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

6

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

AI	For the	e 2016 calendar year, or tax year beginning and	ending		
В	Check (fapplicabl	C Name of organization		D Employer identific	cation number
	Addre	• WAILER FOR WILDLIFE FOUNDATION			
	Name chang	Doing business as		23-7	449875
	Initial return	Number and street (or P.O box if mail is not delivered to street address)	Room/suite	E Telephone number	•
	Final			307-	332-6862
	termin ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	<u> 185,375.</u>
F	return	LANDER, WI 82520		H(a) Is this a group re	
Ш	tion pendii	F Name and address of principal officer ALAN U PETTERSEN		for subordinates	
	-	SAME AS C ABOVE	507	H(b) Are all subordinates in	
		empt status. X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) cte: ► WWW.WATERFORWILDLIFE.COM	or 527	1	list (see instructions)
		organization: X Corporation Trust Association Other	I Voor	H(c) Group exemption	State of legal domicile: WY
	art I	Summary	L Teal	or formation. 1975 N	State of legal doffliche, W.I.
	1	Briefly describe the organization's mission or most significant activities: PRESI	ERVE H	ISTORY AND	CONSERVE
Activities & Governance		LAND AND WATER RESOURCES			
ű	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	11
প্	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11
ies	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	0
Ĭ	6	Total number of volunteers (estimate if necessary)		6	0
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	<u> </u>
2017	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
		Contributions and grants (Part VIII, line 1h) RECEIVED		Prior Year 70,235.	Current Year 122,721.
₩.	1	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	⊸ ⊢	70,233.	0.
% ĕ~		Investment income (Part VIII column (A) lines 3 4 and 7d) A n.n. a	Š	15,758.	7,402.
AFK 2 4 Revenue	11	Other revenue (Part VIII, column (A), lines 5, 4, 4, 4, 4, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,	\$0s	26,038.	44,593.
	140	Total revenue - add lines 8 through 11 (must equal Part VIII, Column (A), line-12)		112,031.	174,716.
SCHINEL SEXPENSES	13	Grants and similar amounts paid (Part IX, column (A, lines 13) JFN		23,000.	4,825.
Ž	14	Benefits paid to or for members (Part IX, column (A), line 4)	== [0.	0.
E s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		33,606.	51,153.
Ş	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
(S)Š	b	Total fundraising expenses (Part IX, column (D), line 25) 31,89	<u>93.</u>		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		87,113.	128,685.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	_	143,719.	184,663.
	19	Revenue less expenses Subtract line 18 from line 12		-31,688.	-9,947.
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year
ASSe Bals	20	Total assets (Part X, line 16)	-	897,975. 17,075.	914,668.
let /	21	Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20		880,900.	22,846. 891,822.
P	art II	Signature Block		000,000.	071,022.
		lities of perjury, I declare that I have examined this return, including accompanying schedule:	s and statem	ents, and to the best of m	v knowledge and belief, it is
		ct, and complete Degaration of preparer (other than officer) is based on all information of wh			<i>'</i>
		× 2/ Swell Jameling in		× 3/3/	12017
Sıg	ın	Signature of officer		Date	
He	re		SIDENT	l 	
		Type or print name and title			
		Print/Type preparer's name Preparity's signature	Land	Date Check	PTIN
Pai		RICHARD F. FAGNANT, CPA Kuhard Jagramt	CPH	2/28/17 If self-employs	<u> </u>
	parer		CPA'S	Firm's EIN	83-0254900
Use	Only	Firm's address 185 SOUTH 5TH STREET		Dh 2.0	7 222 /5/5
_		LANDER, WY 82520		I Phone no. 3 U	7-332-4545 X Yes No
ıvıa	y trie II	RS discuss this return with the preparer shown above? (see instructions)			<u> </u>

	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	PRESERVE HISTORY AND CONSERVE LAND AND WATER RESOURCES
	Did the average and article and professor average adjusts the very which were not hated on the
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$0
	HELP PRESERVE HISTORY OF THE LANDER ONE SHOT ANTELOPE HUNT
	00 170
4b	(Code) (Expenses \$ 80,172. including grants of \$ 825.) (Revenue \$) DEVELOP WATER RESOURCES FOR WILDLIFE, WILDLIFE HABITAT AND TO WORK WITH
	DEVELOP WATER RESOURCES FOR WILDLIFE, WILDLIFE HABITAT AND TO WORK WITH OTHER LAND USERS TO CONSERVE WATER.
	OTHER DAND USERS TO CONSERVE WATER:
	4.000
4c	(Code) (Expenses \$4,000. including grants of \$4,000.) (Revenue \$) PROVIDE AREA COLLEGE STUDENTS WITH FINANCIAL ASSISTANCE THROUGH
	SCHOLARSHIPS.
	DCHODARSHIFS:
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 84,172.
4e	

Form 990 (2016) WATER FOR WILDLIFE FOUNDATION
Part IV Checklist of Required Schedules

	ls the organization described in section E01(a)(2) or 4047(a)(1) (ather these a private favor detection)		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		v	ı
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		_^_	
5	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_ 3		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
·	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			 _
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			l
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			ĺ
	Part VI	11a	Х	İ
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			ĺ
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	!		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		.,	1
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	<u>19</u>	000	<u>X</u>
		Form	990	(2016

Form 990 (2016) WATER FOR WILDLIFE FOUNDATION

Part IV | Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete]
	Schedule K If "No", go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
_	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	1		
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		1	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ.,	ļ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2016

WATER FOR WILDLIFE FOUNDATION 23-7449875 Form 990 (2016) Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Ye<u>s</u> No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 1a 1b 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter. 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers.

> X 14a

> > Form **990** (2016)

13a

13b 13c

a Is the organization licensed to issue qualified health plans in more than one state?

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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Form 990 (2016) WATER FOR WILDLIFE FOUNDATION 23-/4498/5 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	to mic da, de, or you below, describe the directifications, processes, or changes in our educities.			
	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{X}
Sec	tion A. Governing Body and Management		г	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	니 '		
	If there are material differences in voting rights among members of the governing body, or if the governing	'		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1	<u> </u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	igwdown	<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3	 	<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	 	<u>X</u>
7a				
	more members of the governing body?	7a		<u>X</u>
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b	<u> </u>	<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		,,	
a		8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
360	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	res	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
U	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a		12a		x
		12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	ŀ		•
	taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only	avaılat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	id finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SCOTT HARNSBORGER - 307-332-6862			
	545 W MAIN ST, LANDER, WY 82520			

Form	990	(2016)	
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WATER FOR WILDLIFE FOUNDATION

23-7449875

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees; and former such persons

(A) Name and Title	(B) Average hours per week	box	not ci	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JAY SANDLER DIRECTOR	0.00	x						0.	0.	0.
(2) ROB YARBOROUGH DIRECTOR	0.00	x						0.	0.	0.
(3) DON KENNEDY DIRECTOR	0.00	х						0.	0.	0.
(4) TIM GIST DIRECTOR	0.00	х						0.	0.	0.
(5) GEORGE PRETTY DIRECTOR	0.00	х			<u> </u>			0.	0.	0.
(6) TERRY MARTIN DIRECTOR	0.00	x						0.	0.	0.
(7) PAUL FONTAINE DIRECTOR	0.00	x						0.	0.	0.
(8) ROBERT STUTLER DIRECTOR	0.00	x						0.	0.	0.
(9) CARL ASBELL VICE PRESIDENT	0.00			x				0.	0.	0.
(10) ALAN PETTERSON PRESIDENT	2.00	ļ		x	_		ļ	0.	0.	0.
(11) SCOTT HARNSBURGER EXEC VP	5.00			х				0.	0.	0.
(12) REGAN KOTT SEC/TREAS	0.00			x				0.	0.	0.
					_					
	<u> </u>	<u> </u>		<u> </u>	L			<u> </u>		

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VIII ' Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under sections 512 - 514 (B) Related or Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1¢ d Related organizations 1d e Government grants (contributions) <u>1e</u> f All other contributions, gifts, grants, and similar amounts not included above 1f 122,721 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 122,721 Business Code Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 5,254. 5,254. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (i) Real 19,100. 6 a Gross rents 1,929. b Less rental expenses 17,171. c Rental income or (loss) 17,171. 17,171. d Net rental income or (loss) (ı) Securities (II) Other 7 a Gross amount from sales of 2,148. assets other than inventory b Less cost or other basis 0. and sales expenses 2,148. c Gain or (loss) 2,148. 2,148. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 34,356. 8,730. b Less direct expenses 25,626. c Net income or (loss) from fundraising events 25,626. 9 a Gross income from gaming activities. See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a 1,796. 1,796. 900099 d All other revenue 1,796. e Total. Add lines 11a-11d 174,716. 30,880. 21,115. Total revenue See instructions. 12

17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10,905. 5,452. 5,453. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 11,605. 11,605. 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 35,455. 35,455. b INTERN EXPENSE 12,000. 12,000. c BAD DEBTS 7,026. 2,342. 2,342. d INSURANCE 6,458. 6,458. e All other expenses 2,870. 815. 1,240. 815.	Sect	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All oth	er organizations must co	omplete column (A).	
Gents and other assistance to domestic organizators and domestic povernments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to domestic individuals See Part IV, line 32 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 32 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 18 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of minuted above, in disqualified persons (secretical officers) Personal secretical directors and contributions (include section 40(g)) and 40(g)) employer communities Personal secretical directors and contributions (include section 40(g)) and 40(g)) employer communities Personal secretical directors (include section 40(g)) and 40(g)) employer communities Personal secretical directors (include section 40(g)) and 40(g) employer communities Personal secretical directors (include section 40(g)) and 40(g) employer communities Personal secretical directors (include section 40(g)) and 40(g) employer communities Personal secretical directors (include section 40(g)) and 40(g) employer communities Personal section 40(g) and 40(g) employe		Check if Schedule O contains a respons	se or note to any line in			
and domestic governments. See Part IV, line 21 Grants and other assistance to foreign organizations, foreign organizations, foreign organizations, foreign organizations, foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to 6 for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of individual shows, to disqualified persons described in section 4986/(1/3) and persons described in 4990/(1/3) and 403(0) employer contributions (scaled in 4990/(1/3) and 403(0) employe			(A) Total expenses	Program service	Management and	(D) Fundraising expenses
2 Grants and other assistance to domestic individuals See Part IV, inc 22 and 4,000. 4,000. 4,000. 3 3 Grants and other assistance to foreign organizations, froeign governments, and foreign individuals. See Part IV, kines 15 and 16 4 Senelits paid to or for members 5 Compensation of currier tofficers, directors, trustees, and key employees 6 Compensation of included above, to disqualified persons (selected above, to disqualified persons (selec	1	Grants and other assistance to domestic organizations				
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3 Gards and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Generits part to or for members	2	Grants and other assistance to domestic				
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustess, and key employees 6 Compensation of current officers, directors, trustess, and key employees 7 Other salanes and wages 8 Density and section 4958(c)(3)(8) 9 Perison play accruals and curtributions (include section 401(k) and 402(k) employer contributions (include section 401(k) and 402(k) employee benefits (include section 401(k) and 402(k) employer contributions (include section 401(k) and 402(k) employer contribution (include section 401(k) and 402(k) employer contribution (include section 401(k) employer		individuals See Part IV, line 22	4,000.	4,000.		
Individuals See Part IV, lines 15 and 16 Benefits pad to or for members	3	J 1				
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e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0) 2 Advertising and promotion 2 Advertising and promotion 3 Advertising and promotion 3 Advertising and promotion 3 Advertising and promotion 4 Information technology 5 Royalites 6 Occupancy 10 ,062 3 ,354 3,354	q	<u> </u>	17,103.		17,403.	
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g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0) 2 Advertising and promotion 211. 211. 211. 3 Office expenses 8,634. 2,878. 2,878. 2,878. 2,878. 4 Information technology 15 Royalties 10 Cocupancy 10,062. 3,354. 3,354. 3,354. 3,354. 7 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10,905. 5,452. 5,453. Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 11,605. 11,605. 23 Insurance 11,605. 11,605. 24 Other expenses Itemize expenses in to overed above (List miscellaneous expenses in line 24e, if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 2 WATER CONSERVATION PROJ 35,455. 35,455. 2 INSURANCE 6,458. 6,458. e All other expenses 2,2870. 815. 1,240. 815. 2 Total functional expenses. Add lines 1 through 24e 184,663. 84,172. 68,598. 31,893.	_		3.980.		3.980.	
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12 Advertising and promotion 211. 211.	Ū	·				
14	12	- · · · · · · · · · · · · · · · · · · ·	211.		211.	
14	13	Office expenses	8,634.	2,878.	2,878.	2,878.
10,062. 3,354. 3,354. 3,354. 3,354. 3,354. 3,354. 3,354. 3,354. 3,354. 17 Travel	14	Information technology	·			
17 Travel	15	Royalties				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings linterest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 2 WATER CONSERVATION PROJ 2 BAD DEBTS 2 Total functional expenses 2 All other expenses 2 All other expenses 2 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	16	Occupancy	10,062.	3,354.	3,354.	3,354.
for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10,905. 5,452. 5,453. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 11,605. 11,605. 23 Insurance 24 Other expenses itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 25 WATER CONSERVATION PROJ 26 BAD DEBTS 12,000. 12,000. 27 C BAD DEBTS 7,026. 2,342. 2,342. 28 All other expenses Add lines 1 through 24e 29 All other expenses. Add lines 1 through 24e 20 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	17	Travel				
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses itemize expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) a WATER CONSERVATION PROJ b INTERN EXPENSE c BAD DEBTS d TINSURANCE e All other expenses 21 All other expenses 22 Add lines 1 through 24e 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) 35, 455. 35, 455. 35, 455. 4 12, 000. 5 2, 342. 6 2, 342. 7 0, 266	18	Payments of travel or entertainment expenses				
20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) a WATER CONSERVATION PROJ b INTERN EXPENSE c BAD DEBTS d INSURANCE e All other expenses 2,870. 815. 2,342. 2,		for any federal, state, or local public officials				
Payments to affiliates Depreciation, depletion, and amortization 11,605. 11,605.	19	Conferences, conventions, and meetings	10,905.	5,452.		<u>5,453.</u>
Depreciation, depletion, and amortization 11,605. 11,605.		F				· · · · · ·
23 Insurance		· · · · · · · · · · · · · · · · · · ·	11 605		11 505	
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) a WATER CONSERVATION PROJ b INTERN EXPENSE 12,000. 12,000. c BAD DEBTS 7,026. 2,342. 2,342. 2,342. d INSURANCE 6,458. e All other expenses 2,870. 815. 1,240. 815. 25 Total functional expenses. Add lines 1 through 24e 184,663. 84,172. 68,598. 31,893.			11,605.		11,605.	
above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) a WATER CONSERVATION PROJ b INTERN EXPENSE c BAD DEBTS d INSURANCE e All other expenses All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						
WATER CONSERVATION PROJ 35,455. 35,455.	24	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
DEBTS 12,000	2		35.455	35.455.		
c BAD DEBTS 7,026. 2,342. 2,342. 2,342. d INSURANCE 6,458. 6,458. e All other expenses 2,870. 815. 1,240. 815. 25 Total functional expenses. Add lines 1 through 24e 184,663. 84,172. 68,598. 31,893. 26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. 84,172. 68,598. 31,893.	_					
d INSURANCE e All other expenses 2,870. 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					2.342.	2.342.
e All other expenses 2,870. 815. 1,240. 815. Total functional expenses. Add lines 1 through 24e 184,663. 84,172. 68,598. 31,893. Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	_					=,0221
25 Total functional expenses. Add lines 1 through 24e 184,663. 84,172. 68,598. 31,893. 26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	_			815.		815.
Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						31,893.
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						-,4,,
educational campaign and fundraising solicitation.	-					

Part A	balance Sneet			
<u>></u>	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	126,346.	1	154,806
2	Savings and temporary cash investments	59,273.	2	10,141
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	7,025.	4	
5	Loans and other receivables from current and former officers, directors,	, , , , , , , , , , , , , , , , , , , ,		
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
1	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
2	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Specific 7	Notes and loans receivable, net	*****	7	31,947
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment, cost or other			
İ	basis Complete Part VI of Schedule D 10a 385, 146.			
[b	Less accumulated depreciation 10b 99,770.	296,981.	10c	285,376
11	Investments - publicly traded securities	408,350.	11	432,398
12	Investments - other securities See Part IV, line 11		12	
13	Investments program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	897,975.	16	914,668
17	Accounts payable and accrued expenses		17	10,846
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
g	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	- · - ·	24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	17,075.	25	12,000
26	Total liabilities. Add lines 17 through 25	17,075.	26	22,846
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ž.	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	594,834.	27	535,796
28	Temporarily restricted net assets	286,066.	28	356,026
29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
5	and complete lines 30 through 34.			
27 28 29 30 31 32	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	· · · · · · · · · · · · · · · · · · ·	32	
33	Total net assets or fund balances	880,900.	33	891,822
34	Total liabilities and net assets/fund balances	897,975.	34	914,668

	1990 (2016) WATER FOR WILDLIFE FOUNDATION	_23-744	9875	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	174	,716.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,663.
3	Revenue less expenses Subtract line 2 from line 1	3		,947.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	880	,900.
5	Net unrealized gains (losses) on investments	5		,869.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
_	column (B))	10	891	,822.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			`\`	res No
1	Accounting method used to prepare the Form 990			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.		
2a	and the second s		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
Ь	Were the organization's financial statements audited by an independent accountant?		2b	X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,		
	consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit		
	Act and OMB Circular A-133?		3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	200 (22) = 1
			⊦orm &	90 (2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

WATER FOR WILDLIFE FOUNDATION

23-7449875

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support					· · · · · · · · · · · · · · · · · · ·	
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and				•	•	
	membership fees received (Do not		1	1			
	ınclude any "unusual grants.")	141,346.	158,521.	75,515.	70,235.	93,296.	538,913.
2	Tax revenues levied for the organ-				, ,	-	
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to				1		
	the organization without charge	}	ļ	}			
4	Total. Add lines 1 through 3	141,346.	158,521.	75,515.	70,235.	93,296.	538,913.
	The portion of total contributions						
-	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			1			
	column (f)			1			191,340.
6	Public support. Subtract line 5 from line 4			-			347,573.
	tion B. Total Support	<u> </u>					
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	141,346.	158,521.	75,515.	70,235.	93,296.	538,913.
8	Gross income from interest,		,				
-	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	24,161.	12,831.	7,383.	6,770.	5,254.	56,399.
a	Net income from unrelated business			1,9,55			
•	activities, whether or not the						
	business is regularly carried on]				
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)	Ì					ļ
11	Total support. Add lines 7 through 10						595,312.
	Gross receipts from related activities,	etc (see instruction	ons)			12	
	First five years. If the Form 990 is for			I. fourth. or fifth ta	x vear as a sectio	n 501(c)(3)	
	organization, check this box and stor			,	•	, , , ,	
Sed	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2016 (line 6, column (f) d	ivided by line 11, co	olumn (f))		14	58.39 %
15	Public support percentage from 2015	Schedule A, Part	II, line 14			15	80.80 %
	33 1/3% support test - 2016. If the			line 13, and line 1	14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies						$\triangleright \mathbf{X}$
b	33 1/3% support test - 2015. If the			ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	his box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes				13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						ightharpoons
b	10% -facts-and-circumstances tes					17a, and line 15 is	10% or
_	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization						ns 🕨
						dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2016 WATER FOR WILDLIFE FOUNDATION Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

gualify under the tests listed be Section A. Public Support	elow, please comp	olete Part II)				
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and	(a) 2012	(0) 2010	(0) 2017	(0) 2010	(6) 2010	II) IOIAI
membership fees received (Do not						
include any "unusual grants ")				ļ		
2 Gross receipts from admissions,					 	
merchandise sold or services per-						
formed, or facilities furnished in	1					•
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
				 		
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						Ì
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge		<u> </u>		 	 	
6 Total. Add lines 1 through 5				 		<u> </u>
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)		l		<u> </u>		<u> </u>
Section B. Total Support			т			
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						<u> </u>
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses]				
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on	<u></u>					
12 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.) 13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) organi	zation,
check this box and stop here	g	, ,	, , -			
Section C. Computation of Publ	ic Support Pe	rcentage				
15 Public support percentage for 2016 (column (f))	_	15	%
16 Public support percentage from 2015			.,,		16	%
Section D. Computation of Inve						
17 Investment income percentage for 20					17	%
18 Investment income percentage from			,		18	%
19a 33 1/3% support tests - 2016. If the			on line 14, and lin	e 15 is more than		
more than 33 1/3%, check this box a						▶
b 33 1/3% support tests - 2015. If the	and stob liets, the	not check a hov o	n line 14 or line 10	a and line 16 is n	nore than 33 1/3%	and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	on alla not check a	DOX OF THE 14, 18	a, or 190, check			

Part IV

Supporting Organizations

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

Section	A. All	Supporting	Organizations
Journali	A. AII	Cappoi illia	Oludinzanons

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

determine whether the organization had excess business holdings)

		<u> 744987</u>	5 Pa	ige 5
Га	rt IV Supporting Organizations (continued)			
44	Line the experience accorded a settler constraint to fine pay of the faller was a supply		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			i e
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
360	ction B. Type i Supporting Organizations		Yes	No
	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
1		İ		ĺ
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	1		l
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			l
	supervised, or controlled the supporting organization.	2	L	<u> </u>
Sec	ction C. Type II Supporting Organizations		Τ'	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	į.		1
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		1	ĺ
	the supported organization(s)	1		L
Sec	ction D. All Type III Supporting Organizations			r
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	<u> </u>	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	-		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	}		1
	supported organizations played in this regard.	3	<u>l</u> .	<u> </u>
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instruction	ons).		
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	: In the organization supported a governmental entity Describe in Part VI how you supported a government entity (se	e instructions	s)	· · · · · ·
2	Activities Test Answer (a) and (b) below.	-	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
H	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1	1
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		1	
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.			
_	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		1	
ā	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	1	
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		1	T
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting 1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organization satisfied.	ng Orgar ng trust on	nizations Nov. 20, 1970 (explain in	Part VI) See instructions.
other Type III non-functionally integrated supporting organizations must c Section A - Adjusted Net Income	ompiete Se	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	:	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	Ily integrat	ed Type III supporting org	ganization (see
instructions)	- •		•

Schedule A (Form 990 or 990-EZ) 2016

	dule A (Form 990 or 990 EZ) 2016 WATER FOR WIL It V Type III Non-Functionally Integrated 509		ON 2	3-7449875 Page 7
Sect	ion D - Distributions	(a)(o) oupporting orgi	amzations (commuea)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		- Carrent rear
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	is	
4	Amounts paid to acquire exempt-use assets	<u> </u>	<u></u>	-
5	Qualified set-aside amounts (prior IRS approval required)	,, ,		
6	Other distributions (describe in Part VI) See instructions		1	
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive		
	(provide details in Part VI) See instructions	•		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016.			
a				
b				
	From 2013		 · · · · · · · · · · · · · · · · · ·	
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			V
i				
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D.			
•	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
•	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3		,	
'	and 4c			
8	Breakdown of line 7			
a	DIGGRAPHI OF HITO I			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
·		1	,	

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-EZ) 2016 WATER FOR WILDLIFE FOUNDATION	23-7449875 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 1 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; F Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any ac (See instructions)	art V. Section B. line 1e' Part V
		· ·
		
		(* d) ·
		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

2016
Open to Public Inspection

Name of the organization

WATER FOR WILDLIFE FOUNDATION

Employer identification number $\underline{23-7449875}$

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

		OR WILDLIF							<u>49875</u>		<u> 1ge 2</u>
Par	t III \`Organizations Maintaining C										
3	Using the organization's acquisition, accessi	on, and other record	is, check	any of the	following tha	t are a s	significant us	e of its	collection	item	s
	(check all that apply)										
а	X Public exhibition	d	ı 🗀 ı	Loan or exc	hange progra	ams					
b											
С	T o										
4	Provide a description of the organization's co	ollections and explai	n how th	ev further t	he organizati	on's exe	empt purpos	e in Par	t XIII		
5	During the year, did the organization solicit o			-	-			o a.			
•	to be sold to raise funds rather than to be ma					01 31111110	11 455015	Y	Yes		No
Par	t IV Escrow and Custodial Arran					"Ves" o	50rm 990				1140
	reported an amount on Form 990, Pa		ere ii riie	Organizatio	ni aliswered	165 0	11701111 990,	rantiv,	iii ie 3, 0i		
			diami fav								
та	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets no	t included		٦.,		٦
	on Form 990, Part X?								Yes	L	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able.							
							 		Amount		
C	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	escrow or c	ustodial acco	unt liab	ılıty?		Yes		No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	xplanatio	n has beer	provided on	Part XII	ı.]
Pai											
		(a) Current year	_	rior year	(c) Two year		(d) Three yea	rs back	(e) Four	vears	back
1a	Beginning of year balance	(u) Garrotti Jour	127.		(0)	0 000.1	(4) 00) 00	54611	(0) . 00.	100.0	<u> </u>
, a	Contributions										
D					 						
C	Net investment earnings, gains, and losses	-			<u> </u>						
a	Grants or scholarships										
е	Other expenditures for facilities	,									
	and programs				_				ļ		
f	Administrative expenses				ļ		. 				
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment ▶	<u>~~~</u>									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%									
За			ation the	at are held a	and administe	red for	the organiza	tion			
-	by	3					J			Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)	-	
		strong ligted as year.	rad an C	obodulo Di	1						
	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the		owment	tunas							
Pai	t VI Land, Buildings, and Equipn										
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a	See Form 990						
	Description of property	(a) Cost or o			t or other	,	Accumulated		(d) Bool	c value	е
		basis (investi	ment)		(other)	d€	epreciation				
1a	Land			2	20,000.				2(0,0	00.
b	Buildings			3(04,801.		74,78	2.	23	0,0	19.
c	Leasehold improvements				-		_				
d	Equipment			6	50,345.		24,98	8.	3!	5,3	57.
	Other				.,			1			
	I. Add lines 1a through 1e (Column (d) must e	equal Form 900 Part	X colur	nn (R) line	10c)				2.8	5 3	76.
<u>ı ota</u>	i. Add iiiles Ta triibugit Te Jobiutiiii juj Must e	yuari umi 330, rari	A, COIUI	,,,, (<i>D</i>), ,,,,,	, , , ,						<u> </u>

Schedule D (Form 990) 2016

WATER FOR WILDLIFE FOUNDATION

23-7449875 Page 3

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

990) 2016 WATER FOR WILDLIFE FO		23-7449875 Page 4
onciliation of Revenue per Audited Financial	Statements With Rever	ue per Return.
olete if the organization answered "Yes" on Form 990, Part I	IV, line 12a	
- ',' '	5	1
	1 1	
	2a	
·	_2d	
•		<u>2e</u>
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•	45	
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onciliation of Expenses per Audited Financia	I Statements With Eyne	nses per Return
	= '	nses per rieturi.
	v, interza.	
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, as a market		
		2e
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	4a	
ribe in Part XIII)	4b	
and 4b	<u> </u>	4c
ses Add lines 3 and 4c. (This must equal Form 990, Part I, Iii	ne 18)	5
plemental Information.		
· · · · · · · · · · · · · · · · · · ·		
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provi		Part V, line 4; Part X, line 2, Part XI,
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a		Part V, line 4; Part X, line 2, Part XI,
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provi	de any additional information.	
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provide LINE 1A:	de any additional information. OF HISTORIAL ART	IFACTS THAT ARE
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ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provide LINE 1A: ATION HAS RECEIVED DONATIONS CONTINUES IN THE MUSEUM.	de any additional information. OF HISTORIAL ART SIS OF ACCOUNTIN	IFACTS THAT ARE G, THESE ITEMS ARE
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ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provide LINE 1A: ATION HAS RECEIVED DONATIONS COUNTY IN THE MUSEUM. ANCE WITH THE FOUNDATION'S BASEDED IN THE ACCOMPANYING FINANCE COUNTY IN THE ACCOMPANYING FINANCE COU	DF HISTORIAL ART SIS OF ACCOUNTING CIAL STATEMENTS.	IFACTS THAT ARE G, THESE ITEMS ARE THESE DONATIONS
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provide LINE 1A: ATION HAS RECEIVED DONATIONS CONTINUED THE MUSEUM. ANCE WITH THE FOUNDATION'S BASEDED IN THE ACCOMPANYING FINANCE	DF HISTORIAL ART SIS OF ACCOUNTING CIAL STATEMENTS.	IFACTS THAT ARE G, THESE ITEMS ARE THESE DONATIONS
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provide LINE 1A: ATION HAS RECEIVED DONATIONS COUNTY IN THE MUSEUM. ANCE WITH THE FOUNDATION'S BASEDED IN THE ACCOMPANYING FINANCE COUNTY IN THE ACCOMPANYING FINANCE COU	DF HISTORIAL ART SIS OF ACCOUNTING CIAL STATEMENTS.	IFACTS THAT ARE G, THESE ITEMS ARE THESE DONATIONS
ptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part XII, lines 2d and 4b. Also complete this part to provide LINE 1A: ATION HAS RECEIVED DONATIONS COUNTY IN THE MUSEUM. ANCE WITH THE FOUNDATION'S BASEDED IN THE ACCOMPANYING FINANCE COUNTY IN THE ACCOMPANYING FINANCE COU	DF HISTORIAL ART SIS OF ACCOUNTING CIAL STATEMENTS.	IFACTS THAT ARE G, THESE ITEMS ARE THESE DONATIONS
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	e, gains, and other support per audited financial statements luded on line 1 but not on Form 990, Part VIII, line 12 ed gains (losses) on investments vices and use of facilities of prior year grants libe in Part XIII) through 2d 2e from line 1 luded on Form 990, Part VIII, line 12, but not on line 1 expenses not included on Form 990, Part VIII, line 7b libe in Part XIII) and 4b e Add lines 3 and 4c. (This must equal Form 990, Part I, line onciliation of Expenses per Audited Financial libete if the organization answered "Yes" on Form 990, Part II lises and losses per audited financial statements lided on line 1 but not on Form 990, Part IX, line 25 vices and use of facilities light in Part XIII) through 2d 2e from line 1 luded on Form 990, Part IX, line 25, but not on line 1 expenses not included on Form 990, Part VIII, line 7b libe in Part XIII) and 4b es Add lines 3 and 4c. (This must equal Form 990, Part I, line 25) and 4b es Add lines 3 and 4c. (This must equal Form 990, Part I, line 25)	ad gains (losses) on investments vices and use of facilities of prior year grants able in Part XIII) through 2d 2e from line 1 luided on Form 990, Part VIII, line 12, but not on line 1 expenses not included on Form 990, Part VIII, line 7b and 4b a Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) conciliation of Expenses per Audited Financial Statements With Expensionate if the organization answered "Yes" on Form 990, Part IV, line 12a. Less and losses per audited financial statements luided on line 1 but not on Form 990, Part IX, line 25 vices and use of facilities pustments 2a 2b 2c 2b 2c 2c 2d 2d 4b 4b 4b 4c 2d 4c 4c 4c 4c 4c 4c 4c 4c 4c 4

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization Employer identification number WATER FOR WILDLIFE FOUNDATION 23-7449875 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990 EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e L Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations Ы 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? □No __ Yes b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity have custody or control of contributions? to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sch P a	edu art l		ne organization answered	"Yes" on Form 990, Pa	art IV, line 18, or reported	-7449875 Page 2 I more than \$15,000
		of fundraising event contributions and gr		-EZ, lines 1 and 6b List		ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			LIVE AUCTION			1
Ф			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	34,356.			34,356.
	_					
	2	Less. Contributions				
	3	Gross income (line 1 minus line 2)	34,356.			34,356.
		,	3173301	-		3 = 7 3 3 0 •
	4	Cash prizes				
S	5	Noncash prizes		-4.		
Direct Expenses	6	Rent/facility costs				
ă		, ionarasimi, esses				
ğ	7	Food and beverages	;			
Dire						
_	8	Entertainment				
	9	Other direct expenses	8,730.			8,730.
	10	Direct expense summary. Add lines 4 through			>	8,730.
	11	Net income summary Subtract line 10 from I			•	25,626.
Pa	art I	Gaming. Complete if the organization	answered "Yes" on Form	i 990, Part IV, line 19, oi	r reported more than	
		\$15,000 on Form 990-EZ, line 6a.	-			
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
ēn			(-, 3	bingo/progressive bingo	(-, 3	col (a) through col. (c))
Revenue						
_	1	Gross revenue				
s	2	Cash prizes				
nse						
Expenses	3	Noncash prizes				
ಕ್ಷ		-				
Öre	4	Rent/facility costs				
	_	Other direct concess				
_	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No No		
	•	Volunteer labor	INO	I NO	No No	
	7	Direct expense summary. Add lines 2 through	h 5 ın column (d)		•	
	8	Net gaming income summary Subtract line 7	from line 1, column (d)		>	
						
9	Ent	ter the state(s) in which the organization condi	ucts gaming activities:			
		he organization licensed to conduct gaming a				Yes No
		No," explain				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	erminated during the tax	k year?	Yes No
Ł) If "	Yes," explain			 -	
	_					
		S-1-5-10-1				
						

<u>Sch</u>	ledule G (Form 990 or 990-EZ) 2016 WATER FOR WILDLIFE FOUNDATION 23 -	<u>7449875</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12	Iş the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in		
а	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	or if "Yes," enter name and address of the third party.		
	Name		
	Address >		
16	Gaming manager information		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	•		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	a is the organization required under state law to make charitable distributions from the gaming proceeds to		
·	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	lines 9, 9b, 10)b, 15b,
	100, 10, and 170, as applicable 7100 provide any additional mismation ede metadoticine		
			
			-

Schedule G (Form 990 or 990-EZ)	WATER FOR V	VILDLIFE	FOUNDATION	23-7449875 Page 4
Schedule G (Form 990 or 990-EZ) Part IV Supplemental Info	ormation (continued)			
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SCHEDULE_O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

Inspection **Employer identification number**

WATER FOR WILDLIFE FOUNDATION	23-7449875
FORM 990, PART VI, SECTION B, LINE 11B:	
A COPY OF THE FORM 990 IS AVAILABLE FOR VIEWING AT THE	ORGANIZATION'S
OFFICE, OR UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AV	AILABLE FOR VIEWING
AT THE ORGANIZATION'S OFFICE, OR UPON REQUEST.	
	910-0
	
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