

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year
 The organization may have to use a copy of this return to satisfy state reporting requirements.

A For 2003 calendar year, or tax year beginning JULY 01, 2003, & ending JUNE 30, 2004

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions	C Name of organization SOUTHWEST WILDLIFE FOUNDATION, INC		D Employer identification number 87-0570151
		No. & street (or P.O. box, if mail is not delivered to street address) Room/suite		E Telephone number (435) 586-7543
		PO BOX 1907		F Group Exemption Number
		City or town, state or country, and ZIP + 4 CEDAR CITY UT 84721		

G Accounting method: Cash Accrual
 Other (specify) ▶

I Website: ▶

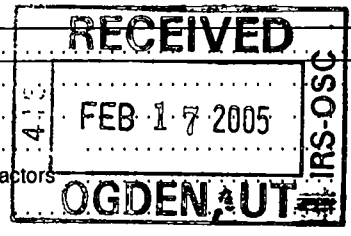
J Organization type (check only one) - 501(c)(3) (insert no.) 4947(a)(1) or 527

K Check if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ . . . ▶ \$ 60,287

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See instructions.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
REVENUE	1	Contributions, gifts, grants, and similar amounts received															40,168											
	2	Program service revenue including government fees and contracts															11,154											
	3	Membership dues and assessments															365											
	4	Investment income																										
	5a	Gross amount from sale of assets other than inventory																										
	5b	Less: cost or other basis and sales expenses																										
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)																										
	6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>																										
	6a	Gross revenue (not including \$ of contributions reported on line 1)															8,600											
	6b	Less direct expenses other than fundraising expenses															850											
6c	Net income or (loss) from special events and activities (line 6a less line 6b)															#1 7,750												
	7a	Gross sales of inventory, less returns and allowances																										
	7b	Less: cost of goods sold																										
	7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)																										
	8	Other revenue (describe ▶)																										
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)															59,437											
EXPENSES	10	Grants and similar amounts paid (attach schedule)																										
	11	Benefits paid to or for members																										
	12	Salaries, other compensation, and employee benefits																										
	13	Professional fees and other payments to independent contractors															10,800											
	14	Occupancy, rent, utilities, and maintenance															4,582											
	15	Printing, publications, postage, and shipping															594											
	16	Other expenses (describe ▶ See attachment #2)															13,595											
	17	Total expenses (add lines 10 through 16)															29,571											
ASSETS	18	Excess or (deficit) for the year (line 9 less line 17)															29,866											
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)															140,615											
	20	Other changes in net assets or fund balances (attach explanation)																										
	21	Net assets or fund balances at end of year (combine lines 18 through 20)															170,481											



Part II Balance Sheets -- If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	12,618	47,066
23	Land and buildings	127,997	123,415
24	Other assets (describe ▶)		
25	Total assets	140,615	170,481
26	Total liabilities (describe ▶)	0	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	140,615	170,481

For Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2003)

SCANNED MAR 20 2005

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Part III Statement of Program Service Accomplishments (See instructions.)		Expenses
What is the organization's primary exempt purpose? REHABILITATION OF ANIMALS, EDUCA Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.		(Required for 501(c)(3) & (4) organizations and 4947(a)(1) trusts; optional for others)
28	SCHOOL AND EDUCATIONAL PROGRAMS AND RELATED REHABILITATION FOR INJURED BIRDS AND OTHER ANIMALS (Grants \$)	28a 19,066
29	(Grants \$)	29a
30	(Grants \$)	30a
31	Other program services (attach schedule) (Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	32 19,066

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Specific Instructions)				
(A) Name and address	(B) Title & average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred comp.	(E) Expense account and other allowances
MARTIN TYNER 132 W 3600 N CEDARCITY	PRESIDENT 40	0		

Part V Other Information (Note the attachment requirement in General Instruction V.)		Yes	No
33	Did organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did organization have unrelated busn. gross income of \$1,000 or more or 6033(e) notice, reporting, & proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b	
39	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955		
b	501(c)(3) and (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 an explanation		X
c	Amount of tax imposed on organization managers or disqualified persons during year under 4912, 4955, & 4958		
d	Enter: Amount of tax on line 40c, above, reimbursed by the organization		
41	List the states with which a copy of this return is filed. NONE		
42	The books are in care of MARTIN TYNER Telephone no. Located at 132 W 3600 N, CEDAR CITY, UT ZIP + 4 84720		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 -- Check here and enter the amount of tax-exempt interest received or accrued during the tax year		43

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

Martin Tyner Date **2-15-05**

Date **1/5/05** Check if self- Preparer's SSN or PTIN (See Gen. Inst. W)

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

OMB No. 1545-0047

2003

Department of the Treasury
Internal Revenue Service

Supplementary Information — (See separate instructions.)

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

Name of the organization

SOUTHWEST WILDLIFE FOUNDATION, INC

Employer identification number

87-0570151

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl. benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	1			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See 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 \$50,000 for professional services	0	

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

Schedule A (Form 990 or 990-EZ) 2003

Part III Statements About Activities (See the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.)	1	X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?	2a	X
b	Lending of money or other extension of credit?	2b	X
c	Furnishing of goods, services, or facilities?	2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e	Transfer of any part of its income or assets?	2e	X
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b	Do you have a section 403(b) annuity plan for your employees?	3b	X
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4	X

Part IV Reason for Non-Private Foundation Status (See the instructions)

- The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)
- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
 - 6** A school Section 170(b)(1)(A)(ii). (Also complete Part V.)
 - 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
 - 8** 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). (Also complete the **Support Schedule** in Part IV-A.)
 - 11a** 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.)
 - 11b** 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 described 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 the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety. Section 509(a)(4) (See the instructions.)

Part IV-A 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 year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	36,592	43,209			79,801
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 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 organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 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					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22.	36,592	43,209	0	0	79,801
24 Line 23 minus line 17	36,592	43,209			79,801
25 Enter 1% of line 23	366	432			

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶	26a	1,596
b 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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶	26b	
c Total support for section 509(a)(1) test: Enter line 24, column (e). ▶	26c	79,801
d Add: Amounts from column (e) for lines: . . . 18 _____ 19 _____ 22 _____ 26b _____ ▶	26d	
e Public support (line 26c minus line 26d total) ▶	26e	79,801
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶	26f	100.00 %

27 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 such amounts for each year:

(2002) _____ (2001) _____ (2000) _____ (1999) _____

b 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:

(2002) _____ (2001) _____ (2000) _____ (1999) _____

c Add: Amounts from column (e) for lines: . . . 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	27c	
d Add: Line 27a total _____ and line 27b total. ▶	27d	
e Public support (line 27c total minus line 27d total) ▶	27e	
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . ▶ 27f	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). . ▶	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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

Part V Private School Questionnaire (See the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV) PAGE N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 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?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 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? If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
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?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
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34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 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		

Part VI-A Lobbying Expenditures by Electing Public Charities (See the instructions)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table --			
If the amount on line 40 is -- The lobbying nontaxable amount is --			
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

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

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

See separate instructions.

Attach to your tax return.

2003

Attachment Sequence No. 67

Name(s) shown on return

Business or activity to which this form relates

Identifying number

SOUTHWEST WILDLIFE FOUNDATION,

FOR FORM 990-EZ LINE 14

87-0570151

Part I Election To Expense Certain Tangible Property Under Section 179

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

Table with 5 rows for Section 179 election. Line 1: 100,000; Line 2: Total cost; Line 3: 400,000; Line 4: 0; Line 5: 100,000.

Table with 3 columns: (a) Description of property, (b) Cost, (c) Elected cost. Row 6: Blank.

Table with 13 rows for Section 179 election continuation. Line 7: Listed property; Line 8: Total elected cost; Line 9: Tentative deduction; Line 10: Carryover; Line 11: 100,000; Line 12: Section 179 expense deduction; Line 13: Carryover.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

Table with 3 rows for Part II. Line 14: Special depreciation allowance; Line 15: Property subject to section 168(f)(1) election; Line 16: Other depreciation.

Part III MACRS Depreciation (Do not include listed property.) (See the instructions)

Section A

Table with 2 rows for Section A. Line 17: 4,582; Line 18: Grouping assets.

Section B -- Assets Placed in Service During 2003 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification, (b) Month, (c) Basis, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 19a-i: 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year, Residential rental, Nonresidential real.

Section C -- Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

Table with 6 columns: (a) Class life, (b) 12-year, (c) 40-year, (d) 12 yrs, (e) 40 yrs, (f) MM, (g) S/L.

Part IV Summary (See the instructions.)

Table with 3 rows for Part IV. Line 21: Listed property; Line 22: 4,582; Line 23: Portion of the basis.

For Paperwork Reduction Act Notice, see separate instructions.

2003 Federal Depreciation Schedule

SOUTHWEST WILDLIFE FOUNDATION, INC,

02-15-2005

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990-EZ Line 14										
2002 GEO VAN	06-05-02	S/LMQ	5	22,441	561	0	0	21,880	4,376	4,376
ANSWER MACH FAX	10-18-99	200DBHY	5	230	0	0	0	230	191	26
EQUIPMENT	04-09-99	200DBHY	7	544	0	0	0	544	423	49
FREEZER	08-12-99	200DBHY	7	50	0	0	0	50	35	4
KENNEL	08-24-01	200DBMQ	5	496	0	0	0	496	303	77
LAND	06-30-01	S/L	0	110,000	110,000	0	0	0	0	0
ORGANIZATION COSTS	09-29-97	AMORT	5	520	0	0	0	520	520	0
SHADE CANOPY	08-13-99	200DBHY	7	325	0	0	0	325	224	29
TV VCR	08-07-01	200DBMQ	3	170	0	0	0	170	146	21
9 Assets			Totals	134,776	110,561	0	0	24,215	6,218	4,582
9 Assets			Grand Totals:	134,776	110,561	0	0	24,215	6,218	4,582

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2003 AMT Depreciation Schedule

SOUTHWEST WILDLIFE FOUNDATION, INC,

02-15-2005

Description	Date	Method	Year	Basis	Prior	AMT	Regular	Adjust
Form 990-EZ Line 14								
2002 GEO VAN	06-05-02	S/LMQ	5	21,880	4,376	4,376	4,376	0
ANSWER MACH FAX	10-18-99	150DBHY	5	230	172	38	26	-12
EQUIPMENT	04-09-99	150DBHY	7	544	378	67	49	-18
FREEZER	08-12-99	150DBHY	7	50	28	6	4	-2
KENNEL	08-24-01	150DBMQ	5	496	240	82	77	-5
LAND	06-30-01	S/L	0	0	0	0	0	0
ORGANIZATION COSTS	09-29-97	AMORT	5	520	520	0	0	0
SHADE CANOPY	08-13-99	150DBHY	7	325	186	40	29	-11
TV VCR	08-07-01	150DBMQ	3	170	122	43	21	-22
9 Assets	Totals.			24,215	6,022	4,652	4,582	-70
9 Asset	Grand Totals			24,215	6,022	4,652	4,582	-70

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

Schedule of Special Events and Activities

Attachment 1: page 1 - 990-EZ, Page 1, Part I, line 6

Open to Public Inspection	For calendar year 2003 or tax period beginning 07-01-2003, and ending 06-30-2004.		
Name of Organization	SOUTHWEST WILDLIFE FOUNDATION, INC		Employer Identification Number 87-0570151

Description of Largest Three Special Events

(A) EAGLE PHOTOGRAPHY

(B)

(C)

Type and Number of Other Events

Special Event:	(A)	(B)	(C)	All Other	Total
Gross Receipts	8,600				8,600
Less: Contributions	_____	_____	_____	_____	_____
Gross Revenue	8,600				8,600
Less: Direct Expenses	850				850
Net Income or (loss)	7,750				7,750

Schedule of Other Expenses

Attachment 2: page 1 - 990- EZ Page 1, Part I, Line 16

Open to Public Inspection	For calendar year 2003 or tax period beginning 07-01-2003, and ending 06-30-2004.		
Name of Organization		Employer Identification Number	
SOUTHWEST WILDLIFE FOUNDATION, INC		87-0570151	

Description	Amount
AUTOMOBILE EXPENSE	4,896
BANK SERVICE CHARGES	15
DUES & SUBSCRIPTIONS	165
INSURANCE	1,790
INTEREST EXPENSE	25
LICENSES AND PERMITS	100
ACCOUNTING	665
SUPPLIES	4,239
TAXES	26
TELEPHONE	1,516
TRAVEL	158

Page Total	13,595
Total	13,595