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*Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

A	For t	he 2009 d	calenda	r year,	r tax year beginning	1	2009, a	and ending				, 20	
В	Check	ıf applicable		Please	Name of organization				D Empl	oyer id	entific	ation number	
	Addre	ss change	hange use IRS label or Trust for Wildlife, inc.									5043	
	Name	change		print or	Number and street (or P.O. box	E Telep	E Telephone number						
Н	Initial				802-282-2795								
님				See Specific	08 Ehrich Road Dity or town, state or country, a	and ZIP + 4			F Grou	F Group Exemption			
H		ded return cation pendin		Instruc- tions.	haftsbury, VT 05262					nber	•		
						xempt charitable trusts must	ottoch	G Acc				Cash Accrual	
	• 3	ection oc	,,(c)(3) (a con	pleted Schedule A (Form	990 or 990-EZ).	attaon		er (specify		_		
_											mani	zation is not	
	Wah	oito. b	tanana.		calbirds.org			1			_	le B (Form 990,	
						◀ (insert no)	□ 52	_ 1 .	-EZ, or 99		<i>3</i> 11000	ne B (i omi oco,	
						3) supporting organization and it				<u>_</u>		an \$25 000 A	
K	Chec	-				e organization chooses to file a						an \$25,000. A	
-						; if \$500,000 or more, file Form 99					Mill.		
	Part	ines 50, 60	o, and /	o, to line	nees and Changes	in Net Assets or Fund B	alance	es (See ti	e instru		for	Part I.)	
	_									1	3 101	52,027.00	
	1					ounts received				_		32,027.00	
	2	_				ment fees and contracts .				2		000.54	
	3			•						3		909.51	
	4		stment				1 - 1			4			
	5					an inventory	5a						
						es	5b			_			
•						n inventory (Subtract line 5b				5c			
Ì	6 6	-				s of Schedule G). If any amount is fro	om gam ı	ı ng, check he	re▶ ∐				
Rovernie		a Gross revenue (not including \$ of contributions											
å	?	reported on line 1)											
		b Less: direct expenses other than fundraising expenses 6b											
						nd activities (Subtract line 6b	from !	ine 6a) .		6c			
	7	a Gros	ss sales	s of inv	ntory, less returns and a	allowances	7a		528.00				
		b Less	: cost	of goo	sold		7b		392.19				
	-	c Gros	ss profi	t or (lo	s) from sales of inventor	y (Subtract line 7b from line	7a) .			7c		135.81	
	8	3 Othe	er rever	nue (de	cribe ►)	8			
	9) Tota	ıl rever	nue. A	l lines 1, 2, 3, 4, 5c, 6c,	7c, and 8		<u> </u>	<u> Þ</u>	9		53,072.32	
	10	Gran	nts and	simila	amounts paid (attach so	chedule)				10			
i	11	l Bene	efits pa	id to o	for members					11			
ď	3 12	Sala Sala	ries, ot	her ee	pensation, and employe	ee benefits				12			
Fynancac	13	IPP	decon	Freed.	in other payments to in	dependent contractors				13			
٥	14	Oee	upancy	rent,	tilities and maintenance	9				14		2,036.56	
ú) ₁₅	Print	ting pu	ıbligati	s postage, and shippir	ng				15			
	16	O Othe	#Expe	nses (See attached	ng)	16		37,757.25	
	17	ota	al expe	nses.	dd lines (O through 16				•	17		39,793.81	
_	, 18	EXP	2963QFV	deficit)	or in year (Subtract line	e 17 from line 9) of year (from line 27, colun				18		13,278.51	
Not Accote	19	New Year			balances at beginning	of year (from line 27, colum	nn (A))	(must agr	ee with			· · · · · ·	
V	ž	end-	of-yea	r figure	eported on prior year's	return)				19		156,382.34	
ŧ	20) Othe	er chan	aes in	et assets or fund baland	ces (attach explanation)				20		6,145.96	
Z	² 21					. Combine lines 18 through 2				21		175,806.81	
	Part	II Ba	alance	Shee	s. If Total assets on line	25, column (B) are \$1,250,0	000 or r	more, file I	orm 990	instea	ad of	Form 990-EZ.	
_					(See the instructions for	or Part II.)	-	(A) I	Beginning of	year		(B) End of year	
2	22	Cash, sa	avings,	and in	estments				37,0	48.77	22	57,561.43	
	23	Land an	-						115,8	08.85	23	115,808.85	
	24	Other as		•	_			, [3,5	24.72	24	2,436.53	
	25	Total as	•							82.34		175,806.81	
	26	Total lia						,		0.00		0.00	
	27					nn (B) must agree with line 2	21) .		156,3	82.34	27	175,806.81	
								-					

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2009)



Par	Statement of Program Service Accom	plishments (See the instri	uctions for Part II	l.)	_	Expenses
	. to the confirmation of printing a security for poor	Wildlife conservation/educa			— i	ured for section
	ribe what was achieved in carrying out the org				organ	:)(3) and 501(c)(4) nizations and section
	ner, describe the services provided, the number of	of persons benefited, and o	other relevant info	rmation for		(a)(1) trusts, optional
each	program title.				for of	hers)
28	Mount Anthony Union Middle School (MAUMS).					
	See attached for accomplishments.					
	(Grants \$ 4,640.00) If this amount	includes foreign grants, che	eck here	▶ □	28a	5,598.16
20	O	<u> </u>				5,555:15
23						
	See attached for accomplishments.					
	(Consta C 0.00) If this amount	maludas faraiga granta ob			29a	0.00
	Chada annua saffas medast	includes foreign grants, che			230	0.00
30	Shade-grown coffee project.					
	See attached for accomplishments.					
	70 . A				00	40 400 70
		includes foreign grants, che			30a	19,482.76
31						
		includes foreign grants, che			31a	
	Total program service expenses (add lines 28a t				32	26,049.92
Par	List of Officers, Directors, Trustees, and Key		ven it not compensation	ted. (See the		
	(a) Name and address	(b) Title and average hours per week	(If not paid,	employee bene	fit plans &	
		devoted to position	enter -0)	deferred comp	ensation	other allowances
	hal. T. Case	President				
408	Ehrich Road Shaftsbury, VT 05262		0.00			1,885.13
Les	Line	Vice President				
224	Smithfield Road Amenia, NY 12501	Vice Flesident	0.00			0.00
Greg	ory Sharp	G				
225	Reeds Gap Road East Northford, CT 06472	Secretary	0.00			0.00
Саго	l Kirkland	_				
323	Birch Grove Arlington, VT 05250	Treasurer	0.00			0.00
		1				
Ed M	letcalfe					
6375	Vermont Road 100 Whitingham, VT 05361	Director	0.00			0.00
	3 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1					7777
				l		
						
						1
				<u> </u>		
	·					
		1				

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a]		
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		√
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	1		
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	-		
	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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			1
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			,
ď	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		✓
41	List the states with which a copy of this return is filed. ▶			
42 a	The organization's books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	Na
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	NO.
	If "Yes," enter the name of the foreign country: ▶	420		_
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year		<u> </u>	
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			<u>-</u>
	Form 990-EZ	44		1
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		1
	Fac		LEZ	(2000)

Part '	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	47(a)(1) nonexempt chari	xempt charitab table trusts mus	le trusts only. A t answer question	II sec ons 46	tion 5-49t	<u> </u>
46	Did the organization engage in direct or indirect		es on behalf of or	in opposition to		Yes	No
	candidates for public office? If "Yes," complete				46		1
47	Did the organization engage in lobbying activities				47		1
48	Is the organization a school as described in section				48		✓
49a	Did the organization make any transfers to an ex		d organization? .		49a		✓
ь 50	If "Yes," was the related organization a section 5 Complete this table for the organization's five him.	ghest compensated employ					
	employees) who each received more than \$100,	(b) Title and average	(c) Compensation.	(d) Contributions to			
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(c) Compensation	employee benefit plans & deferred compensation	acc	Expen count a allowa	เกด
None							
							
	\$100,000 of compensation from the organization (a) Name and address of each independent contractor	·		pe of service	(c) Cor	npensa	
None	(L) (Line and address of data in deposits on datas.	pad 110.0 d 121 \$ 100,000	(-) . , ,	55 01 551 7150	(0) 00:		
			- 				
d	Total number of other independent contractors e	each receiving over \$100,00	0▶				
_	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete. Declaration	ed this return, including accompany of preparer (other than officer) is ba	ring schedules and sta ased on all information	tements, and to the best of which preparer has	at of my	knowle wledge	edge a.
Sign Here	monahat 1. Case		<u> </u>	04/13/201	D		
_	Signature of officer Marchal T Case Provident		ı	Date			
	Marshal. T. Case, President Type or print name and title						
Paid	Preparer's signature Michael Sala	lghie 4-5-4	Check if self- employed ▶ ✓	Preparer's identifying nur		 instruct	tions)
Prepan Use On	. I rimi's name (or Michael P Labalokie	1/	EIN				
USC UN	IIV I yours it self-employed).	hts Road Harrisburg, PA 17			7) 566	-69	
May th							
viuy tii	e IRS discuss this return with the preparer showr	above? See instructions	<u> </u>		Yes m 990		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

Tru	st fo	r Wildlife, In	С						06	1	075043
Pai				arity Status (All or	ganizatio	ons mus	t comple	ete this	part.) Se	e instruc	ctions.
The	orge	nization is no	ot a private foun	dation because it is:	(For lines	1 throug	jh 11, ch	eck only	one box.)	
1		A church, co	nvention of chu	rches, or association	of church	nes desci	ribed in s	ection 1	70(b)(1)(/	A)(i).	
2				on 170(b)(1)(A)(li). (Att							
3				nospital service organ							
4			search organiza me, city, and st	tion operated in conj	unction v	vith a ho	spital des	scribed in	n section	170(b)(1)(A)(III). Enter the
5			ion operated for (b)(1)(A)(Iv). (Cor	the benefit of a colle	ge or univ	versity ov	vned or c	perated	by a gov	ernmental	unit described in
6		A federal, sta	ate, or local gov	ernment or governme	ental unit	describe	d in sect i	lon 170(t	o)(1)(A)(v)).	
7	Z	An organizat	ion that normally	receives a substantia	al part of	its suppo	rt from a	governm	ental uni	t or from t	the general public
	_			(1)(A)(vi). (Complete P							
8				in section 170(b)(1)							
9	Ш			receives: (1) more the							
				ed to its exempt funct ent income and unre							
				after June 30, 1975.						i Oii lax)	HOIH DUSINGSSOS
40	\Box		_			-				(a)/A)	
10 11	片			nd operated exclusive and operated exclusive							r to carry out the
• • • • • • • • • • • • • • • • • • • •	_			blicly supported organ							
				it describes the type							
		a 🗆 Type	, b 🗆	Type II c	□ Typ	e III–Fun	ctionally i	Integrate	d	d 🗆	Type III-Other
e				ify that the organizat			•	_			
				n managers and other							
		509(a)(1) or a	section 509(a)(2)	•							
f		If the organi	zation received	a written determinati	on from	the IRS t	that it is	a Type i	l, Type II	, or Type	III supporting
			, check this box								🗆
g		•		the organization acce	epted any	gift or c	ontributio	on from a	iny of the)	
		following per									Yes No
				r indirectly controls, e				h persor	is describ		11g(l)
			_	ning body of the supp		_					11g(ii)
				rson described in (I) a of a person described		 (ii) above					11g(iii)
h				ation about the suppo							
	_	of supported	(II) EIN	(III) Type of organization		organization	1	ou notify	(vi)	s the	(vii) Amount of
•••		anization	, ,	(described on lines 1-9		sted in your		nization in		ion in col. zed in the	support
				above or IRC section (see instructions))	governing	document?		of your port?		8.7	
					Yes	No	Yes	No	Yes	No	
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							<u></u>				
Tota	al						!				

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 11,550.00 12,193.99 9.300.00 52.027.00 98,570.99 13,500.00 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on 0.00 0.00 0.00 0.00 0.00 0.00 its behalf The value of services or facilities furnished by a governmental unit to the 0.00 0.00 0.00 0.00 0.00 0.00 organization without charge 13,500.00 11,550.00 12,193.99 9.300.00 52,027.00 98,570.99 Total. Add lines 1 through 3 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 37,159.11 shown on line 11, column (f) Public support. Subtract line 5 from line 4. 61,411.88 Section B. Total Support (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 13,500.00 11,550.00 12,193.99 9,300.00 52,027.00 98,570.99 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar 1,250.11 1,424.71 1.354.56 983.19 909.51 5,922.08 sources Net income from unrelated business activities, whether or not the business is 0 0 0 0 0 0 regularly carried on Other income. Do not include gain or loss from the sale of capital assets 0 0 0 0 135.81 135.81 (Explain in Part IV.) 104.628.88 Total support. Add lines 7 through 10 . Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 58.7 % Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 331/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box b 331/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation, if the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions >

Pai	Support Schedule for Orga (Complete only if you checke)(2)		
	tion A. Public Support						
C	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						:
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
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						
с 8	Add lines 7a and 7b						
Sec	tion B. Total Support	I	<u> </u>	1		<u> </u>	<u> </u>
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
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						-
12	Other Income. Do not Include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for organization, check this box and stop			nd, third, fourt			
Sec	ction C. Computation of Public Su						
15	Public support percentage for 2009 (lin					15	
16	Public support percentage from 2008			<u> </u>	<u> </u>	16	%_
	ction D. Computation of Investment			- 20 مواليطلو	valument /A\	17	%
17 18	investment income percentage for 200 investment income percentage from 200	•		•		18	<u>-</u> <u>/%</u>
	331/3 % support tests - 2009. If the org	anization did n	ot check the b	ox on line 14,	and line 15 is r	nore than 331/s	%, and line
b	17 is not more than 33\%, check this b 33\% % support tests – 2008. If the organ line 18 is not more than 33\%, check thi	nization did not	check a box or	n line 14 or line	19a, and line 1	6 is more than	331/3 %, and

Part IV	(Form 990 or 990-EZ) 2009 Supplemental Information. Complete this part to provide the explanations required by P	Page 4 art II, line 10;
	Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See i	nstructions.
·		
	······································	
		•••••
•••••		

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 67

Business or activity to which this form relates Name(s) shown on return Identifying number Trust for Wildlife, Inc. Wildlife conservation/education 06-1075043 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. \$250,000 Maximum amount. See the instructions for a higher limit for certain businesses Total cost of section 179 property placed in service (see instructions) 2 \$800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶ Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 1.244.16 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (f) Method (a) Classification of property (business/investment use (e) Convention (g) Depreciation deduction placed in penod service only-see instructions) 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. ММ S/L property 27.5 yrs. MM S/L Nonresidential real 39 yrs. ММ S/L S/L MM Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L b 12-year 12 yrs. ММ S/L c 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 184.03 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions 22 23 For assets shown above and placed in service during the current year, enter the 1,428.19

Cat No. 12906N

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TRUST FOR WILDLIFE, INC. (06-1075043) FORM 990 EZ:

Depreciation (See form 4562):

Total Expenses:

Sanctuaries:		\$ 2,213.13
Arlington Land Taxes	\$1,209.46	
Insurance	552.00	
Supplies	451.67	
Programs:		\$26,049.92
Documentary Film	\$17,482.76	
Mt. Anthony Union Middle School	5,598.16	
Scholarship	2,000.00	
Coffee	969.00	
President's Office:		\$ 1,885.13
Travel:		\$ 2,110.88
Other Expenses:		\$ 4,070.00
Life Insurance	\$ 3,773.00	
Tax Preparation/filing	250.00	
Other	47.00	

\$ 1,428.19

\$37,757.25

TRUST FOR WILDLIFE, INC. (06-1075043) FORM 990 EZ:

Line 20: Other Changes in Net Assets:

Gain in Vanguard 500 Index Fund

\$6,145.96

TRUST FOR WILDLIFE, INC. (06-1075043) FORM 990 EZ

Part III: Statement of Program Service Accomplishments:

What is the organization's primary exempt purpose: To protect wildlife and wildlife habitat through conservation education and research.

Line 28: Mount Anthony Union Middle School (MAUMS) Curriculum Development: Comprehensive integrated curriculum program is now operating with a focus on faculty training and participation with students, including mentoring high school students who plan on a career in wildlife biology and environmental programs. These students work with our President on a daily/weekly basis as part of the curriculum program as well as daily oversight by two school librarians. A weekly public radio show- "nature notes"- produced and presented along with students and faculty, adds a communications component to the overall program. An International partnership is now in place with Rotary International and a local rotary club in Vermont with extension to Ecuador, Nicaragua, and Colombia. It involves a literacy component-focused on the environment, with high school students participating in an exchange program.

Grants: \$4,640 Expenses: \$5,598.16

Line 29: Sanctuary /Education Programs: The Halifax, Vermont sanctuary one week "summer camp" continues to happen each year with President Case conducting it with Halifax teachers. There has been an intern working on the program since summer of 2008.

Grants: 0 Expenses: 0

Line 30: Shade-Grown Coffee Project: The newest major project is with promoting shade-grown coffee to stave off cutting of rainforest and important international wildlife habitat due to a shift to sun-grown coffee by the food industry. A documentary film is being produced as part of this new initiative.

Grants: \$26,000 Expenses: \$19,183.95 through

12/31/2009