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form 990-PF

EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

2016

ODEN TO PUBLIC INSPECTION

			3, 2016	, and ending	DEC 31, 2016	Open to Public Inspection
Na	me o	f foundation			A Employer identification	number
_		D LIVES FOUNDATION	81-1612906			
		and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		BOX 91302			209-799-50	
		own, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is pe	ending, check here
		TTLE, WA 98111		 		. —
G	Chec	call that apply:	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		Foreign organizations med check here and attach col	eting the 85% test.
-	Ob	Address change	Name change		check here and attach co	mputation .
<u>"</u>	_	type of organization: X Section 501(c)(3) ex			E If private foundation stat	
-		ection 4947(a)(1) nonexempt charitable trust arket value of all assets at end of year J Accounti		X Accrual	under section 507(b)(1)	
		·	ther (specify)	LAL ACCIUAI	F If the foundation is in a 6	
	-\$	9,011,862. (Part I, colu		nasis)	under section 507(b)(1)	(B), check here
		Analysis of Revenue and Expenses		(b) Net investment	(a) Advested not	(d) Disbursements
<u></u>	<u> </u>	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	10,000,000.			(accest access only)
	2	Check If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	10,975.	10,975.		STATEMENT 1
	4	Dividends and interest from securities	1			
	58	Gross rents				!
	t	Net rental income or (loss)				
a	68	Net gain or (loss) from sale of assets not on line 10				
Ž	t	Grose sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
Œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	1	Less Cost of goods sold				
	1	Gross profit or (loss)	-62.	(2		COLYMEN C
	11		10,010,913.	-62. 10,913.	0.	STATEMENT 2
	12	Total. Add lines 1 through 11	0.	10,913.	0.	0.
	14	Compensation of officers, directors, trustees, etc Other employee salaries and wages			L	
	•	Pension plans, employee benefits		 -REC I	IVED	
nses		Legal fees STMT 3	186,561.	(m) 0.	12/0.	186,561.
ens	Ι.	Accounting fees		101 11111 01	 	
Š	C	Other professional fees STMT 4	163,131.	0.	1 2017 Q Q O •	161,131.
ě	17	Interest	<u> </u>	OGDE		
rati	18	Taxes			V. U	
nist	19	Depreciation and depletion				
Operating and Administrative Expe	20	Occupancy				
Ž	21	Travel, conferences, and meetings	295,235.	0.	0.	295,235.
ă	22	Printing and publications	[<u></u>	····
in g	23	Other expenses STMT 5	10,914.	0.	0.	10,914.
ate	24	Total operating and administrative	655 044	•		652 041
ä		expenses. Add lines 13 through 23	655,841.	0.	0.	653,841.
_	25	Contributions, gifts, grants paid	380,650.			380,650.
	26	Total expenses and disbursements.	1 025 401	•	0.	1 024 401
	27	Add lines 24 and 25	1,036,491.	0.	ļ 	1,034,491.
	ı	Subtract line 26 from line 12:	8,974,422.			
	1 .	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	0,3/2,244.	10,913.		
	1	Adjusted net income (if negative, enter -0-)	} -	10,313.	0.	
6235		-23-18 LHA For Paperwork Reduction Act Notic	e. see instructions.			Form 990-PF (2016)

220

Fo	rm 99	0-PF (2016) WILD LIVES FOUNDATION		81-1	.612906 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		9,011,862.	9,011,862.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	İ	Less: allowance for doubtful accounts	1		
	4	Pledges receivable ►			
	1	Less: allowance for doubtful accounts	1		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	\ 		
	1	disqualified persons	1		
	7	Other notes and loans receivable	 		
	1'	Less: allowance for doubtful accounts	}		
			 		
Assets	8	Inventories for sale or use			
\$	1	Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations			
	b	Investments - corporate stock	<u> </u>		
	C	Investments - corporate bonds	<u> </u>		
	11	investments - land, buildings, and equipment basis			
	ĺ	Less accumulated depreciation	[
	12	Investments - mortgage loans			
	13	Investments - other			
	1	Land, buildings, and equipment basis			
	ļ.,	Less accumulated depreciation	1 !		
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
	16		0.	0 011 062	0 011 060
	 	instructions. Also, see page 1, item I)	<u> </u>	9,011,862.	9,011,862.
	1	Accounts payable and accrued expenses		37,440.	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >			
	1				
	23	Total liabilities (add lines 17 through 22)	0.	37,440.	
_		Foundations that follow SFAS 117, check here			
	١	and complete lines 24 through 26 and lines 30 and 31.	1	\	
ë	24	Unrestricted	1		
Net Assets or Fund Balanc	25	Temporarily restricted	f		
ä	1	Permanently restricted			
핕	20				
٦	1	Foundations that do not follow SFAS 117, check here	1		
<u></u>		and complete lines 27 through 31.			
ţŞ	27	Capital stock, trust principal, or current funds	0.	0.	
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
₹	29	Retained earnings, accumulated income, endowment, or other funds	0.	8,974,422.	
Ž	30	Total net assets or fund balances	0.	8,974,422.	
	1				
	31	Total liabilities and net assets/fund balances	0.)	9,011,862.	
		Applysic of Changes in Not Assets or Fund B	Releases		
L	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	TT	
		t agree with end-of-year figure reported on prior year's return)	· 	1	0.
		amount from Part I, line 27a	•• • • • •	2	8,974,422.
		increases not included in line 2 (itemize)	• • • • • • • • • • • • • • • • • • • •	3	0,5,2,222.
					8,974,422.
		ines 1, 2, and 3		4	0,314,444.
		pases not included in line 2 (itemize)			0.074.400
<u> </u>	rotai	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	8,974,422.
					Form 990-PF (2016)

		VES FOUNDATI		Income	_				31-161	2906	Page 3
(a) List and desc	cribe the ki	nd(s) of property sold (e.g or common stock, 200 sh	., real estate,		(b)	low ac - Purcl - Dona	quired hase		e acquired day, yr.)	(d) Date so (mo., day,	
1a					-	Done	don				
b NC	NE						<u>_</u>				
C											
d											
<u>e</u>	1			 	<u> </u>		1				
(e) Gross sales price	(f) [Depreciation allowed (or allowable)	(g) Cos plus e	st or other basis expense of sale					Gain or (loss) us (1) minus (
<u>a</u>	ļ										
<u>b</u>	 										
d	 	· · · · · · · · · · · · · · · · · · ·									
e e	 		 								
Complete only for assets show	ng gain in	column (h) and owned by	the foundation	on 12/31/69	一十			(I) Gains ((Coi. (h) gain	minus	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any			cc	il. (k), bui	t not less that s (from col. (1 -0-) or	
a											·
b			1								
C											
đ											
e	<u> </u>		<u> </u>								
2 Capital gain net income or (net o	apıtal loss)	If gain, also ente	r in Part I, line I- in Part I, line	7 7 .	}	2					
3 Net short-term capital gain or (lo			nd (6):		٦]				
If (loss), enter -0- in Part I, line 8	}			, <u></u>	اڑ	3_					
Part V Qualification (nent In	come			
(For optional use by domestic priva	te foundate	ons subject to the section	4940(a) tax on	ı net investment ır	come	e.)				N/A	
If section 4940(d)(2) applies, leave	this part bl	ank.									
Was the foundation liable for the se				•	riod?					Yes	□ No
if "Yes," the foundation does not qua					nt-ioc				 _		
1 Enter the appropriate amount in	each colui		iisu ucuoiis de	Tore making any e						(d)	
Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha		-use asset	s	Distrit (col. (b) div	(d) oution ratio rided by col. (c)))
2015											
2014			·····	ļ. ————————————————————————————————————							
2013 2012		·									
2011								_			
											
2 Total of line 1, column (d)								2			
3 Average distribution ratio for the	5-year bas	se period - divide the total	on line 2 by 5,	or by the number	r of ye	ars					
the foundation has been in exist								3			 -
4 Enter the net value of noncharita	ble-use as	sets for 2016 from Part X,	line 5				_	4			
5 Multiply line 4 by line 3								5			
6 Enter 1% of net investment inco	ma / 19/ 24	Part L line 27h\	•					6			
	iii¤ (17⁄0 UT	r aft 1, 11118 270)			•		••	-			
7 Add lines 5 and 6								<u> </u>			

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 074948 - see instructions)		16129		ļ	Page 4
Date of ruling or determination letter: Catach copy of letter if necessary-see instructions) 1 218.	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see in	stru	ctio	าร)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here □ and enter 1% 1 21.8 1	1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.				
of Part I, line 27b	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	}			
a All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 218. 4 Subtible A (morne) bax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on levestment income. Subtract line 4 from line 3. if zero or less, enter -0- 5 Tax based on levestment income. Subtract line 4 from line 3. if zero or less, enter -0- 5 Credis/Payments: 2 2016 estimated tax payments and 2015 overpayment credited to 2016 5 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Exit array pearly for underpayment of estimated tax Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6 at through 6d 8 Enter any pearly for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Verpayment line 7 is more than line 10 to be. Credited to 2017 estimated tax. 11 Enter the amount of line 10 to be. Credited to 2017 estimated tax. 12 A 282 _ Retanded 11 Text VII-A Statements Regarding Activities 12 Length the survey is "Yes" to 1e or 1b, attach a detailed description of the activities and copies of any materials published or distributed for the lines of lines of the lines of lines of lines of the lines of line	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	<u> </u>		2	18.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 218. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract time 4 from line 3.1 franco or less, enter -0- 5 Tax based on investment income. Subtract time 4 from line 3.1 franco or less, enter -0- 5 Tax based on investment income. Subtract time 4 from line 3.1 franco or less, enter -0- 5 Tax based on investment income. Subtract time 4 from line 3.1 franco or less, enter -0- 6 Becampt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 C 2,500. 6 Enter any penalty to underpayment of estimated tax. Check here 1 form 2220 is attached 7 Total credits and payments. Add lines 6 at through 6d 8 Enter any penalty to underpayment of estimated tax. Check here 1 form 2220 is attached 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the lotal of lines 5 and 8, enter the amount owed 9 Tax due. If the four lot lines 5 and 8 is more than line 7, enter amount owed 10 Verpayment. If line 7 is more than the lotal of lines 5 and 8, enter the amount owed 10 Verpayment if line 6 is more found to line 1 four lines than line 7, enter due to lines 1 four l	of Part I, line 27b				
3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zaro or less, enter -0- 6 B]			
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5 Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0- 6 CedisPayments: 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - fax withhild at source 6 b 1 Exempt foreign organizations - fax withhild at source 6 b 1 Exempt foreign organizations - fax withhild at source 6 b 6 c 7 Total credits and payments. Add lines 6 at through 6d 7 Total credits and payments. Add lines 6 at through 6d 8 Total credits and payments. Add lines 6 at through 6d 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Total credits and payments of lines 5 and 8, enter the amount owed 10 Total credits and 10 to bits. Credited to 2017 estimated tax ▶ 10 Tax VIII-A Statements Regarding Activities 11 During the tax year, did the foundation attempt for influence any national, state, or local legislation or did it participate or intervene in any political campaign? 10 Dut it spend more than \$100 during the year (either directly) of indirectly) for political purposes (see instructions for the definition)? 11 If the answer is "Yes" to 1 or 10, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1 Total the amount (4 any) of 1xx on political expenditures (section 4955) imposed during the year. 1 To the foundation his Ferm 112-POLI, or this year? 2 If the arrow the statile of description of the activities. 1 His has the foundation in Again and the statile and activities. 2 If Yes, "attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS? 1 If Yes, and the did at x return on Ferm 490-Tot this year? 5 Was the		ļ		2	
6 CreditsPhyments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Evernyt toreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Each organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Each organization of extension of time to file (Form 8868) d Enter any penalty for underpayments of estimated tax. Check here for form 2220 is attached	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			
a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c lax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add times 6 at through 6d 8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than the 10 in 1	5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u> </u>		2	18.
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 at through 6d 8 Enter any penalty for underpayment of estimated tax. Check here I form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Verpayment. If line 7 is more than line 10tal of lines 5 and 8, enter the amount overpaid 10 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Verpayment. If line 7 is more than line 10tal of lines 5 and 8, enter the amount overpaid 10 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Verpayment. If line 7 is more than line 10tal of lines 5 and 8, enter the amount overpaid 10 Tax due. If the total of lines 5 and 8, enter the amount overpaid 10 Verpayment. If line 7 is more than line 10tal of lines 5 and 8, enter the amount overpaid 10 Verpayment. If line 7 is more than line 10tal of lines 5 and 8, enter the amount overpaid 10 Verpayment. If line 7 is more than line 10tal of lines 5 and 8, enter the amount overpaid 11 Enter the amount of lines 10tal of lines 5 and 8, enter the amount overpaid 12 2, 282. Refunded 11 0. Part VII-A Statements Regarding Activities 11 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or influence any national, state, or local legislation or did participate or influence any national, state, or local legislation or did participate or influence any national, state, or local legislation or did participate or influence any national, state, or local legislation or did participate or influence any national, state, or local legislation or did participate or influence any national participate or influence any national participate or influence any national participate or influence	6 Credits/Payments:	}			
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d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6s through 6d 8 Enter any penalty for undergayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8, enter the amount oved 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount oved 11 Enter the amount of line 10 to be. Credited to 2017 estimated tax ▶ 2, 282. Refunded ▶ 10 10 2, 282. 11 Enter the amount of line 10 to be. Credited to 2017 estimated tax ▶ 2, 282. Refunded ▶ 11 10. Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation inclusion attempt to influence any national, state, or local legislation or did it participate or intervine in any political campaign? 1b Use to speak year. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Did the foundation file Form 1120-POL for this year? 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 1c) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. • (3) On the foundation managers. ▶ \$ 0. • (4) On the foundation on the activities. 3 Has the foundation have included by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. • (2) On foundation managers. ▶ \$ 0. • (3) On the foundation managers. ▶ \$ 0. • (4) On the foundation managers. ▶ \$ 0. • (4) On the foundation managers. ▶ \$ 0. • (4) On the foundation managers. ▶ \$ 0. • (4) On the foundation managers. ▶ \$ 0. • (4) On the foundation managers. ▶ \$ 0. • (4) On the foundation managers. ▶		Į			
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9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount oved 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 10 2, 282. 12 Editer the amount of line 10 to be: Credited to 2017 estimated tax 2, 282. 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pothical campagn? 18 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pothical campagn? 18 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pothical campagn? 18 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pothical campagn? 18 During the tax year, did the foundation in connection with the activities of intervene in any pothical expenditures is very to the activities and copies of any materials published or distributed by the foundation in connection with the activities. 18 During the year of the foundation like Form 1120-POL for this year? 18 During the year of political expenditure tax imposed on foundation managers. 2 During the year of political expenditure tax imposed on foundation managers. 2 During the year of political expenditure tax imposed on foundation managers. 2 During the year of political expenditure tax imposed on foundation and detailed description of the activities. 2 During the year of political expenditure tax imposed on foundation managers. 2 During the year of political expenditure tax imposed on foundation managers. 2 During the year of the changes 3 During the year of the change				2,5	00.
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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 6 10 X Form 990-PF (2016)	The drift persons become substantial communities during the tax year? If Yes," attach a schedule listing their names and addresses WA4AA				(2016)

Form 990-PF (2016) WILD LIVES FOUNDATION	81-1612	2906		Page 5
Part VII-A Statements Regarding Activities (continued)		T - 1	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			165	140
section 512(b)(13)? If "Yes," attach schedule (see instructions)		111		x
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person h	ad advisory privilenes?	 " 		 -
If "Yes," attach statement (see instructions)	ac acricory privileges.	12		х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application	?	13	X	<u> </u>
Website address ► N/A		لستنسا		
	lephone no. ▶206-22	33-7	000	
Located at ▶1420 FIFTH AVENUE, SUITE 4200, SEATTLE, WA	ZIP+4 ▶98			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. •	\Box
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a	bank,		Yes	No
securities, or other financial account in a foreign country?		16		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
foreign country		<u> </u>		
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Requi	red			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year did the foundation (either directly or indirectly):	C			1
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	1 1		l
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				l
a disqualified person?	Yes X No	1		ļ
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			}
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available				ļ
for the benefit or use of a disqualified person)?	Yes X No	}		1
(6) Agree to pay money or property to a government official? (Exception. Check "No"				}
if the foundation agreed to make a grant to or to employ the official for a period after	Yes X No	1		
termination of government service, if terminating within 90 days.)	L Yes LAL NO			
b if any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	NT / A			ĺ
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
Organizations relying on a current notice regarding disaster assistance check here		1		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not observe the first day of the tray year beginning in 20163.	corrected	ا 🚛		x
before the first day of the tax year beginning in 2016? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating	n foundation	1c		
defined in section 4942(j)(3) or 4942(j)(5)):	y toutiuation			ł
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year	er(s) heningen]
before 2016?	Yes X No			[
If "Yes," list the years > , , , , ,				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating	a to incorrect			1
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "N				Í
statement - see instructions.)	N/A	2b	į	ĺ
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	, ,			_
•				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				İ
during the year?	Yes X No			ļ
b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualifie	ed persons after	} }		}
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 49-				l
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use				1
Form 4720, to determine if the foundation had excess business holdings in 2016.)	N/A	3b	L	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chart	itable purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<u> </u>	45		X
	Fo	rm 99 0)-PF	(2016

Form 990-PF (2016) WILD LIVES FOUNDATION	Farm 4700 May Do E	Poguirod (contro	81-16129	906 r	Page 6
Part VII-B Statements Regarding Activities for Which 5a During the year did the foundation pay or incur any amount to:	rorm 4/20 May Be F	tequirea (contin	uea)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4045(a)\2		es X No		
(2) Influence the outcome of any specific public election (see section 4955); of		–			
any voter registration drive?	in to daily on, and day or many		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		1	1 1	
4945(d)(4)(A)? (see instructions)			es X No]]	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or f	or	j		
the prevention of cruelty to children or animals?		Y	es X No]]	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations	}	 	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	nere	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?	N	[/A Y	es L No	1	
If "Yes," attach the statement required by Regulations section 53.494	• •		1]]	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		L_J Y	es X No	-	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?	••	-	6b	<u>X</u>
If "Yes" to 6b, file Form 8870.			es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L ¥0			
b If "Yes," did the foundation receive any proceeds or have any net income attributed by the foundation About Officers, Directors, Trust		nagam Highl	N/A	76	
Paid Employees, and Contractors	ees, roundation wa	mayers, mym	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	enșe
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account,	other
JO LYNN ALLEN		O, SECRET		REASU	RER
505 5TH AVE SOUTH, SUITE 900					
SEATTLE, WA 98104	40.00	0.	0.	.]	0.
	1				
]			ł	
		<u> </u>		<u> </u>	
		1	ł		
				1	
	1	ł	ł	ì	
Compensation of five highest-paid employees (other than those inc	luded as line 4) Massa	ambor PNONE II	L	<u></u>	
Compensation of tive nignest-paid employees (other than those the	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account,	other
NONE	devoted to position	 	compensation	anuwar	ICES
NONE		ļ	{	1	
	 	 		 	
	1	 		1	
	 	 	 	 	
	†	}	}	1	
	 	 	 	 	
	1	{	(
	 			†	
	1	{	{	1	
Total number of other employees paid over \$50,000	·	 	▶		0
			Forn	990-PF	(2016)

Form 990-PF (2016) WILD LIVES FOUNDATION	81-	1612906 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ANDREW BLEIMAN		
9400 WHITNEY PL NW, SEATTLE, WA 98117	CONSULTING	83,088.
FERINA-ILLYANA KESHAVJEE	CONDUCTING	
P.O BOX 24444-00502, KAREN, NAIROBI, KENYA	CONSULTING	65,043.
1.0 DOX 24444 00302, RARBN, NAIRODI, RENIA	CONSULTING	03,043.
	4	
		
	_	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services		. ▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the	Expenses
1 N/A	uceu, etc.	<u> </u>
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A		
I N/A		
2		
	·	
	······································	
All other program-related investments. See instructions.		
3		
		İ
Total. Add lines 1 through 3	>	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundations, s	ee instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	9,180,248.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	9,180,248.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)).	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	9,180,248.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	137,704.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,042,544.
6 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	376,568.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
foreign organizations check here and do not complete this part.)		276 560
1 Minimum investment return from Part X, line 6	, 1 -	376,568.
2a Tax on investment income for 2016 from Part VI, line 5	열	
b Income tax for 2016. (This does not include the tax from Part VI.)	⊣ i	04.0
c Add lines 2a and 2b	2c	218.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	376,350.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	376,350.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	376,350.
Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,034,491.
b Program-related investments - total from Part IX-B	1b	1,034,491.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	, ,
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,034,491.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	 	
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,034,491.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	سلنا	
4940(e) reduction of tax in those years.	on quannes ivi	nio socion

Page 9

Part XIII	Undistributed	Income	(see instructions)
-----------	----------------------	--------	--------------------

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,		<u> </u>		
line 7				376,350.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,,		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
bFrom 2012				
c From 2013				
dFrom 2014	-			
eFrom 2015	ا م			
f Total of lines 3a through e	0.			<u> </u>
4 Qualifying distributions for 2016 from	ļ			
Part XII, line 4: ▶\$ 1,034,491.			•	
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U•			376,350.
d Applied to 2016 distributable amount	658,141.			370,330.
e Remaining amount distributed out of corpus	030,141.			0.
Excess distributions carryover applied to 2016 (if an amount appears in column (d), the same amount must be shown in column (a))		· · · · · · · · · · · · · · · · · · ·		
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	658,141.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed d Subtract line 6c from line 6b, Taxable	· · · · · · · · · · · · · · · · · · ·			
	:	0.		ł
amount - see instructions e Undistributed income for 2015. Subtract line		<u> </u>	<u> </u>	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract			- -	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.		 		
Subtract lines 7 and 8 from line 6a	658,141.			
O Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				1
c Excess from 2014			1	[
d Excess from 2015				
e Excess from 2016 658,141.				1

3 Grants and Contributions Paid During the Ye		Payment	~	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	, co.p.u.ii		············
SEALIFE RESPONSE REHABILITATION AND RESEARCH (SR3)		PUBLIC CHARITY	INITIAL CAMPAIGN DEVELOPMENT AND SITE	
PO BOX 1404 MUKILTEO, WA 98275			VISIT FUNDING.	25,000
SEALIFE RESPONSE REHABILITATION AND		PUBLIC CHARITY	FOURTH QUARTER CORE	
RESEARCH (SR3) PO BOX 1404 MUKILTEO, WA 98275			STAFFING AND FUNDRAISING.	255,750
SPACE FOR GIANTS USA, INC.		PUBLIC CHARITY	STRENGTHENING THE	233,730
1000 N. WEST ST. SUITE 1200 WILMINGTON, DE 19801			LEGAL FRAMEWORK INVOLVED WITH THOSE	
			INVOLVED IN WILDLIFE CRIME IN BOTSWANA.	99,900
 		-		
Total			<u>▶ 3a</u>	380,65
b Approved for future payment				
NONE				
				_
				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)
Entit g. 000 Entouno antoso otilo wiso indicateo.	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business	Amount	sion	Amount	function income
8			-		
b					······································
C					
0					
e	· · · · · · · · · · · · · · · · · · ·				
f			1		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			—		
investments]	i	14	10,975.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:		- 			
a Debt-financed property		 			
b Not debt-financed property					
8 Net rental income or (loss) from personal					······································
property	!				
7 Other investment income			14	-62.	
8 Gain or (loss) from sales of assets other					
than inventory	<u> </u>		ļ .		
9 Net income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·			_
10 Gross profit or (loss) from sales of inventory			1		· · · · · · · · · · · · · · · · · · ·
11 Other revenue:		<u> </u>			· · · · · · · · · · · · · · · · · · ·
a	1 1		į .		
b					
C		· · · · · · · · · · · · · · · · · · ·			
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		10,913.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	10,913.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of E	kemp	t Purposes	
Line No. Explain below how each activity for which incor			contrib	outed importantly to the accon	plishment of
the foundation's exempt purposes (other than t	by providing tu	nas for such purposes).			
					
	·				

Form **990-PF** (2016)

Form 990-PF (N and Transactions	and Relations	81-161 hips With Noncha			ige 13
1 Did the o			of the following	g with any other organizati	on departual to past	tion EO1(a) of		Yes	No
				7, relating to political orga		11011 30 1(c) 01		103	140
	from the reporting found				IIIZAUOIIS		1		ĺ
							1		v
(I) Casi			· · · · · ·				1a(1)		X
			· · · ·	, . ,	••		1a(2)		X
b Other trai									
(1) Sale:	s of assets to a noncharita	ible exempt organiza	tion		*		16(1)	ļ	X
(2) Purc	hases of assets from a no	ncharitable exempt o	organization				1b(2)	L	X
(3) Rent	al of facilities, equipment,	or other assets					1b(3)		X
(4) Reim	nbursement arrangements						1b(4)		Х
(5) Loan	is or loan guarantees					** ** * **** *************	1b(5)		X
(6) Perfo	ormance of services or me	embership or fundrai	sing solicitatio	ns			1b(6)		X
c Sharing o	of facilities, equipment, ma	uling lists, other asse	its, or paid em	playees,			10		Х
or service		oundation. If the fou other assets, or serv	ndation received.	dule. Column (b) should at ed less than fair market val exempt organization	ue in any transaction		show in		onts.
	(-,	(-,	N/A		(0)000-1				
		 	14,721						
		 							
	·	 							
		 							
		 				·			
		· · · · · · · · · · · · · · · · · · ·							
		 							
		 							
									
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		 			-}				
	······································								
in section	501(c) of the Code (other	r than section 501(c)		or more tax-exempt organ		E	Yes	X] No
o n res, c	omplete the following scho (a) Name of org			(b) Type of organization	τ	(c) Description of relations	thin		
	N/A	,		(4) .) po or organization	 	(2) Page iption of readons			
	M/A				 				
					 -				
					 				
					 				
Sign Here		nplate. Declaration of pro		g accompanying schedules and haxpayer) is based on all information of the second secon		r has any knowledge ret sh	iy the IAS ourn with the own below X Yes	see insi	er :
	Print/Type preparer's na		Preparer's si		Date	Check if PTIN			
	l s type preparer s tia		A 1		Janu	self- employed			
Paid	PHILIP COO	ĸ	ITLA	11	5/20/17		1302	076	
Preparer	Firm's name ► AND		LLC		12/2011	Firm's EIN ▶ 33-1			——
Use Only	Train S name PAND	TYPEN TAV	LIIC			I HILS EIN P 33-1	.,,,	J 1	
222 2 1 y				, SUITE 1600)	206 5	77 7	990	
	i SE	ATTLE, WA	・ スロエハナ			Phone no. 206-5	11-1	000	

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2016

Name of the organization **Employer identification number** WILD LIVES FOUNDATION 81-1612906 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

WILD LIVES FOUNDATION

81-1612906

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL G ALLEN 505 FIFTH AVENUE SOUTH, SUITE 900 SEATTLE, WA 98104	\$8,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JO LYNN ALLEN 505 FIFTH AVENUE SOUTH, SUITE 900 SEATTLE, WA 98104	\$2,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

WILD LIVES FOUNDATION

81-1612906

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		s					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
_		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		\$					
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		*					
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		\$					
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received				
		 s	990, 990-EZ, or 990-PF) (2)				

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY C	ASH :	INVESTMENTS	STATEMENT 1	
SOURCE	(A REVE PER E	NUE		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME	1	0,975.		10,975.	10,975.	
TOTAL TO PART I, LINE 3	1	0,975.		10,975.	10,975.	
FORM 990-PF	OTHER I	NCOME			STATEMENT 2	
DESCRIPTION		(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
FOREIGN EXCHANGE LOSS			-62.	-62	. 0.	
TOTAL TO FORM 990-PF, PART I	, LINE 11 =		-62.	-62	0	
FORM 990-PF	LEGAI	FEES			STATEMENT :	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOMI	(D) CHARITABLI E PURPOSES	
LEGAL FEES	186,561.	-	0	. (186,561	
TO FM 990-PF, PG 1, LN 16A	186,561.		0	. (186,561.	
FORM 990-PF	OTHER PROFES	SIONAL F	'EES		STATEMENT 4	
	(A)	(B)		(C) ADJUSTED	(D) CHARITABLI	
DESCRIPTION	EXPENSES PER BOOKS	NET INV MENT IN				
DESCRIPTION CONSULTING FEES		MENT IN		NET INCOM		

FORM 990-PF	OTHER E	XPENSES	ST	STATEMENT 5		
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
BUSINESS EXPENSES EDUCATION EXPENSE	5,194. 5,720.		0.	5,194. 5,720.		
TO FORM 990-PF, PG 1, LN 23	10,914.	0.	0.	10,914.		
	F SUBSTANTIA PART VII-A,	L CONTRIBUTORS LINE 10	S S1	PATEMENT 6		
NAME OF CONTRIBUTOR	ADDR	ESS				
PAUL G. ALLEN		FIFTH AVENUE STILE, WA 98104	SOUTH, SUITE S	900		
JO LYNN ALLEN		05 FIFTH AVENUE SOUTH, SUITE 900 EATTLE, WA 98104				