Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees	į		ļ	
Ŋ		and key employees	- 1 - 1 - E		50	
Assets	51 a	Other notes and loans receivable	51a			
Ą	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use		52		
	53	Prepaid expenses and deferred charges	► □ o □ □ o		53	.
	54	investments - securities	Cost FMV		54	
	55 a	Investments - land, buildings, and	550			
	ļ	equipment basis	55a			
	ь	Less accumulated depreciation	55b		55c	
	56	Investments - other	000		56	
	57 a		57a 292,242.			
		Less accumulated depreciation	57b	293,973.	57c	292,242.
	58	Other assets (describe	1		58	····
		·				
	59	Total assets (add lines 45 through 58) (must equa	il line 74)	373,97 <u>8</u> .	59	406,570.
	60	Accounts payable and accrued expenses			60	
	61	Grants payable			61	 -
	62	Deferred revenue	<u> </u>		62	
Liabilities	63	Loans from officers, directors, trustees, and key er	mployees		63	
夏	L	Tax-exempt bond liabilities	-	 , ,,	64a	
Ĕ	b	Mortgages and other notes payable	į.		64b	
	55	Other liabilities (describe	······································		65	
	66	Total lightilities (add lines 50 through 55)		0.	66	0.
	_	Total liabilities (add lines 60 through 65) mizations that follow SFAS 117, check here	and complete lines 67 through		- 00	
	Organ	69 and lines 73 and 74	and complete times or unough		.	
ë	67	Unrestricted			87	
ä	68	Temporarily restricted	Ī	 	68	
Bal	69	Permanently restricted	Ţ		69	
2	Organ	nizations that do not follow SFAS 117, check here	➤ X and complete lines			
Ē	•	70 through 74	·			
20	70	Capital stock, trust principal, or current funds		0.	70	0.
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and eq	uipment fund	0.	71	0.
\$	72	Retained earnings, endowment, accumulated incom	me, or other funds	373,978.	72	406,570.
Ž	73	Total net assets or fund balances (add lines 67 th	rough 69 or lines 70 through 72,			
		column (A) must equal line 19, column (B) must e	· •	<u>373,978.</u>		406,570.
	74	Total liabilities and net assets / fund balances (a	dd lines 66 and 73)	<u>373,978.</u>	74	40 <u>6,570.</u>

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III. the organization's programs and accomplishments.

	n 990 (2 <u>002</u>					NTELOPE		T F	OUNDA	TION		23-	74498	<u>75</u>	Page 4
Pa	art IV-A	Reconciliati	on of	Revenu	ie j	per Audited		Par	IV-B	Recond	iliation of Exp	ense	s per A	udited	1
	•	Financial St	ateme	ents wit	hΙ	Revenue pe	r				al Statement	s with	Expen	ses pe	r
	Total reven	Return ue, gains, and othe	r Sunnar	<u>-</u>	1.	- 3		a	Total expe	Return	TAN 2022		18.5		
•	per audited	I financial statement	ts	` ▶	<u>a</u>	N/A			audited fin	ancial state	ments	>	a	N/A	
ь	Amounts in	ncluded on line a bi	ut not on					b	Amounts II		line a but not on				,
_	line 12, Fo				ķ.			(1)	Donated so						,
(1)	Net unreal	zed gains						``		facilities	\$				
	on investm	ents \$						(2)	Prior year	adjustment	ts				
(2)	Donated se	rvices			٦	^} ~~~~~	1000		reported o	n line 20,			m		3,000
	and use of	facilities \$				[Form 990		\$			•	
(3)	Recoveries	of prior						(3)	Losses rep	orted on				A.	
	year grants	\$			1		٠, ،		line 20, Fo	rm 990	\$,	>
(4)	Other (spe	cify)				<u> </u>		(4)	Other (spe	cify)					•
		\$			٠.			_	<u>.</u>		\$				
	Add amou	nts on lines (1) thro	ugh (4)	•	<u> b</u>				Add amou	nts on lines	(1) through (4)	>	b		
C	Line a min	us line b		•	C			C	Line a min	us line b		>	<u> </u>		
đ		cluded on line 12, l	Form					đ			line 17, Form				
	990 but no	t on line a					•		990 but no	ot on line a			[4]		
(1)	Investment	t expenses						(1)	Investmen	t expenses					
	not include	d on							not include	ed on					,
	line 6b, Fo	rm 990 \$			`		`.		line 6b, Fo	rm 990	\$				
(2)	Other (spe	cify)						(2)	Other (spe	cify)					
_		\$					v	_			\$			ú	3777
		nts on lines (1) and		•	4			Į	Add amou	nts on lines	(1) and (2)	>	4	_	
8		ius per line 12, Forn	n 990		ĺ			e			19 17, Form 990				
	(line c plus				8	<u> </u>		<u></u>	(line c plus				8		
Pŧ	art V L	ist of Officer	s, Dire	ctors,	Γrι	ustees, and	Key E		<u> </u>		e even if not compe				
		(A) N	lame and	address				DE	tie and aver- ir week devo	age nours oted to	(C) Compensation (If not paid, enter	emplo	tributions to yee benefit & deferred	(E) E)	xpense int and
									position		, :0-).	comp	pensation	other al	lowances
24			 -								۱ ,		^		^
SE	E STA	rement 6									0.	•	0.		0.
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75	Did any office	er, director, trustee	, or key e	employee re	cei	ve aggregate con	npensati	on of n	nore than \$1	00,000 fro	m your organization	and all	related		
		s of which more th										X No		Form 99	10 (2002)

	1990 (2002) ONE SHOT ANTELOPE HUNT FOUNDATION 23-7445			Page 5
Pa	rt VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	_	<u>X</u>
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes			
78 a		78a	_	X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		X
	If "Yes," attach a statement			;
80 a		000	, ,	•
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
U	If "Yes," enter the name of the organization		`	
01 ^	and check whether it is exempt or nonexempt Enter direct or indirect political expenditures. See line 81 instructions. 81a 0			İ
81 a	Enter direct or indirect political expenditures. See line 81 instructions. Did the organization file Form 1120-POL for this year?	81b		X `
82 a		010		<u> </u>
VL 0	fair rental value?	82a		x
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an	U.C.		
-	expense in Part II (See instructions in Part III) 82b N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	х	
	Did the organization comply with the disclosure requirements relating to guid pro guo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	848		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
	tax deductible? N/A	84b		1
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax			
	owed for the prior year			١.
C	Dues, assessments, and similar amounts from members 85c N/A		,	
d	Section 162(e) lobbying and political expenditures 85d N/A]		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A] ,		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A]	-	İ
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		<u> </u>
h				
	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86a N/A	_		1
	Gross receipts, included on line 12, for public use of club facilities 86b N/A	4		ĺ
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a N/A	- 1	•	
b	Gross income from other sources (Do not net amounts due or paid to other sources			ĺ
	against amounts due or received from them) 87b N/A	- 1		1
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3?			v
00 -	If "Yes," complete Part IX	88		X
09 A	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ► 0 • , section 4912 ► 0 • , section 4955 ► 0 •			
h				ĺ
U	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b		x
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under	[030]		
٠	sections 4912, 4955, and 4958			0.
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed NONE		_	
b	Number of employees employed in the pay period that includes March 12, 2002			2
91	The books are in care of ► JACK SCARLETT Telephone no ► 307-33	32-3	356	
	Located at ► P. O. BOX 93, LANDER, WYOMING ZIP+4 ► 8	3252	0	
	 		_	
92	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here		▶[
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/	A	

Form 990 (2002)

Note Enter gross amounts unless otherwis	e		d business income		ded by section 512, 513 or 514	(E)
ndicated		(A) Business	(B)	(C) Exclu-	(D)	Related or exempt
93 Program service revenue		code	Amount	sion	Amount	function income
a						
b				1		
c						
d	<u> </u>			1		
e						
f Medicare/Medicald payments	<u> </u>	_				
g Fees and contracts from government agence	cies					
Membership dues and assessments	<u> </u>					
Interest on savings and temporary cash inv	estments			 		
Dividends and interest from securities	-					
Net rental income or (loss) from real estate	-	_ / .				
a debt-financed property	-					16 077
b not debt-financed property				+-		15,977
Net rental income or (loss) from personal p	roperty			+		1,965
Other investment income	}-			+-		1,303
Gain or (loss) from sales of assets	1					<2 161
other than inventory						<3,161 35,577
Net income or (loss) from special events ! Gross profit or (loss) from sales of inventor	<u>.</u> .			+ -		11,778
Other revenue	' ^y -					11,777
-						
a	I .					
b	l l			1 -		
c d	1		···	<u> </u>		
d e						<u> </u>
Subtotal (add columns (B), (D), and (E))	-		0		0.	62,136
Total (add line 104, columns (B), (D), and ((E))	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			•	62,136
8 Line 105 plus line 1d, Part I, should e		nt on line 12	. Part I			
art VIII Relationship of Activit	ties to the A	ccompli	shment of Exem	ıpt Pu	rposes (See page 32 of the	instructions)
ne No Explain how each activity for which						
 exempt purposes (other than by pre- 	oviding funds for	such purpos	ses)			
SEE STATEMENT	7	•				
		 .			4442 44 444	
art IX Information Regarding		<u>ubsidian</u>	(C)	ded F	ntities (See page 32 of the	instructions) (E)
Name, address, and EIN of corporation,	(B) Percentage of		Nature of activities		Total income	End-of-year
partnership, or disregarded entity ov	wnership interest					assets
paratoramp, or disregarded entity 01	%					
	%	 -				-
N/A						
	%					
N/A	%				5:0 : : :	. 00 -44
N/A art X Information Regarding	% Transfers	Associa				
N/A Part X Information Regarding a) Did the organization, during the year, rece	% g Transfers ive any funds, dir	Associa	ectly, to pay premiums	on a pers	onal benefit contract?	Yes X
N/A art X Information Regarding	% g Transfers ive any funds, dir	Associa	ectly, to pay premiums	on a pers	onal benefit contract?	
N/A art X Information Regarding a) Did the organization, during the year, rece	% g Transfers ive any funds, dir	Associa	rectly, to pay premiums or ly, on a personal benefit	contract	onal benefit contract?	Yes X
N/A art X Information Regarding a) Did the organization, during the year, rece	% g Transfers ive any funds, dir	Associa	rectly, to pay premiums or ly, on a personal benefit	contract	onal benefit contract?	Yes X

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

\$50,000 for professional services

223101/01 22-03

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

ONE SHOT ANTELOPE HUNT FOUNDATION 23 7449875 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions List each one if there are none, enter "None") (d) Contributions to employee benefit plans & deferred compensation (e) Expense account and other (b) Title and average hours (a) Name and address of each employee paid (c) Compensation per week devoted to more than \$50,000 position allowances NONE Total number of other employees paid 0 over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over

Sche	dule A (F	orm 990 or 990-EZ) 2002 ONE SHOT ANTELOPE HUNT FOUNDATION 23-74	4987	75	Page 2
Pa	rt III	Statements About Activities (See page 2 of the instructions)		Yes	No
	obbying a	e year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence inion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the activities \$	1		x
		ions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking	'	-	1
		st complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
		e year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors,	l ~ ^	1	
		directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"		1	
		detailed statement explaining the transactions)	-	1	
а.	Sale, exct	lange, or leasing of property?	2a	<u> </u>	<u> </u>
b	Lending o	of money or other extension of credit?	2b		х
c	Furnishin	g of goods, services, or facilities?	2¢		х
đ	Payment (of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	-	X
8	Transfer o	of any part of its income or assets?	28		x
		organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3	ļ	X
		ave a section 403(b) annuity plan for your employees?	4	!	X
		a statement to explain how the organization determines that individuals or organizations receiving grants or loans therance of its charitable programs "qualify" to receive payments		,	,
Pa	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)			
The	organizati	on is not a private foundation because it is. (Please check only ONE applicable box.)			
5	\square	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6	片	A school Section 170(b)(1)(A)(II) (Also complete Part V)			
7	님	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	H	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state.			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv)		
11a	X	(Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public			
,,,		Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
116		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
		receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired			
		by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations desc	nbed in		
		(1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))			
		Provide the following information about the supported organizations (See page 5 of the instructions)			
		(a) Name(s) of supported organization(s)		ne nun	
-					
_			- 		
14	1 1	An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)			

Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar vear (or fiscal year (a) 2001 (b) 2000 beginning in) (c) 1999 (d) 1998 (e) Total Gifts, grants, and contributions 15 received (Do not include unusual 53,239 52,855. 142,539. 73,908. 322,541. grants See line 28) Membership fees received 16 Gross receipts from admissions, merchandise sold or services performed, or turnishing of facilities in any activity that is related to the organization's 39,261. 48,009. 3,440. 33,666. 124,376. charitable, etc., purpose 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the 19,487. 20,223. 20,372. 25,400. 85,482. organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the 20 organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge Other income Attach a schedule Do not include gain or (loss) from sale of capital assets 111,987. 121,087. 166,351. 132,974. 532,399. 23 Total of lines 15 through 22 72,726. 73,078. 162,911. 99,308. 408,023 24 Line 23 minus line 17 1,120. 1,211. 1,664. 1,330 25 Enter 1% of line 23 8,160. **▶** 26a 26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a 96,140. 26b Do not file this list with your return. Enter the sum of all these excess amounts 408,023. c Total support for section 509(a)(1) test Enter line 24, column (e) 26c 18 85,482. d Add Amounts from column (e) for lines 181,622. 26d 226,401. 268 e Public support (line 26c minus line 26d total) 55.4873% Public support percentage (line 26e (numerator) divided by line 26c (denominator)) **26**f Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of N/A such amounts for each year (1999)(2000)For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (1998)Add Amounts from column (e) for lines N/A 27¢ N/A 27d Add Line 27a total N/A 278 Public support (line 27c total minus line 27d total) N/A Total support for section 509(a)(2) test. Enter amount on line 23, column (e) Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27a 27h h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records

to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Private School Questionnaire (See page 7 of the instructions) (To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 29 29 instrument, or in a resolution of its governing body? 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 31 * solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) 32 Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a 32b b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) 33 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 33a 33b b Admissions policies? c Employment of faculty or administrative staff? 33c d Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 331 Athletic programs? 330 33h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a b Has the organization's right to such aid ever been revoked or suspended? 34b If you answered "Yes" to either 34a or b, please explain using an attached statement

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50.

1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Schedule A (Form 990 or 990-EZ) 2002

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedu	la A (Form 990 or 990-EZ) 2002	ONE SHOT ANTELO	PE HUNT FOUN	DATION	23-7449875 Page 6
Part	VII Information Reg	garding Transfers To and	Transactions and	Relationships With	
		zations (See page 12 of the instri			<u></u>
		irectly or indirectly engage in any of f			tion
	• •	section 501(c)(3) organizations) or in	· · · · · · · · · · · · · · · · · · ·	itical organizations?	Yes No
a	· -	ganization to a noncharitable exempt	organization of		Yes No
	(I) Cash				a(ii) X
	(II) Other assets Other transactions				
, ,		ets with a noncharitable exempt organ	חחולבדות		b(i) X
	• • •	ns with a nonchantable exempt organization	HEAGION		b(li) X
	ili) Rental of facilities, equipme	• •			b(iii) X
	(Iv) Reimbursement arrangeme				b(lv) X
	(v) Loans or loan guarantees				b(v) X
		membership or fundraising solicitati	ions		b(vi) X
C	Sharing of facilities, equipment,	mailing lists, other assets, or paid er	mployees		[_c X
		e is "Yes," complete the following sch		_	
	-	s given by the reporting organization	-		
		nent, show in column (d) the value of	the goods, other assets, or	services received	N/A
(a) Line no	(b) Amount involved	Name of noncharitable ex	emnt organization	Description of transfers train	(d) resactions, and sharing arrangements
	- Fandant involved	Thermoor monormations of			
	<u> </u>			<u>-</u>	
			· · · · · · · · · · · · · · · · · · ·		
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	<u> </u>				· · · · · · · · · · · · · · · · · · ·
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			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
52 a	Is the organization directly or in	directly affiliated with, or related to, o	one or more tax-exempt org	anizations described in section	1 501(c) of the
	Code (other than section 501(c		one of more tax one or pro-		Yes X No
	if "Yes," complete the following				
	(a		(b)		(c)
	Name of or	ganization	Type of organization	Descript	ion of relationship
-			· · · · · · · · · · · · · · · · · · ·		
					
		 			
-					
					
		-			•
-					_
			ļ	<u> </u>	
					
			 		

FORM 99Q RENTAL INCOME		STATEMENT 1
KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
BUILDING, LANDER, WY	1	15,977.
TOTAL TO FORM 990, PART I, LINE 6A		15,977.

			==- <u>-</u> -		
FORM 990 GAIN	(LOSS) FROM	M SALE OF OTH	ER ASSETS	STA	ATEMENT 2
DESCRIPTION		DATE ACQUIF			
DISPOSAL OF COMPUTERS			12/31/	02 PURCE	IASED
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	3,161.	0.	0.	<3,161.
TO FM 990, PART I, LN 8		3,161.	0.	0.	<3,161.2
FORM 990	SPECIAL EV	VENTS AND ACT	IVITIES	STA	TEMENT 3
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT.	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
AUCTION PROCEEDS	36,475	 5.	36,475.	898.	35,577.
TO FM 990, PART I, LINE	36,475	5.	36,475.	898.	35,577.

FORM 990	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 4
INCOME			
2. RETURNS AND ALLOW	ANCES	13,276	13,276
4. COST OF GOODS SOLE 5. GROSS PROFIT (LINE	D (LINE 13)	1,498	11,778
COST OF GOODS SOLD			
7. MERCHANDISE PURCHA 8. COST OF LABOR . 9. MATERIALS AND SUPP	PLIES	1,498	
			1,498
12. INVENTORY AT END (13. COST OF GOODS SOLI	OF YEAR		1,498

SALT LAKE CITY, UT 84108

FORM 990	ro 	HER EXPENSES		STA	TEMENT 5
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEME AND GENE		(D) NDRAISING
INSURANCE OFFICE EXPENSE PROPERTY TAXES MUSEUM EXPENSE MISCELLANEOUS WATER CONSERVATION PROJECTS	3,019 4,298 581 1,207 1,430	3. 2,865 387 7. 1,207 0. 1,413	. 1,	006. 433. 194.	
SPECIAL PROJECTS TOTAL TO FM 990, LN 43	1,202 67,294			650.	
		OFFICERS, DIRE KEY EMPLOYEES TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYE BEN PLA	N EXPENSE
JOHN MAYFIELD 740 S. STATE STREET UKIAH, CA 95482		PRESIDENT 0.	SATION 0.	0	B ACCOUNT 0.
MICKEY ASBELL PO BOX 911 RIVERTON, WY 82501		VICE PRESIDENT 0.	0.	0	. 0.
JIM KING 1005 COUNTRY CLUB ROAD RIVERTON, WY 82501		SECRETARY-TREA 0.	SURER 0.	0	. 0.
TOM BANDY 20709 GOLDEN SPRINGS DR DIAMOND BAR, CA 91789		DIRECTOR 0.	0.	0	. 0.
JIM HANNON 2823 LONDON LANE ENID, OK 73703		DIRECTOR 0.	0.	0	. 0.
AUSTIN LARSEN 1825 S. 2300 EAST		DIRECTOR 0.	0.	0	. 0.

ONE SHOT ANTELOPE HUNT FOUNDATIO)N		23-7449	875
HARRY TIPTON 745 BUENA VISTA DRIVE LANDER, WY 82520	DIRECTOR 0.	0.	0.	0.
HOWARD HENNING 1351 W. WILLIAMS AVE FALLON, NV 89406	DIRECTOR 0.	0.	0.	0.
SCOTT HARNSBERGER 3 CARBINE LANE LANDER, WY 82520	PRESIDENT - HUNT CLUB 0.	0.	0.	0.
JACK SCARLETT P.O. BOX 93 LANDER, WY 82520	EXECUTIVE VICE-PRESIDE 0.	NT 0.	0.	0.
BOB SCOTT 508 W. 27TH ST CHEYENNE, WY 82001	PRESIDENT - PS CLUB 0	0.	0.	0.
DON ROCHELEAU 1025 PLYMOUTH S.E. E. GRAND RAPIDS, MI 49506	DIRECTOR 0	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART	v <u></u>	0.	0.	0.
	ONSHIP OF ACTIVITIES TO		STATEMENT	7
LINE EXPLANATION OF RELATIONSHIP	OF ACTIVITIES			

INTEREST ON FUNDS SET ASIDE FOR FUTURE PRESERVATION AND CONSERVATION

SALES OF BOOKS AND MERCHANDISE RELATED TO THE ONE SHOT FOUNDATION

RENTAL FROM PORTION OF ONE SHOT BUILDING

NET PROCEEDS OF AUCTION HELD AS A FUND RAISER

97B

99

101

102

PROJECTS