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| Form• | 990 | Und |
|-------|-----|------|
| | | Ulit |

| 7 | |
|---|------------------|
| Return of Organization Exempt From Income Tax | OMB No 1545-0047 |
| | 2018 |
| der section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) | |
| Do not enter social security numbers on this form as it may be made public. So to www.irs.gov/Form990 for instructions and the latest information. | フレOpen to Public |
| • Go to www.irs.gov/Form990 for instructions and the latest information. | Inspection |

| Internal Revenue Service | Go to www irs.gov/Form990 for instructions and the latest | information. | 1016 | Inspection |
|---|---|---------------------|-------------------|--|
| A For the 2018 cal | endar year, or tax year beginning , and ending | | | |
| | Name of organization | | D Employer i | dentification number |
| Crieck ii applicable | Sportsmen for Fish & Wildlife, Inc | | | |
| Address change | | - | 87-05 | 75540 |
| X Name change | Doing business as Number and street (or P O box if mail is not delivered to street address) | Room/suite | E Telephone | number |
| Initial return | 215 N Redwood Rd #1 | | | 36-1386 |
| Final return/ | City or town, state or province, country, and ZIP or foreign postal code | | | 00 1000 |
| terminated | | | - 0 | 11 070 110 |
| Amended return | North Salt Lake UT 84054 | | G Gross receip | ots\$ 11,079,119 |
| ار ج | Name and address of pnncipal officer | H(a) Is this a gro | un return for su | bordinates Yes X No |
| Application pending | Troy Justensen | 11(4) 13 4113 4 910 | up retain for sur | |
| | 881 S Sunset Drive | H(b) Are all sub- | ordinates includ | ded? Yes No |
| | Kaysville UT 84037 , A | If "No," | attach a list (s | see instructions) |
| 1 Tour evenue to to true | X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527 | 1 | | |
| I Tax-exempt status | A 501(c)(3) 501(c) 4547(a)(1)(1) | 1 | | |
| | w.sfw.net | H(c) Group exer | | |
| | | ear of formation 1 | <u>995 N</u> | A State of legal domicile U^{\prime} |
| Part I Sun | nmary | | | |
| 1 Briefly desc | cribe the organization's mission or most significant activities | | | |
| | chedule O | | | |
| <u> </u> | onedute o | | | |
| ا ع | | | | |
| <u> </u> | <u> </u> | | | |
| وُمَ 2 Check this | box ▶ If the organization discontinued its operations or disposed of more than | 25% of its net | assets | |
| 3 Number of | voting members of the governing body (Part VI, line 1a) | | 3 | 8 |
| 4 Nulmber of | | čn J | 4 | 8 |
| CTE Total number of | 200 | | 5 | 7 |
| | er of individuals employed in calendar year 2016 (Fart V, intega) | 181 | <u> </u> | 0 |
| ~ 6 Total numb | per of volunteers (estimate if necessary) | 2019 151 | 6 | |
| تَنَا 7a Total unrel | per of individuals employed in calendar year 2018 (Part V, line 2a) per of volunteers (estimate if necessary) atted business revenue from Part VIII, column (C), line 12 led business taxable income from Form 990-T, line 38 | 5012 /W | 7a | (|
| b Net unrelat | ted business taxable income from Form 990-T, line 38 | بالسيسا | \ 7b | (|
| | 16/ | , Prior rea | ir <u>)</u> | Current Year |
| 8 Contribution 9 Program so 10 Investment 11 Other rever 12 Total rever | ns and grants (Part VIII, line 1h) ervice revenue (Part VIII, line 2g) | N. 42,21-4 | 825 | 7,549,811 |
| Program se | ervice revenue (Part VIII, line 2g) | | | |
| 3 1 Togram of | tincome (Part VIII, column (A), lines 3, 4, and 7d) | 20 | 0,068 | 280,605 |
| 10 investment | | | 2,495 | 74,605 |
| 11 Other reve | nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | |
| 12 Total rever | nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 5,537 | | 7,905,021 |
| 13 Grants and | I similar amounts paid (Part IX, column (A), lines 1–3) | 123 | 3,925 | 116,396 |
| 14 Benefits pa | aid to or for members (Part IX, column (A), line 4) | | | . <u> </u> |
| | ther compensation, employee benefits (Part IX, column (A), lines 5–10) | 344 | 1,480 | 460,783 |
| | al fundraising fees (Part IX, column (A), line 11e) | | | (|
| N I | | | | |
| 5 1 | aising expenses (Part IX, column (D), line 25) ▶ 112, 012 | | | <u> </u> |
| J 17 Other expe | enses (Part IX, column (A), lines 11a–11d, 11f–24e) | 4,812 | | 5,132,28 <u>2</u> |
| 18 Total expe | nses Add lines 13–17 (must equal Part IX, column (A), line 25) | <u>5,280</u> |) <u>, 556</u> | 5,709,461 |
| | ess expenses. Subtract line 18 from line 12 | | 5,832 | 2,195,560 |
| | 750 00,000 000 000 000 000 000 000 000 00 | Beginning of Cur | | End of Year |
| 20 Total asse | ts (Part X, line 16) | 12,185 | | 14,449,654 |
| 24 Total links | ties (Part X, line 26) | | 428 | 100,913 |
| | | 12,184 | | 14,348,741 |
| | or fund balances Subtract line 21 from line 20 | 12,104 | 1 OTT | 14,340,14 |
| | nature Block | | | <u> </u> |
| Under penalties of pe | erjury, I declare that I have examined this return, including accompanying schedules and sta | atements, and to | the best of n | ny knowledge and belief, |
| true, correct, and cor | mplete Declaration of preparer (other than officer) is based on all information of which prepare | arer has any kno | wledge | |
| <u>, </u> | | | | |
| Sign Sign | nature of officer | | Date | |
| , O.g., | 1/9/1 | | | |
| \ | Mult Wood 177 Chall | man | | |
| Тур | e or print name and title | | | |
| Pnnt/Type r | preparer's name Preparer's signature | Date | Check | if PTIN |
| Paid Scott A | Czaja, CPA Scott A. Czaja, CPA | 11/15 | /19 self-empl | loyed P00440065 |
| Propagar | TIODD TIP 1/ | | | 87-0517754 |
| T Intil C Flatter | | - F | irm's EIN | <u> </u> |
| Use Only | 155 N 400 W Ste 400 | 1 | | 001 000 001 |
| Firm's addr | ess ▶ Salt Lake City, UT 84103 | P | hone no | <u>801-328-201</u> |
| May the IRS discuss | this return with the preparer shown above? (see instructions) | | _ | X Yes No |
| For Panenyork Redu | ction Act Notice, see the separate instructions. | | | Form 990 (2018 |
| DAA DAA | | | ally | |
| | · | | 945 | • |
| | | | | |

| | | r Fish & Wildlife, 1 | Inc.87-057554 | 10 | F | age 2 |
|-----------------------------|---|--|---------------------------|---|----------|--------------|
| | | m Service Accomplishments contains a response or note to a | ny line in this Part I | 11 | | X |
| | cribe the organization's mis | | ny ine in this Fart i | | | <u></u> |
| | nedule O | , | | | | |
| • | | | | | | • |
| | | | | | | |
| 2 5 | | | | | | |
| - | ganization undertake any si 990 or 990-EZ? | gnificant program services during the ye | ear which were not listed | on the | Yes 🛚 | No |
| | escribe these new services | on Schedule O | | | res Z | 7 140 |
| | | g, or make significant changes in how it | conducts, any program | | | |
| services? | ,- | g, • · · · · · · · · · · · · · · · · · · | , ,, | | ☐ Yes ∑ | No |
| If "Yes," de | escribe these changes on S | Schedule O | | | | _ |
| 4 Describe th | ne organization's program s | service accomplishments for each of its | three largest program s | ervices, as measured by | y | |
| expenses | Section 501(c)(3) and 501 | (c)(4) organizations are required to repo | ort the amount of grants | and allocations to others | 5, | |
| the total ex | penses, and revenue, if ar | y, for each program service reported | | | | |
| 4- (0) | | 4 000 000 | <u> </u> | C > 10 | | |
| 4a (Code |) (Expenses \$ | 4,986,699 including grants of ion and enhancement | \$ 116,39 | b) (Revenue \$ | sciet in |) |
| promote | ing quality w | ildlife management p | or writaille | Habitat, as | SISC III | ahout |
| | | ay in wildlife conse | | | | |
| | | g and fishing. | ervacion, an | a perpeduder | ing the | Lamill |
| craarci | ton of hancing | j and rronring. | | | | |
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| | \ <u></u> | | | ``` | | |
| 4b (Code. |) (Expenses \$ | including grants of | \$ |) (Revenue \$ | |) |
| N/A | | | | | | |
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| 4c (Code |) (Expenses \$ | including grants of | <u> </u> |) (Revenue \$ | | |
| N/A |) (Expenses a | including grants of | Φ |) (Revenue o | | , |
| 14/ 23 | • • | | • | | | |
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| 44 04 | rom consus /D1 / | Schodulo O \ | | | | |
| 4d Other progr (Expenses | ram services (Describe in S | Schedule O) including grants of\$ |)_(Revenue \$ | : | 1 | |
| | am service expenses ▶ | 4, 986, 699 | V lizevenine t | <u>, </u> | | |
| retai progr | am service expenses | | | | | |

Form 990 (2018) Sportsmen for Fish & Wildlife, Inc.87-0575540 Part IV Checklist of Required Schedules

| | | | Yes | No |
|----|--|----------|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | Х | |
| 2 | complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 1 2 | _^_ | Х |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | ^ |
| • | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | Χ |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | — | | |
| • | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | Χ |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | <u> </u> | | |
| _ | assessments, or similar amounts as defined in Revenue Procedure 98-19° If "Yes," complete Schedule C, Part III | 5 | | Χ |
| 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 | | Х |
| 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 | | Χ |
| 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 | İ | | |
| | debt negotiation services? If "Yes," complete Schedule D, Part IV | _ 9 | | X |
| 0 | 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 | | Χ |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | İ | | |
| | VII, VIII, IX, or X as applicable | - | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | 1 | | |
| | complete Schedule D, Part VI | 11a | X | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more | 1 | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| 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 | | X |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | 1 | ,, | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | Ī | |
| _ | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Χ | |
| f | , | | | 37 |
| 22 | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| Za | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | 120 | | v |
| h | Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If | 12a | | X |
| U | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | Х |
| 3 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Х | |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | 140 | | |
| _ | fundraising, business, 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 | х | |
| 5 | 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 | Í | Χ |
| 6 | 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 | | Χ |
| 7 | 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 (see instructions) | _17 | | X |
| 8 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | _18 | Х | |
| 9 | 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 | 19 | | X |
| 0a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Χ |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | I | |
| 1 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | T | |
| | domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts Land II | 21 | χΙ | |

Page 4

| _ <u>Pa</u> | art IV Checklist of Required Schedules (continued) | | | |
|-------------|--|---------------|-----|------------|
| 22 | | Γ | Yes | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | 22 | | v |
| 23 | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | 22 | _ | <u>X</u> |
| 25 | 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 | 1-20 | | |
| | \$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 | | Х |
| 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 | | |
| 25a | 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 | | Χ |
| 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 | | _X_ |
| 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 | | X |
| 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 of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | <u>X</u> |
| 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) | | | 3.7 |
| a | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | Χ_ |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | 201 | | v |
| _ | Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | 28b | | <u>X</u> _ |
| С | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | Х |
| 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 | 23 | | Δ |
| • | conservation contributions? If "Yes," complete Schedule M | 30 | | Χ |
| 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 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 | Χ | |
| 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 | Χ | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | <u>X</u> |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a | | ĺ | |
| | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 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 | | <u>X</u> |
| 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 | | <u>X</u> |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and | | ι, | |
| | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Χ | |
| ra | art 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 | 1 | Ves | <u> </u> |
| 1- | Enter the number reported in Pay 2 of Form 1006. Enter 0, if not conticoble | | Yes | No |
| | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | 1 | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and | | İ | |
| С | reportable gaming (gambling) winnings to prize winners? | 1c |] | |
| | rependent genning (gennemg) withings to prize withers. | | 990 | (2018) |
| | | . 51111 | | |

| | 1-990 (2018) Sportsmen for Fish & Wildlife, Inc.8/-05/5540 | | <u>Р</u> | age : |
|----------|--|----------|---|-----------------------|
| Pa | art V Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | |
| ٥. | Falsalla and an all and a falsalla for Montana and Taxaalla for the falsalla | Yes | No |
| Za | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return [2a // | ⊣ "։ | 1,7 | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X | |
| 2- | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 1 2- | ĺ | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | X |
| b 4a | 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, | 40 | | Х |
| _ | a 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) | | ļ | v |
| _ | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5a 5b | - | X |
| b | | 5c | | $\stackrel{\wedge}{}$ |
| c 6a | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 30 | ├─- | |
| ua | 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? | 6a | | X |
| h | If "Yes," did the organization include with every solicitation an express statement that such contributions or | - Oa | ├ | |
| b | · | 6b | | |
| 7 | gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(a) | 00 | ├─ | - |
| | Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | 1 | 1 | l |
| а | and services provided to the payor? | 7a | | Х |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | $\frac{1}{1}$ |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 10 | | |
| C | required to file Form 8282? | 7c | [| Х |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | 1,0 | | $\frac{1}{1}$ |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | ─ 7e | | Х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | X |
| 9 h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | X |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | <u> </u> | | <u> </u> |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | ا ا | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | ŀ | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 7 | | ł |
| 11 | Section 501(c)(12) organizations. Enter | 7 | | ľ |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | 7 | | |
| | against 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. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | 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 organization is licensed to issue qualified health plans | | | |
| С | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Χ |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | |
| | excess parachute payment(s) during the year? | 15 | | Χ |
| | If "Yes," see instructions and file Form 4720, Schedule N | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | X |

If "Yes," complete Form 4720, Schedule O

881 S Sunset Drive

UT 84037

Troy Justensen

Kaysville

| | _ | | | | |
|---------------------------|-----|--------|-------------|----------------|--|
| Form 990 (2018) Sportsmen | for | Fish & | . Wildlife. | Tnc.87-0575540 | |

Page 7

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. 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 | (4) | not c | Pos | C) sition | than o | one | (D) Reportable compensation | (E) Reportable compensation from | (F) Estimated amount of |
|--|--|-----------------------------------|----------|--|--------------|---------------------------------|------|---------------------------------|----------------------------------|---|
| | week (list any | bo | k, unle | ess pe | rson | is both or/trust | n an | from the | related organizations | other compensation |
| | hours for related organizations below dotted line) | Individual trustee or director | | Officer | | Highest compensated employee | | organization (W-2/1099-MISC) | (W-Ž/1099-MISC) | from the organization and related organizations |
| (1)Troy Justensen | | | [| | | | | | | · |
| | 55.00 | | ł | Ì | İ | | | 100 000 | | |
| President | 0.00 | X | | Х | <u> </u> | | _ | 120,000 | 0 | 0 |
| (2) John Bair | 1 00 |] | | | | | | | | |
| Wise Duraidout | 1.00 | ١,, | | | | | | | 0 | 0 |
| Vice President (3) Kurt Wood | 0.00 | X | | ├ | - | | | 0 | | 0 |
| (3) Kuit wood | 1.00 | | | | | | | | | |
| Chairman | 0.00 | X | | | | | | 0 | o | 0 |
| (4) Brayden Richmon | d | ^` | \vdash | | | \vdash | | | | ······ |
| (4) Drayaen Kremmon | 1.00 |] | | | | | | | } | |
| Co Chair | 0.00 | X | | | | | | l ol | ol | 0 |
| (5) Rusty Aiken | | | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | 1.00 | ļ |] | | ļ | | | | } | |
| Trustee | 0.00 | X | | | | | | <u> </u> | 0 | 0 |
| (6) Erik Craythorne | | | | | | | | | | |
| | 1.00 | | | | | | | | J | |
| Trustee | 0.00 | X | | <u> </u> | | | | 0 | 0 | 0 |
| (7) Dave Woodhouse | | | | | | | | | 1 | |
| | 1.00 |] | |] | | | | | | |
| Trustee | 0.00 | X | | <u> </u> | _ | | | 0 | 0 | 0 |
| (8)Brett Foster | 1 00 | | | | | | | | | |
| Trustoo | 1.00 | X | | | | | | | 0 | 0 |
| Trustee (9) Kevin Pritchett | 0.00 | 10 | | <u> </u> | - | | | | | |
| (a) Ve ATIL LITCHELD | 1.00 | | | | | | | | | |
| Trustee | 0.00 | X | | | | | | اره | ol | 0 |
| (10)Christopher Car | | | | | - | | | | | |
| (13,011111111111111111111111111111111111 | 40.00 | | | | ļ | | | | , | |
| Dir. of Marketing | 0.00 | | | X | ĺ | | | 100,000 | o | 0 |
| (11)Bryce Pilling | | $\lceil \rceil$ | | | | П | | | | |
| · · · | 40.00 | | | | | | | } | | |
| Secretary | 0.00 | 1 | 1 | Χ | ı | ı i | | 25,000 | ol | 0 |

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

received more than \$100,000 of compensation from the organization ▶

. 9

| | Check if Schedule | O contains | s a response | | | (C) | |
|------------------|---|----------------|--|----------------------|--|----------------------------------|--|
| 1.0 | | | | (A) Total revenue | (B) Related or exempt function revenue | Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| \$ 1a | Federated campaigns | 1a | | - | | | <u> </u> |
| ž t | Membership dues | 1b | 1,545 | | | | |
| ₹ 0 | Fundraising events | 1c | | | ľ | | |
|) <u>i</u> | I Related organizations | _1d | | | | Ì | |
| S e | Government grants (contributions) | 1e 2 | ,706,747 | 1 | | } | |
| | All other contributions, gifts, grants, and similar amounts not included above | | ,841,519 | | | | |
| <u>P</u> | Noncash contributions included in lines 1a | -1f \$ | | 7 540 011 | | Ì | |
| al L | Total. Add lines 1a-1f | | | 7,549,811 | | | |
| เล ผู้ 2a | | | Busn Code | | | | |
| 20 20 | | | | | | | |
| | | | | | | | |
| | _ | | | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | | | | |
| | f All other program service reve | enue | | | | | |
| ءِ ا ا | Total. Add lines 2a-2f | | > | | | | |
| 3 | | dıvıdends, ın | terest, | | | | |
| | and other similar amounts) | | > _ | 280,605 | | | 280,605 |
| 4 | Income from investment of tax | c-exempt bor | nd proceed 🕒 | | | | |
| 5 | Royalties | | • | | | | |
| | (ı) Real | (11 |) Personal | | | | |
| 6a | Gross rents | | | | Ì | | |
| b | Less rental exps | | | | | , | |
| C | Rental inc. or (loss | | | | 1 | | |
| | Net rental income or (loss) Gross amount from (1) Securities | | | | | | ····· |
| ' | sales of assets (i) Securities | | (II) Other | | | | |
| ١. | other than inventory | | | | | | |
| D | Less cost or other | | | | | | |
| | basis & sales exps | | | | | | |
| | Gain or (loss) Net gain or (loss) | i | — | | | | |
| 1 - | Gross income from fundraising eve | nte [| | | | | |
| omer kevenue | (not including \$ | 1113 | | | | | |
| e | of contributions reported on line 1c | , | | | | | |
| Ž | See Part IV, line 18 | | ,798,035 | | | | |
| ÉГь | Less. direct expenses | | ,174,098 | 1 | - | | |
| ءَ ا حَ | Net income or (loss) from fund | | | -376,063 | | | |
| | Gross income from gaming activities | | | -, | | | |
| | See Part IV, line 19 | a | | |] | | |
| b | Less direct expenses | b | | | | | |
| | Net income or (loss) from garr | ing activities | • | | | | |
| | Gross sales of inventory, less | | | | | | |
| | returns and allowances | a | | 1 | 1 | | |
| þ | Less, cost of goods sold | b | | | | | |
| _ c | Net income or (loss) from sale | s of inventor | y > | | | | |
| | Miscellaneous Revenue | | Busn Code | | | | |
| 11a | West Rim/Sorenson Cap | oital | - | 450,536 | 450,536 | | |
| b | BCI Income | | | 132 | 132 | | |
| c | | | | | | | |
| d | | | L | | | | |
| е | | | ▶ - | 450,668 | 450 660 | | 000 005 |
| 12 | Total revenue. See instruction | ns | <u> </u> | 7,905,021 | 450,668 | 0 | 280,605 Form 990 (2018) |

DAA

Part IX

Form 990 (2018)

Form 990 (2018) Sportsmen for Fish & Wildlife, Inc.87-0575540

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX X (A) Total expenses (B) Program service (C) Management and (D) Do not include amounts reported on lines 6b. Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 116,396 116,396 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV. line 22 3 Grants and other assistance to foreign 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, 245,000 171,500 49,000 24,500 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 106,756Other salaries and wages 152,509 30,502 15,251 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 63,274 292 12,655 44. Payroll taxes 10 11 Fees for services (non-employees) Management Legal 12,895 12,895 c Accounting Lobbying Professional fundraising services See Part IV, line 17 157,674 157,674 Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 734,353 536,552 131,867 65,934 20,427 20,427 12 Advertising and promotion 27,720 <u>64,84</u>2 37,122Office expenses 13 5,130 Information technology 10,262 5,132 14 15 Royalties 18,859 16,066 2,793 16 Occupancy 46,693 46,693Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Payments to affiliates 21 17,906 17,906 22 Depreciation, depletion, and amortization Insurance 98,064 98,064 23 Other expenses Itemize expenses not covered 24 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 O) Permit Expense 717,288 717,288 а Project Expense 398,881 398,881 b Hunt Expense 308,175 308,175 c Landowner Tags 262,535 262,535 263,428 190,382 e All other expenses 73,046 4,986,699 112,012 Total functional expenses. Add lines 1 through 24e 5,709,461 610. 750 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ if following SOP 98-2 (ASC 958-720)

| <u>P</u> | art) | K Balance Sheet | | | |
|--------------------------------|-------|---|--------------------------|-----------|--------------------------------------|
| | | 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 | | 1 | |
| | 2 | Savings and temporary cash investments | 1,500,639 | 2 | 2,020,269 |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. | | | |
| | ł | Complete Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section | h | | |
| | | 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers a | hd | | |
| | | sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary | | | |
| ş | | organizations (see instructions) Complete Part II of Schedule L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | ļ | 7 | |
| ⋖ | 8 | Inventories for sale or use | 580,450 | 8 | 580,450 |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment cost or | | | |
| | | other basis Complete Part VI of Schedule D 10a 5,649,451 | | | |
| | ь | Less accumulated depreciation 10b 124,846 | | 10c | 5,524,605 |
| | 11 | Investments—publicly traded securities | 573,714 | 11 | 563,751 |
| | 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 | 3,987,695 | 15 | 5,760,579 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 12,185,009 | <u>16</u> | 14,449,654 |
| | 17 | Accounts payable and accrued expenses | | 17 | |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | <u></u> |
| | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | 21 | |
| es | 22 | Loans and other payables to current and former officers, directors, | | | |
| Liabilities | İ | trustees, key employees, highest compensated employees, and | | | |
| ia | | disqualified persons 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 | • | | |
| | ŀ | parties, and other liabilities not included on lines 17-24) Complete Part X | 400 | | 100 010 |
| | | of Schedule D | 428 | | 100,913 |
| | 26 | Total liabilities. Add lines 17 through 25 | 428 | 26 | 100,913 |
| es | 1 | Organizations that follow SFAS 117 (ASC 958), check here ▶X and | | | |
| Ĕ | | complete lines 27 through 29, and lines 33 and 34. | 10 104 501 | | 14 040 741 |
| ala | 27 | Unrestricted net assets | 12,184,581 | 27 | 14,348,741 |
| d E | 28 | Temporarily restricted net assets | | 28 | |
| Ë | 29 | Permanently restricted net assets | | 29 | |
| ٠. | 1 | Organizations that do not follow SFAS 117 (ASC 958), check here | | | |
| ţ | | complete lines 30 through 34. | | | |
| ર્મીet Assets or Fund Balances | 30 | Capital stock or trust principal, or current funds | | 30 | - |
| ΪÀ | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| ريجر | 32 | Retained earnings, endowment, accumulated income, or other funds | 10 104 501 | 32 | 14 240 741 |
| 24 | 33 | Total net assets or fund balances | 12,184,581 | 33 | 14,348,741 |
| لك | 34 | Total liabilities and net assets/fund balances | 12,185,009 | 34 | 14,449,654 Form 990 (2018) |

| orn | 990(2018) Sportsmen for Fish & Wildlife, Inc.87-0575540 | | | | Pag | ge 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 | | | | 021 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 5 | ,70 | 9, | 461 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 2 | 19 | 95, | 560 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | | 581 |
| 5 | Net unrealized gains (losses) on investments | 5_ | | -3 | 31, | 400 |
| 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 | | | | |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line | | | | _ | |
| | 33, column (B)) | 10 | 14 | , 34 | 18, | <u>741</u> |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | Ш. |
| | | | - | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 X Cash Accrual Other | | | | | İ |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | | | |
| | Schedule O | | ł | - { | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | L | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | | | |
| | reviewed on a separate basis, consolidated basis, or both | | į | ı | | i |
| | Separate basis Consolidated basis Both consolidated and separate basis | | ľ | 1 | | |
| b | Were the organization's financial statements audited by an independent accountant? | | Ļ | 2b | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | | | |
| | separate basis, consolidated basis, or both | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | 1 | - 1 | | |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight | | | | | |
| | of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | <u> </u> | 2c | | <u> </u> |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | ĺ | ĺ | | 1 |
| | Schedule O | | | | | ĺ |
| 3а | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | | | | |
| | the Single Audit Act and OMB Circular A-133? | | L | 3a | | X |
| þ | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the | | - | | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | | 3b | | |
| | | | | Forn | 990 | (2018) |

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.

OMB No 1545-0047 2018

Employer identification number

ZUIO Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Sportsmen for Fish & Wildlife, Inc. 87-0575540 Part I 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) 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, 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) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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) 8 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 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) 11 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 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 I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization (i) Name of supported (v) Amount of monetary (III) Type of organization (vi) Amount of organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D) (E) Tota!

Page 2

m 990 or 990-EZ) 2018 Sportsmen for Fish & Wildlife, Inc.87-0575540
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 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) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | 2,928,929 | 4,611,218 | 3,222,439 | 4,214,825 | 7,549,811 | 22,527,222 |
| 2. | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 5 | 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 shown on line 11, column (f) | 2,928,929 | 4,611,218 | 3,222,439 | 4,214,825 | 7,549,811 | 22,527,222 |
| 6_ | Public support. Subtract line 5 from line 4 | | | | | | 22,527,222 |
| | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 7 | Amounts from line 4 | 2,928,929 | 4,611,218 | 3,222,439 | 4,214,825 | 7,549,811 | 22,527,222 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 43,572 | | 15,818 | 20,068 | 280,605 | 360,063 |
| 9 | Net income from unrelated business 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) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 22,887,285 |
| 12 | Gross receipts from related activities, etc. | (see instructions |) | | | 12 | 6,805,655 |
| 13 | First five years. If the Form 990 is for the | e organization's fir | st, second, third, | fourth, or fifth tax | year as a section | 501(c)(3) | |
| | organization, check this box and stop he | ere | | | | | • |
| Sec | tion C. Computation of Public S | | | | | | |
| 14 | Public support percentage for 2018 (line | | | umn (f)) | | 14 | 98.43% |
| 15 | Public support percentage from 2017 Sc | | | | | 15 | 99.45 % |
| 16a | 33 1/3% support test—2018. If the orga | | | | ıs 33 1/3% or mo | re, check this | |
| | box and stop here. The organization qua | | | | | | ightharpoons |
| þ | 33 1/3% support test—2017. If the orga | | | | ne 15 is 33 1/3% (| or more, check | |
| | this box and stop here . The organization | | • • • | • | | | ▶⊔ |
| 17a | 10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " | ets the "facts-and- | circumstances" te | est, check this box | and stop here. I | Explain in | |
| b | organization 10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part VI how the organization in | 017. If the organization meets the "facts | ation did not chec -and-circumstanc | k a box on line 13 es" test, check thi | , 16a, 16b, or 17a s box and stop h | a, and line nere. | ▶ □ |
| 18 | supported organization Private foundation. If the organization of instructions | did not check a box | on line 13, 16a, | 16b, 17a, or 17b, | check this box an | nd see | ▶ □ |
| | | <u> </u> | | | | hadula A (Form 90 | |

| | | <u>ortsmen f</u> | | | | <u>-0575540</u> | Páge 3 |
|------|--|---------------------|----------------------|----------------------|-------------------|---------------------|--------------------|
| Р | art III Support Schedule for | | | | | | |
| | (Complete only if you ch | ecked the box | on line 10 of t | Part I or If the | organization for | alled to quality | under Part II. |
| 50 | If the organization fails t | oʻqualliy undel | r trie tests liste | o below, plea | se complete P | art II.) | -// |
| | etion A. Public Support andar year (or fiscal year beginning in) | (a) 2014 | (b) 2015 | (a) 2016 | (d) 2017 | (e) 2018 | 7 (5) Tatal |
| 1 | Gifts, grants, contributions, and membership | (a) 2014 | (b) 2015 | (c) 2016 | (a) 2017 | (e) 2016 | /(f) Total |
| • | 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 | | | \times | | | |
| | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from line 6) | | | | | | |
| | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2014 | (þ) 2015 | (c) 2016 \ | (d) 2017 | (e) 2018 | (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 | | , | / | | | |
| ¢ | 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 VI) | | / | | | | <u> </u> |
| 13 | Total support. (Add lines 9, 10c, 11, and 12) | | | | • | | ı |
| 14 | First five years. If the Form 990 is for the | ne organization's f | îrșt, second, third, | fourth, or fifth tax | year as a section | n 501(c)(3) | |
| | organization, check this box and stop h | | / | | | 1 | |
| | ction C. Computation of Public | | | | | <u> </u> | |
| 15 | Public support percentage for 2018 (line | | | olumn (f)) | | 15 | %_ |
| 16_ | Public support percentage from 2017 Sc | | | | | <u> </u> | % |
| | ction D. Computation of Investm | | | 10 1 | | | |
| 17 | Investment income percentage for 2018 | | | e 13, column (f)) | | 17 | % |
| 18 | Investment income percentage from 201 | , | | lm= 4.4 ==== ! : | IE 10 mars #1 00 | <u>[18]</u> * | %_ |
| 19a | , | | | | | | ▶ □ |
| k | 17 is not more than 33 1/3%, check this | | | | | | ▶ |
| р | 33 1/3% support tests—2017. If the org | - 1 | | | | • | 1 1 |
| 20/ | Private foundation. If the organization | | - | | | - | \ |
| 7- | | 1 | | | | | 90 or 990-EZ) 2018 |
| , | | , | | | | | |

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)

| <u>C 4</u> | Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and co | inplete Pa | irt V) | |
|------------|--|------------------|---------|--|
| Seci | ion A. All Supporting Organizations | | Yes | Ma |
| | A could of the account of a country and account on a listed by some in the accompation's gaylerning | | 162 | No. |
| 1 | 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 | 1 | | |
| _ | class or purpose, describe the designation. If historic and continuing relationship, explain | - ' - | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status | | | İ |
| | under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | 2 | | |
| 2- | organization was described in section 509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | | | |
| 3a | | 3a | | |
| _ | (b) and (c) below Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and | 34 | | - |
| b | satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the | | | |
| | | 3b | | |
| _ | organization made the determination | 35 | | l |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) | 3с | | |
| 4- | purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use | 30 | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If | 4a | | |
| | "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below | 40 | - | |
| 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 | 4b | | |
| | despite being controlled or supervised by or in connection with its supported organizations | 40 | | |
| С | 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 | -40 | | - |
| 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 | 50 | | |
| | 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 | 5b | | |
| | designated in the organization's organizing document? | 5c | | |
| C | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 30 | | - |
| 6 | 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 Part VI . | 6 | | - |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor | | | |
| | (as 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 | | |
| 8 | 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 | 0- | | |
| | in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | <u>9a</u> | _ | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which | ا م | | |
| | 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. | 9c | | |
| 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 | | | |
| | supporting organizations)? If "Yes," answer 10b below | 10a | | - |
| 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) | 10b | | |

| Sched | <u>ule A (Form 990 or 990-EZ) 2018 Sportsmen for Fish & Wildlife, Inc.87-05755</u> | <u> 540</u> | _ | Page 5 |
|--------|--|--|-------|--------|
| _Pa | rt IV Supporting Organizations (continued) | | | |
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | } |
| | below, the governing body of a supported organization? | 11a | | |
| b | 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 | | |
| Sect | tion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | |] |
| | 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 | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part | | | |
| | VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| | supervised, or controlled the supporting organization | 2 | | |
| Sect | ion C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | 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 | | | |
| | the supported organization(s) | 1 | | |
| Sect | ion D. All Type III Supporting Organizations | <u> </u> | | |
| | | | 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 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 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | - | | |
| 3 | 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 | | | |
| | supported organizations played in this regard | 3 | | |
| Sect | ion E. Type III Functionally-Integrated Supporting Organizations | | | L |
| | | otiona) | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction as the first than Astronomy The organization as the first than 1 to 1 to 1 to 1 to 1 to 1 to 1 to 1 t | ctions) | | |
| a k | 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 | The organization supported a governmental entity Describe in Part VI how you supported a government entity (see | Iristructio | oris) | |
| 2 | Ashumbaa Taab Amarraa (a) and (b) balance | ſ | V | |
| | Activities Test Answer (a) and (b) below. | | Yes | _No |
| a | 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, | 1 1 | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | | |
| | that these activities constituted substantially all of its activities | <u> 2a</u> | | |
| Ь | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | j j | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement | _2b | | |
| 3 | Parent of Supported Organizations Answer (a) and (b) below. | | | |
| a | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| | trustees of each of the supported organizations? Provide details in Part VI. | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard | 3b | | |

| Schedule A (Form 990 or 990-EZ) 2018 Sportsmen for Fish & Wild | | | 5540 Page 6 |
|--|----------|---------------------------------------|-----------------------------|
| 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 trust of | | · · · · · · · · · · · · · · · · · · · | |
| instructions. All other Type III non-functionally integrated supporting organization | s must c | omplete Sections A thro | ugh E |
| Section A - Adjusted Net Income | | (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 | T | | |
| factors (explain in detail in Part VI) | | | |
| 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 | <u>-</u> | |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Section C - Distributable Amount | | | Current Year |
| 1 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-functionally integr | ated Ty | e III supporting organiza | ation (see |

instructions)

e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018 Sportsmen for Fish & Wildlife, Inc.87-0575540

Page 8

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, 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; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 18

Open to Public Inspection

| Name | e of the organization | | Employer identification number |
|--------|---|--|---------------------------------|
| S | portsmen for Fish & Wildlife, Inc. | | 87-0575540 |
| | art I Organizations Maintaining Donor Advised F | unds or Other Similar Funds | or Accounts. |
| | Complete if the organization answered "Yes" o | n 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) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in writing | | |
| | funds are the organization's property, subject to the organization's e | | ∐ Yes ∐ No |
| 6 | Did the organization inform all grantees, donors, and donor advisors | | |
| | only for charitable purposes and not for the benefit of the donor or d | onor advisor, or for any other purpose | □ vaa □ va |
| | conferring impermissible private benefit? art II Conservation Easements. | | Yes No |
| | Complete if the organization answered "Yes" o | n Form 990. Part IV. line 7. | |
| 1 | Purpose(s) of conservation easements held by the organization (che | | |
| | Preservation of land for public use (e.g., recreation or education | | portant land area |
| | Protection of natural habitat | Preservation of a certified histo | |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified con | servation contribution in the form of a c | conservation |
| | easement on the last day of the tax year | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| b | , | | 2b |
| С | Number of conservation easements on a certified historic structure i | ` ' | 2c |
| d | Number of conservation easements included in (c) acquired after 7/2 | 25/06, and not on a | |
| | historic structure listed in the National Register | | |
| 3 | Number of conservation easements modified, transferred, released, | extinguished, or terminated by the orga | anization during the |
| 4 | tax year > | us legated N | |
| 4 5 | Number of states where property subject to conservation easement Does the organization have a written policy regarding the periodic m | | |
| 7 | violations, and enforcement of the conservation easements it holds? | | ☐ Yes ☐ No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, handling | | |
| • | | g or moterial and amorating consolinati | to four |
| 7 | Amount of expenses incurred in monitoring, inspecting, handling of | violations, and enforcing conservation e | easements during the year |
| | ▶\$ | - | , |
| 8 | Does each conservation easement reported on line 2(d) above satis | fy the requirements of section 170(h)(4 | |
| | and section 170(h)(4)(B)(ii)? | | Yes No |
| 9 | In Part XIII, describe how the organization reports conservation ease | ements in its revenue and expense stat | ement, and |
| | balance sheet, and include, if applicable, the text of the footnote to the | he organization's financial statements t | hat describes the |
| _ | organization's accounting for conservation easements | 1 11: 4 - : - 1 T | 0:-1-41- |
| Pa | art III Organizations Maintaining Collections of Ar Complete if the organization answered "Yes" o | | ner Similar Assets. |
| | | | and halansa shoot |
| ıa | If the organization elected, as permitted under SFAS 116 (ASC 958) works of art, historical treasures, or other similar assets held for pub | | |
| | public service, provide, in Part XIII, the text of the footnote to its final | | |
| b | If the organization elected, as permitted under SFAS 116 (ASC 958) | | |
| - | works of art, historical treasures, or other similar assets held for pub | • | |
| | 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 | | ▶ \$ |
| 2 | If the organization received or held works of art, historical treasures, | or other similar assets for financial gain | n, provide the |
| | following amounts required to be reported under SFAS 116 (ASC 95 | - | |
| а | Revenue included on Form 990, Part VIII, line 1 | - | > \$ |
| b | Assets included in Form 990, Part X | | ▶ \$ |

| Sch | edule D (Form 990) 2018 Sportsme | <u>en for Fish</u> | 1 & W | ildlif | e, Inc | <u>.87-0</u> | <u> 5755</u> | <u>40</u> | | Page 2 |
|----------|---|--------------------------------|-----------------|----------------------|-------------------------|--------------|--------------------------|------------------|-------------------------|-------------|
| _P | art III Organizations Maintain | ing Collections | of Art, | Historica | Treasure | s, or O | ther S | <u>imilar As</u> | sets (con | tinued) |
| 3 | Using the organization's acquisition, accollection items (check all that apply) | ession, and other rec | ords, che | ck any of the | following the | at are a si | ignifican | t use of its | | |
| а | Public exhibition | d 🗌 | Loan or | exchange pr | ograms | | | | | |
| b | Scholarly research | e T | Other | | | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization | 's collections and exp | lain how | they further | the organizat | on's exe | mpt purp | ose in Part | | |
| | XIII | · | | | _ | | | | | |
| 5 | During the year, did the organization soli | cit or receive donation | ns of art, | historical tre | asures, or ot | her sımıla | r | | | |
| | assets to be sold to raise funds rather that | | | | | | | | Yes | ☐ No |
| Pa | art IV Escrow and Custodial | Arrangements. | | | | | | | | |
| | Complete if the organizate 990, Part X, line 21. | tion answered "Y | es" on | Form 990, | Part IV, li | ne 9, or | report | ed an am | ount on F | orm |
| 1a | Is the organization an agent, trustee, cus | stodian or other intern | nediary fo | or contributio | ns or other a | ssets not | | | | |
| | included on Form 990, Part X? | | • | | | | | | Yes | ☐ No |
| b | If "Yes," explain the arrangement in Part | XIII and complete the | following | g table [.] | | | _ | | | |
| | · | | | _ | | | | | Amount | |
| c | Beginning balance | | | | | | | 1c | | |
| d | Additions during the year | | | | | | | 1d | | |
| е | Distributions during the year | | | | | | L | 1e | | |
| f | Ending balance | | | | | | L | 1f | | |
| 2a | Did the organization include an amount of | on Form 990, Part X, | line 21, fo | or escrow or | custodial acc | ount liabi | lity? | | Yes | No |
| þ | If "Yes," explain the arrangement in Part | XIII Check here if the | e explana | ition has bee | n provided o | n Part XII | 1 | | | |
| Pa | art V Endowment Funds. | | | | | | | | | |
| | Complete if the organiza | tion answered "Y | <u>es" on l</u> | <u>Form 990,</u> | Part IV, lii | <u>ne 10</u> | | | | |
| | | (a) Current year | (b) i | Pnor year | (c) Two yea | rs back | (d) Thre | e years back | (e) Four ye | ars back |
| 1a | Beginning of year balance | | | | | | | | <u> </u> | |
| þ | Contributions | | L | <u></u> | | | | | <u> </u> | |
| C | Net investment earnings, gains, and | | | | | | | | | |
| | losses | | | | | | | | | |
| þ | Grants or scholarships | | | | ļ | | | | | |
| 6 | Other expenditures for facilities and | | | | | į | | | | |
| | programs | | L | | | | _ | | | |
| f | Administrative expenses | | <u></u> | | | | | | | |
| g | End of year balance | | <u> </u> | | l | | | | | |
| 2 | Provide the estimated percentage of the | | ince (line | 1g, column | (a)) held as | | | | | |
| | Board designated or quasi-endowment | | | | | | | | | |
| | Permanent endowment ▶ % | | | | | | | | | |
| ¢ | Temporarily restricted endowment ▶ | % | | | | | | | | |
| • | The percentages on lines 2a, 2b, and 2c | | | | | | | | | |
| 3a | Are there endowment funds not in the po | ssession of the organ | nization th | nat are held a | and administ | ered for tr | ne | | [v. | |
| | organization by | | | | | | | | | s No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | |
| L | (ii) related organizations | | | 0-6-4-1- 0 | | | | | 3a(iı) | |
| D 4 | If "Yes" on line 3a(ii), are the related orga | | | | | | | | 3b | |
| <u>4</u> | Describe in Part XIII the intended uses o | | ndowmen | t funds | | | | | | |
| Pa | art VI Land, Buildings, and Ed | | 00" 00 1 | 50rm 000 | Dort IV lie | 0 110 | Soo E | orm 000 I | Dort V lin | o 10 |
| | Complete if the organization | | | | | | | | | |
| | Description of property | (a) Cost or other (investment) | - I | (b) Cost or o | | | ccumulated preciation | | (d) Book valu | 10 |
| 1~ | Lond | (integration) | + | | | | | | 5,248 | 277 |
| | Land | | | | <u>48,277</u> 34,670 | | 61, | 377 | 3,248 273 | |
| | Buildings | - | | |)4,0/U | | 01, | 211 | 213 | <u>,293</u> |
| | Leasehold improvements | - | | | <u>56,504</u> | | 63 | 469 | | ,035 |
| | Equipment Other | | + | | 30,304 | | 00, | - U D | | , 022 |
| | L Add lines 1a through 1e (Column (d) m | ust equal Form 990 I | art X co | olumn (R) Im | e 10c) | | | | 5.524 | 605 |

| Schedule D | (Form 990) 2018 Sportsmen for Fish | & Wildlife, In | <u>ic.87-0575540</u> | Page : |
|------------|--|--------------------------|---------------------------|---------------------|
| Part VII | | _ | | |
| ` <u></u> | Complete if the organization answered "Yes | | | |
| | (a) Description of security or category | (b) Book value | (c) Method of va | |
| | (including name of secunty) | | Cost or end-of-year r | narket value |
| • • | al derivatives | | | |
| | -held equity interests | <u> </u> | | |
| (3) Other | | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | - | |
| (D) | | | | |
| (E) | | | | |
| (F) (G) | | | | |
| (H) | | | | |
| | ımn (b) must equal Form 990, Part X, col (B) line 12) ▶ | | | |
| Part VII | | | <u> </u> | |
| | Complete if the organization answered "Yes | s" on Form 990. Part IV. | line 11c See Form 990 |). Part X. line 13. |
| | (a) Description of investment | (b) Book value | (c) Method of va | |
| | | | Cost or end-of-year r | narket value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| _(7) | | | | |
| _(8) | | | | |
| _(9) | | | | |
| | ımn (b) must equal Form 990, Part X, col (B) line 13) ▶ | | | |
| Part IX | Other Assets. | | | |
| | Complete if the organization answered "Yes | s" on Form 990, Part IV, | line 11d See Form 990 | |
| | (a) Description | | | (b) Book value |
| _(1) | ARRO Investment_ | | | 2,284,388 |
| (2) | West Rim Capital Par | · | | 1,088,574 |
| (3) | | tners | | 1,004,807 |
| _(4) | FCSO Investment | | | 982,810 400,000 |
| (5) | Grazing Permits | · | | 400,000 |
| <u>(6)</u> | | | | |
| (7) (8) | | | | |
| (9) | | | | |
| | ımn (b) must equal Form 990, Part X, col (B) line 15) | | <u> </u> | 5,760,579 |
| Part X | Other Liabilities. | | | 0,7.00,0.0 |
| | Complete if the organization answered "Yes | s" on Form 990, Part IV. | , line 11e or 11f. See Fo | rm 990, Part X. |
| | line 25. | , - | , | , |
| 1. | (a) Description of liability | (b) Book value | | |
| | al income taxes | | | |
| | se Credit Card | 50,669 | | |
| | roll Labılities | 50,244 | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| _(7) | | | | |
| (8) | | | i. | |
| (0) | | i l | | |

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶ 100, 913

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

| Sche | edule D (Form 990) 2018 Sportsmen for Fish & Wildlif | e, Inc.87-05755 | 40 | Page 4 |
|------|--|-----------------------|------------|--------|
| Pi | art XI Reconciliation of Revenue per Audited Financial State | ments With Revenue pe | r Retu | rn. |
| | Complete if the organization answered "Yes" on Form 990 | , Part IV, line 12a. | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | |
| а | Net unrealized gains (losses) on investments | 2a | <u> </u> | |
| b | Donated services and use of facilities | 2b |] [| |
| C | Recoveries of prior year grants | 2c | 」 | |
| d | Other (Describe in Part XIII) | 2d | _ | |
| е | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | _ | |
| b | Other (Describe in Part XIII) | 4b |] [| |
| С | Add lines 4a and 4b | | 4c | |
| _5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | | 5 | |
| Pa | art XII Reconciliation of Expenses per Audited Financial State | • | per Re | turn. |
| | Complete if the organization answered "Yes" on Form 990 | , Part IV, line 12a | | |
| 1 | Total expenses and losses per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | 1 1 | |
| а | Donated services and use of facilities | 2a | _ | |
| þ | Prior year adjustments | 2b |] | |
| C | Other losses | 2c | 」 │ | |
| d | Other (Describe in Part XIII) | 2d | 1 1 | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | 1 | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a |] [| |
| b | Other (Describe in Part XIII) | 4b | ↓ | |
| С | Add lines 4a and 4b | | 4c | |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | | 5 | |

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part XIII Supplemental Information.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

Sportsmen for Fish & Wildlife, Inc.

Employer identification number 87-0575540

Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to X Yes No award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total of offices in employees, agents, and region (by type) (such as, a program service, expenditures for describe specific type of and investments fundraising, program services, the region independent investments, grants to recipients service(s) in the region in the region located in the region) in the region North America 8 Guided hunting tours Hunting tours 1,512,602 _(1) (2) (3) (4) (5) (6) (7) (8) _(9) (10)(11) (12)(13)(14)(15) (16)(17)2 8 1,512,602 3a Subtotal b Total from continuatio sheets to Part I c Totals (add lines 3a and 3b) 1,512,602

19473 11/15/2019

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Page 2 Schedule F (Form 990) 2018 (i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt cash disbursement (f) Manner of Schedule F (Form 990) 2018 Sportsmen for Fish & Wildlife, Inc.87-0575540 (e) Amount of cash grant by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of (c) Region Enter total number of other organizations or entities (b) IRS code section and EIN (if applicable) (a) Name of organization Part II (16) (13) (15) (10) (12) (14) (1) 2 3 (4) (2) ම (8) 6

19473 11/15/2019

| orm 990, Part IV, line | ance (h) Method of valuation (book, FMV, appraisal, other) | | | | | | | | | | |
|---|--|--|--|---|---|---|---|--|--|--|--|
| ered "Yes" on Fo | (g) Description of noncash assistance | | | | | | : | | | | |
| organization arisw | (f) Amount of noncash assistance | | | : | - | | | | | | |
| res. Complete ii the C | (e) Manner of cash disbursement | | | | | | | | | | |
| ie ine Onited Sta ½. | (d) Amount of cash grant | | | | | | | | | | |
| space is needed | (c) Number of recipients | | | | | | | | | | |
| d if additiona | (b) Region | | | | | _ | | | | | |
| Fart in Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. | (a) Type of grant or assistance | | | | | | | | | | |

Instructions for Form 5713, don't file with Form 990)

Schedule F (Form 990) 2018

X No

Yes

Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions

Part I, Line 3 - Activities per Region

Region

Expenditures Investments

North America

\$ 1,512,602 \$

0

Part V - Additional Information

Sportsmen for Habitat DBA Sportsmen for Fish & Wildlife owns 100% of Arctic Red River Outfitters, Ltd. (ARRO) a whole owned Canadian subsidiary. ARRO operates on a fiscal year ending October 31. All of the activity for the fiscal year ending October 31, 2018 is including in this tax filing. ARRO operates guided hunting tours in the Arctic Red River Region of Canada during the hunting season.

Sportsmen for Habitat DBA Sportsmen for Fish & Wildlife owns 100% of Full Curl Stone Outfitters (FCSO) a whole owned Canadian subsidiary. FCSO operates on a fiscal year ending December 31. All of the activity for the fiscal year ending December 31, 2018 is including in this tax filing.

SCHEDULE G (Form 990 or 990-EZ)

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

OMB No 1545-0047

| | ation number |
|---|---|
| Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events d In-person solicitations 2a 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? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iv) Gross receipts (v) Amount paid to (or retained by) fundraiser listed in col (i) Yes No | |
| Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply a | 540 |
| Indicate whether the organization raised funds through any of the following activities. Check all that apply a | /, line 17. |
| b Internet and email solicitations c Phone solicitations g Special fundraising events d In-person solicitations 2a 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? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of contributions? from activity from activity from activity from activity from activity from activity from activity from activity from activity cold (i) | <u> </u> |
| c Phone solicitations d In-person solicitations 2a 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? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iv) Gross receipts (v) Amount paid to (or retained by) fundraiser listed in coll full contributions? Yes No 1 | |
| d In-person solicitations 2a 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? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of co | |
| 2a 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? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of control of control of control of control to control undraiser listed in col (i) Yes No 1 | |
| or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of contributions? (iv) Gross receipts from activity fundraiser listed in col (i) Yes No | |
| compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (ii) Activity (iii) Did fundraiser have custody or control of c | Yes No |
| (ii) Name and address of individual or entity (fundraiser) (iii) Activity (iii) Activity (iv) Gross receipts (v) Amount paid to (or retained by) fundraiser listed in col (i) Yes No | be |
| Yes No | (vi) Amount paid to (or retained by) organization |
| | 1 |
| 2 | |
| | |
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| 4 | |
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| 9 | |
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| | |
| 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 | |

| Part | le G (Form 990 or 990-EZ | <u>2) 2018 Sportsme</u> Events. Complete if the | | for Fish & V | | | | |
|------|---|---|-----------------|---|---------------|---------------------------------------|-------------|--|
| rai | | of fundraising event co | | | | | | |
| | | greater than \$5,000 | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | <u>Co</u> | (b) Event #2 Banquets & | <u>Cam</u> | (c) Other events | _ | (d) Total events (add col (a) through |
| 1 | | (event type) | | (event type) | | (total number) | | col (c)) |
| 1 | Gross receipts | 1,608,0 | 038 | 1,18 | 9,997 | | - | 2,798,035 |
| | Less Contributions Gross income (line 1 minus line 2) | 1,608,0 | 038 | 1,18 | 9,997 | | | 2,798,035 |
| 4 | Cash prizes | | | | | | | |
| 5 | Noncash prizes | 140,4 | 418 | 88: | 2,148 | | | 1,022,566 |
| 6 | Rent/facility costs | | | | | · | | |
| 7 | Food and beverages | 5,5 | 583 | 11 | 4,444 | <u> </u> | \dashv | 120,027 |
| 8 | Entertainment | | _ | | 4,000 | | | 4,000 |
| 9 | Other direct expenses | 1,098,1 | 116 | 92 | 9,389 | <u> </u> | | 2,027,505 |
| 11 | Net income summary S | y Add lines 4 through 9 in cubtract line 10 from line 3, c | <u>column</u> | ı (d) | | | > | 3,174,098 -376,063 |
| Part | | plete if the organization | | swered "Yes" on f | Form 99 | 0, Part IV, line 19, | or re | eported more |
| | tnan \$ 15,000 | on Form 990-EZ, line | <u>оа.</u> | (b) Pull tabs/instar bingo/progressive bil | | (c) Other gaming | | (d) Total gaming (add col (a) through col (c)) |
| 1 | Gross revenue | | | | | | | |
| 2 | Cash prizes | | | | - | | - | |
| 3 | Noncash prizes | | | | | | _ | |
| 4 | Rent/facility costs | | | · · · · · · · · · · · · · · · · · · · | | | _ | |
| 5 | Other direct expenses | | _] | | | | | |
| 6 | Volunteer labor | Yes No | % | Yes No | % | Yes No | % | |
| 7 | Direct expense summary | Add lines 2 through 5 in c | olumn | (d) | | | • | |
| 8 | Net gaming income sum | mary Subtract line 7 from li | <u>ine 1, c</u> | column (d) | | | • | |
| a Is | | ne organization conducts ga to conduct gaming activities | _ | | | | | Yes No |
| | ere any of the organization Yes," explain: | n's gaming licenses revoked | d, susp | ended, or terminated o | during the | tax year? | | Yes No |

| Sche | edyle G (Form 990 or 990-EZ) 2018 Sportsmen for Fish & Wildlife, Inc.87-05 | 75540 Page 3 |
|------|--|-----------------------|
| 11 | Does the organization conduct gaming activities with nonmembers? | Yes No |
| 12 | Is 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 | 11 |
| 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 | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | ☐ Yes ☐ No |
| b | If "Yes," enter the amount of gaming revenue received by the organization \$\infty\$ and the | |
| | amount of gaming revenue retained by the third party ▶\$ | |
| С | 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 | |
| | 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 Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional | |
| | See instructions. | |
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| | Schedule G (For | m 990 or 990-EZ) 2018 |

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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

8 ⊠ Employer identification number Yes 87-0575540 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Sportsmen for Fish & Wildlife, General Information on Grants and Assistance Name of the organization Part I

| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States | monitoring the use | of grant fur | ds in the United Stat | es | | | |
|---|--------------------|-----------------|---------------------------|--------------------|-------------------------|--------------------|---------------------------|
| Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990 | Domestic Orga | nization | s and Domestic | Governments. | Complete if the | organization | answered "Yes" on Form 98 |
| Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. | at received mo | re than \$ | 5,000. Part <u>II</u> can | be duplicated if | additional spac | ce is needed. | |
| 1 (a) Name and address of organization | (p) EIN | (c) IRC | (d) Amount of cash | (e) Amount of non- | (f) Method of valuation | (g) Description of | (h) Purpose of grant |
| or government | | (if applicable) | grant | cash assistance | (book, r-Mv, appraisal, | _ | or assistance |
| (1) Big Game Forever | _ | | | | | | |
| 4331 S Hidden Hollow Drive | | • | | | | | Wolf/Cape Buffalo |
| Bountiful UT 84040 | 27-2342792 | (c) (4) | 25,000 | | N/A | N/A | • |
| (2) 4 Mile Hunting Club | | | | | | | |
| PO Box 242 | | | | | | | Pheasant Study Uinta |
| Nephi UT 84648 | | | 12,200 | | | | 1 |
| (3) Congressional Sportsmen Foundation | up | | | | | | |
| 110 North Carolina Avenue, SE | | | | | | | Expo Funds Project |
| Washington DC 20003 | | | 57,000 | | | | 1 |
| (4) Stone Sheep Hunts | | | | | | | |
| | | | 0 | | | - | |
| | | | 10,000 | | | | |
| (5) | | | | | | | |
| | | | | | | | ! |
| (9) | | | | | | | |

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3

8

6

Enter total number of other organizations listed in the line 1 table

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

Schedule i (Form 990) (2018)

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| , | ٠ | 7 | 1 | |

| | FMV, appraisal, other) | noncash assistance | cash grant | recipients | |
|--|--------------------------------|---------------------|----------------------------|-----------------------|--|
| (e) Method of valuation (book, (f) Description of noncash assistan | (e) Method of valuation (book, | (d) Amount of | (c) Amount of | (b) Number of | (a) Type of grant or assistance |
| | | | ed. | itional space is need | Part III can be duplicated if additional space is needed. |
| Part IV, line 22. | wered "Yes" on Form 990, | he organization ans | duals. Complete if t | to Domestic Individ | Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. |
| Pag | | 7-0575540 | & Wildlife, Inc.87-0575540 | | Schedule I (Form 990) (2018) Sportsmen tor Fish |

19473 11/15/2019

|) | (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (e) Method of valuation (book, (f) Description of noncash assistance FMV, appraisal, other) |
|---------|---|--------------------------|--------------------------|----------------------------------|---|---|
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| 7 | | | | | | |
| Part IV | Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information. | vide the information | required in Part I, Ii | ne 2, Part III, colum | n (b); and any other addi | ional information. |

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Sportsmen for Fish & Wildlife, Inc.

Employer identification number 87-0575540

Form 990 - Organization's Mission

Promote the protection and enhancement of wildlife habitat, assistance in providing quality wildlife management programs. Educating the public about the role hunters play in wildlife conservation and perpetuating the family tradition of hunting and fishing.

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents The organization changed its name to: Sportsmen for Fish & Wildlife, Inc.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 All voting fiduciaries review the 990 prior to it being filed.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
The board reviews all compensation amounts for all fiduciaries. The amounts
paid are set according to relevant industry standards for comparable
positions. The amounts are reasonable and comparable to other organization.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Again the board reviews all compensation of all positions. The amounts for all positions are reasonable in amount for similar positions for other similar organizations.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The organization will provide any documents which are subject to the public disclosure rules once it receives a request.

| Schedule O (Form 990 or 990-EZ) (2018) | | Page Z |
|--|-----|--------------------------------|
| Name of the organization | | Employer identification number |
| Sportsmen for Fish & Wildlife, | Inc | 87-0575540 |

Form 990, Part IX, Line 11g - Other Fees for Services Description

| | Tot/E | Prog Service | Mgt | & General | Fund | raising |
|-------------|--------|--------------|-----|-----------|------|---------|
| Consulting | | | | | | |
| | \$ | 461,535 | \$ | 131,867 | \$ | 65,934 |
| Contract La | bor | | • | | | |
| | \$ | 68,828 | \$ | 0 | \$ | 0 |
| Professiona | l Cons | sulting | | | | |
| | \$ | 6,189 | \$ | 0 | \$ | 0 |
| Т | otal | | | | | |
| | \$ | 536,552 | \$ | 131,867 | \$ | 65,934 |

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Sportsmen for Fish & Wildlife,

Open to Public OMB No 1545-0047 2018

▶ Attach to Form 990.

Related Organizations and Unrelated Partnerships

Inspection Employer identification number 87-0575540

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

(f) Direct controlling entity N/A N/A 801,468 1,394,684 (e) End-of-year assets Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. -171,363 135,351 (d) Total income Legal domicile (state or foreign country) ΥŢ BC (b) Primary activity 114210 114210 ForeignUS ForeignUS (a)Name, address, and EIN (if applicable) of disregarded entity Arctic Red River Outfitters, Ltd Full Curl Stone Outfitters, Ltd CA Hudsons Hope Whitehorse Box 329 PO Box Part

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(5)

Section 512(b)(13) controlled entity? Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. (f)
Direct controlling
entity (e)
Public charity status
(if section 501(c)(3)) (d) Exempt Code section (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of related organization Part II $\widehat{\Xi}$

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

Schedule R (Form 990) 2018

19473 11/15/2019

Schedule R (Form 990) 2018 Sportsmen for Fish & Wildlife, Inc.87-0575540

Transactions With Related Organizations. Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Page 3

| Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | | ¥. | Yes No | 0 |
|---|---------------------------|-------------------------|---------------------------------------|--------------|----------|------|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | elated organizations lis | sted in Parts II-IV? | | | _ | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | | 1a | X | |
| b Gift, grant, or capital contribution to related organization(s) | | | | 1 b | × | ١. ا |
| c Gift, grant, or capital contribution from related organization(s) | | | | 10 | × | |
| d Loans or loan guarantees to or for related organization(s) | | | | 1d | X |] |
| e Loans or loan guarantees by related organization(s) | | | | 1e | × | [_] |
| f Dividends from related organization(s) | | | | ¥ | <u>~</u> | |
| | | | | = ; | ;; | Ι. |
| | | | | D D | <u> </u> | .1. |
| h Purchase of assets from related organization(s) | | | | 두 | × | ال |
| i Exchange of assets with related organization(s) | | | | ;= | × | ا۔ |
| j Lease of facilities, equipment, or other assets to related organization(s) | | | | ÷ | × | ال |
| k Lease of facilities, equipment, or other assets from related organization(s) | | | | + | <u>×</u> | |
| Performance of services or membership or fundraising solicitations for related organization(s) | | | | = | × | ١., |
| m Performance of services or membership or fundraising solicitations by related organization(s) | | | | 1m | × | ارا |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | 1 | × | ارا |
| o Sharing of paid employees with related organization(s) | | | | 19 | × | ١., |
| | | | | | | |
| p Reimbursement paid to related organization(s) for expenses | | | | 1p | × | |
| q Reimbursement paid by related organization(s) for expenses | | | | 5 | × | ال |
| r Other transfer of cash or property to related organization(s) | | | | + | × | |
| s Other transfer of cash or property from related organization(s) | | | | 1s | × | |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | is line, including cover | ed relationships and tr | ansaction thresholds | | İ | 1 |
| (a) | (q) | (2) | (p) | | | |
| Name of related organization | Transaction lype (a–s) | Amount involved | Method of determining amount involved | unt involved | | 1 |
| (1) | | | | | | . |
| (2) | | | | | | 1 |
| (3) | | | | | | - 1 |
| (4) | | | | | | 1 |
| (5) | | | | | | 1 |
| | | | | | | |

9

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 Sportsmen for Fish & Wildlife, Inc.87-0575540

19473 11/15/2019

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Schedule R (Form 990) 2018 Sportsmen for Fish & Wildlife, Inc.87-0575540

Part VII Supplemental Information.
Provide additional information for responses to questions on Schedule R. See Instructions.

Page 5