

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 2004 calendar year, or tax year beg. JULY 01, 2004, & end. JUNE 30, 2005

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: SOUTHWEST WILDLIFE FOUNDATION, INC. D Employer identification number: 37-0570151. E Telephone number: (435) 586-7543. F Group Exemption Number.

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting method: [X] Cash [] Accrual Other (specify) _____

I Website: N/A H Check [] if organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

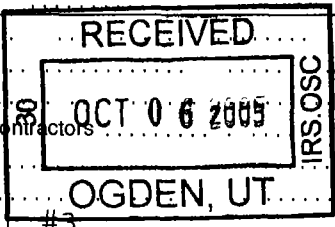
J Organization type (check only one) [X] 501(c)(3) (insert no.) 4947(a)(1) or 527

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. \$ 19,085

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

Table with columns for Revenue, Expenses, and Assets. Revenue total: 19,085. Expenses total: 28,573. Net assets at end of year: 160,993.



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

Table with columns (A) Beginning of year and (B) End of year. Total assets: 170,481. Total liabilities: 0. Net assets: 170,481.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 990-EZ (2004)

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Handwritten marks: 'G 9' and '5'.

| 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 | 28,572 |
| 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 | 28,572 |

| Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See 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 | | |
| HAROLD ORNES CEDAR CITY, UT | VP 3 | 0 | | |
| See attachment 4 | | | | |

| 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 | | <input checked="" type="checkbox"/> |
| 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 | | <input checked="" type="checkbox"/> |
| 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? | | <input checked="" type="checkbox"/> |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | <input checked="" type="checkbox"/> |
| 36 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement) | | <input checked="" type="checkbox"/> |
| 37a | Enter amount of political expenditures, direct or indirect, as described in the instructions | 37a | |
| b | Did the organization file Form 1120-POL for this year? | | <input checked="" type="checkbox"/> |
| 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? | | <input checked="" type="checkbox"/> |
| 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 | | <input checked="" type="checkbox"/> |
| 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 | | |
| 42 | The books are in care of MARTIN TYNER Telephone no. 84720 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 <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year | 43 | |

Please Sign Here

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 Signature of officer 10-3-05 Date

PRESIDENT

| | | |
|-----------------|--|---|
| Date 10/2/05 | Check if self-employed <input checked="" type="checkbox"/> | Preparer's SSN or PTIN (See Gen. Inst W) P00493069 |
|-----------------|--|---|

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.)

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

OMB No. 1545-0047

2004

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 | | | | |
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| | | | | |
| | | | | |
| 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 | 1 | |

| 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.) | | 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 |
| 4a | Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? | 4a | X |
| b | Do you provide credit counseling, debt management, credit repair, or debt negotiation services? | 4b | 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) 2003 | (b) 2002 | (c) 2001 | (d) 2000 | (e) Total |
|---|----------|----------|----------|----------|-----------|
| 15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) | 40,168 | 36,592 | 43,209 | | 119,969 |
| 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 | 40,168 | 36,592 | 43,209 | 0 | 119,969 |
| 24 Line 23 minus line 17 | 40,168 | 36,592 | 43,209 | | 119,969 |
| 25 Enter 1% of line 23 | 402 | 366 | 432 | | |

| | | | |
|--|--|------------|----------|
| 26 Organizations described on lines 10 or 11: | a Enter 2% of amount in column (e), line 24 ▶ | 26a | 2,399 |
| 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 2000 through 2003 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 | 119,969 |
| d Add: Amounts from column (e) for lines: | 18 _____ 19 _____ 22 _____ 26b _____ .. ▶ | 26d | |
| e Public support (line 26c minus line 26d total) ▶ | | 26e | 119,969 |
| 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:

(2003) _____ (2002) _____ (2001) _____ (2000) _____

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:

(2003) _____ (2002) _____ (2001) _____ (2000) _____

| | | | |
|--|--|------------|---|
| 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 | | |
| 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 2000 through 2003, 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? | 29 | |
| 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 | |
| 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? | 31 | |
| If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement.) | | |
| <hr/> | | |
| <hr/> | | |
| 32 Does the organization maintain the following: | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | 32a | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | 32b | |
| 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.) | | |
| <hr/> | | |
| 33 Does the organization discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | 33a | |
| b Admissions policies? | 33b | |
| c Employment of faculty or administrative staff? | 33c | |
| d Scholarships or other financial assistance? | 33d | |
| e Educational policies? | 33e | |
| f Use of facilities? | 33f | |
| g Athletic programs? | 33g | |
| h Other extracurricular activities? | 33h | |
| If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| <hr/> | | |
| <hr/> | | |
| 34a 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. | | |
| 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 | 35 | |

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.)

Table with columns for line numbers (36-44) and descriptions of lobbying expenditures and nontaxable amounts.

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.)

Table for 4-Year Averaging Period with columns for years 2004, 2003, 2002, 2001, and Total, and rows for lobbying nontaxable amount, ceiling, and 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)

Table for Lobbying Activity with columns for Yes, No, and Amount, and rows for various lobbying activities (a-i).

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.

Attachment
Sequence No. **67**

| | | |
|--|---|---|
| Name(s) shown on return SOUTHWEST WILDLIFE FOUNDATION, | Business or activity to which this form relates FOR FORM 990-EZ LINE 14 | Identifying number 87-0570151 |
|--|---|---|

Part I Election To Expense Certain Property Under Section 179

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

| | | |
|--|----------|---------|
| 1 Maximum amount. See the instructions for a higher limit for certain businesses. | 1 | 102,000 |
| 2 Total cost of section 179 property placed in service (see the instructions) | 2 | |
| 3 Threshold cost of section 179 property before reduction in limitation | 3 | 410,000 |
| 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | 0 |
| 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see the instructions | 5 | 102,000 |

| 6 (a) Description of property | (b) Cost (busn. use only) | (c) Elected cost |
|-------------------------------|---------------------------|------------------|
| | | |

| | | |
|---|-----------|---------|
| 7 Listed property. Enter the amount from line 29 | 7 | |
| 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 Carryover of disallowed deduction from line 13 of your 2003 Form 4562 | 10 | |
| 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) | 11 | 102,000 |
| 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11. | 12 | |
| 13 Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12 ▶ | 13 | |

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.)

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

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

Section A

| | | |
|---|-----------|-------|
| 17 MACRS deductions for assets placed in service in tax years beginning before 2004 | 17 | 4,529 |
| 18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/> | | |

Section B -- Assets Placed In Service During 2004 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depr. (business/investment use only -- see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|---------------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19 a 3-year property | | | | | | |
| b 5-year property | | | | | | |
| c 7-year property | | | | | | |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs. | | S/L | |
| h Residential rental property | | | 27.5 yrs. | MM | S/L | |
| | | | 27.5 yrs. | MM | S/L | |
| i Nonresidential real property | | | 39 yrs. | MM | S/L | |
| | | | | MM | S/L | |

Section C -- Assets Placed In Service During 2004 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See the instructions.)

| | | |
|--|-----------|-------|
| 21 Listed property. Enter amount from line 28 | 21 | |
| 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations -- see instr | 22 | 4,529 |
| 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs. | 23 | |

For Paperwork Reduction Act Notice, see separate instructions.

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 2004 or tax period beginning 07-01-2004, and ending 06-30-2005. | |
| 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 | 200 | | | | 200 |
| Less: Contributions | _____ | _____ | _____ | _____ | _____ |
| Gross Revenue | 200 | | | | 200 |
| Less: Direct Expenses | _____ | _____ | _____ | _____ | _____ |
| Net Income or (loss) | 200 | | | | 200 |

SCHEDULE OF OTHER EXPENSES

Attachment 3: page 1 - 990- EZ Page 1, Part I, Line 16

| | | |
|----------------------------------|---|---|
| Open to Public Inspection | For calendar year 2004 or tax period beginning 07-01-2004, and ending 06-30-2005. | |
| Name of Organization | SOUTHWEST WILDLIFE FOUNDATION, INC | Employer Identification Number 87-0570151 |

| Description | Amount |
|----------------------|--------|
| ADVERTISING EXPENSE | 1,711 |
| AUTOMOBILE EXPENSE | 4,711 |
| DUES & SUBSCRIPTIONS | 329 |
| INSURANCE | 1,795 |
| INTEREST EXPENSE | 38 |
| LICENSES & PERMITS | 250 |
| ACCOUNTING | 595 |
| SUPPLIES | 1,317 |
| TAXES | 7 |
| TELEPHONE | 1,746 |
| TRAVEL | 211 |

| | | |
|--|-------------------|--------|
| | Page Total | 12,710 |
| | Total | 12,710 |

2004 DETAIL STATEMENTS

SOUTHWEST WILDLIFE FOUNDATION,
87-0570151

STATEMENT #1 - CONTRIBUTIONS, GIFTS, GRANTS (PF - PAGE 1)

| | |
|-----------------------------------|--------|
| CONTRIBUTIONS..... | 11,840 |
| TOTAL CARRIED TO PF - PAGE 1..... | 11,840 |
