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CLIENT'S COPY





October 7, 2024

Jennifer Meyer, Chief Operations Officer The Wild Foundation 717 Poplar Ave. Boulder, CO 80304

Dear Jenn:

Enclosed are the original and one copy of the 2023 Exempt Organization return, as follows...

2023 Form 990

We prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Very truly yours,

BROCK AND COMPANY, CPAs, P.C.

# TAX RETURN FILING INSTRUCTIONS

**FORM 990** 

### FOR THE YEAR ENDING

December 31, 2023

### **Prepared For:**

Jennifer Meyer, Chief Operations Officer The Wild Foundation 717 Poplar Ave. Boulder, CO 80304

### Prepared By:

Brock and Company, CPAs, P.C. 4940 Pearl East Cr., Suite 300 Boulder, CO 80301

### Amount Due or Refund:

Not applicable

### Make Check Payable To:

Not applicable

### Mail Tax Return and Check (if applicable) To:

Not applicable

### Return Must be Mailed On or Before:

Not applicable

### **Special Instructions:**

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

FEDERAL INFORMATIONAL FORMS

Form 8879-TE		IRS E-file Signatu for a Tax Exe	re Authorizatio	n	OMB No. 1545-0047
Form <b>OOTO</b> IL		3, or fiscal year beginning			0000
Dependences of the Transien	,, ,, ,	Do not send to the IRS. I		,	2023
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form88791	E for the latest information		
		LDERNESS LEADERS	HIP	EIN or SS	
	TION, INC			**_*	**9749
Name and title of officer or pe	erson subject to tax				
Part I Type of	Roturn and Ro	CHIEF OPERATIONS turn Information	5 OFFICER		
		e using this Form 8879-TE and er	tor the applicable amount	if any from the rate	
Form 5330 filers may ente or <b>10a</b> below, and the amo	r dollars and cents ount on that line for	For all other forms, enter whole the return being filed with this fo D-). But, if you entered -0- on the r	dollars only. If you check th orm was blank, then leave lir	e box on line 1a, 2a ne 1b, 2b, 3b, 4b, 5	a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, b, 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check h	nere X	b Total revenue, if any (Form	990, Part VIII, column (A),	line 12)	нь 6,729,565.
2a Form 990-EZ che	eck here	b Total revenue, if any (Form			
3a Form 1120-POL	check here	b Total tax (Form 1120-POL,	line 22)		3b
4a Form 990-PF che		b Tax based on investment			
5a Form 8868 check		b Balance due (Form 8868, I			
6a Form 990-T chec		<b>b</b> Total tax (Form 990-T, Parl			
7a Form 4720 check		<b>b</b> Total tax (Form 4720, Part			
8a         Form 5227 check           9a         Form 5330 check		<ul> <li>b FMV of assets at end of ta</li> <li>b Tax due (Form 5330, Part I</li> </ul>			
10a Form 8038-CP ch		b Amount of credit payment			
		ture Authorization of Official	cer or Person Subjec	t to Tax	100
Under penalties of perjury,	, I declare that X	] I am an officer of the above ent	ity or 🔲 I am a person si	ubject to tax with res	spect to (name
entry to the financial institu financial institution to debi later than 2 business days payment of taxes to receiv	ution account indic it the entry to this a prior to the payme ve confidential infor	S. Treasury and its designated Fi ated in the tax preparation softw. ccount. To revoke a payment, I n nt (settlement) date. I also author mation necessary to answer inqu gnature for the electronic return a	are for payment of the feder nust contact the U.S. Treas rize the financial institutions iries and resolve issues rela	ral taxes owed on thi ury Financial Agent a involved in the proc ated to the payment.	is return, and the at 1-888-353-4537 no sessing of the electronic I have selected a
	OCK AND CO	OMPANY, CPAS, P.C	•	to enter my	PIN 80304
		ERO firm name			Enter five numbers, but
with a state age on the return's c As an officer or return. If I have i	ncy(ies) regulating disclosure consent person subject to t indicated within thi	23 electronically filed return. If I h charities as part of the IRS Fed/S screen. ax with respect to the entity, I wil s return that a copy of the return my PIN on the return's disclosure	tate program, I also authori I enter my PIN as my signat is being filed with a state ag	ze the aforemention	ed ERO to enter my PIN 2023 electronically filed
	-			Da	to
Signature of officer or person subject Part III Certification	ition and Autho	entication		Da	16
ERO's EFIN/PIN. Enter yo	our six-digit electro	nic filing identification			
number (EFIN) followed by	-	-	844332 Do not ente		
		N, which is my signature on the requirements of <b>Pub. 4163,</b> Mod			
ERO's signature			Date		
				-	
		ERO Must Retain This Fo ubmit This Form to the IF			

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

Form **8879-TE** (2023)

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

FILEABLE FORMS

Form <b>8868</b>
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(Rev. January 2024)

Department of the Treasury Internal Revenue Service

### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

### File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

must use	Form 7004 to request an extension of time to file incom-	e tax retur	ns.				
<u>Part I - Ic</u>	lentification						
Type or Print	INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.			Taxpayer	axpayer identification number (TIN) **-**9749		
File by the due date for filing your return. See	e date for Number, street, and room or suite no. If a P.O. box, see instructions.						
instructions.	City, town or post office, state, and ZIP code. For a for BOULDER, CO 80304	oreign add	ress, see instructions.				
Enter the	Return Code for the return that this application is for (file	e a separa	te application for each return)				
Applicati	on Is For	Return Code	Application Is For			Return Code	
Form 990	or Form 990-EZ	01	Form 4720 (other than individual)			09	
	0 (individual)	03	Form 5227			10	
Form 990		04	Form 6069			11	
	-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12	
	-T (trust other than above)	06	Form 5330 (individual)			13	
	-T (corporation)	07	Form 5330 (other than individual)			14	
Form 104		08					
Pla Pla <u>Pla</u> <b>Part II - Ai</b> The bo Teleph	pplication is for an extension of time to file Form 5330, y n Name	izations (s - BOUI	DER, CO 80304	RE	) <u>S</u>		
	organization does not have an office or place of business is for a Group Return, enter the organization's four-digit (						
box	. If it is for part of the group, check this box				•		
	quest an automatic 6-month extension of time until N						
	organization named above. The extension is for the orga				ipt organizati	on return for	
Х	calendar year 20 23 or						
	] tax year beginning	, 20	, and ending			, 20	
2 If th	he tax year entered in line 1 is for less than 12 months, cl	heck reaso	on: Initial return	Final retur	n		
	Change in accounting period						
	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less		¢	0	
	nonrefundable credits. See instructions.	4	for a declar to a second to the second	3a	\$	0.	
	nis application is for Forms 990-PF, 990-T, 4720, or 6069				•	0	
	mated tax payments made. Include any prior year overp			3b	\$	0.	
	ance due. Subtract line 3b from line 3a. Include your pa	•			•	0	
usir	ng EFTPS (Electronic Federal Tax Payment System). See	e instructio	ins.	3c	\$	0.	

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

EXTENDED TO NOVEMBER 15, 2024	
Return of Organization Exempt From Income Tax	OME

Under 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.

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

**99**0

Department of the Treasury Internal Revenue Service

Form

8 No. 1545-0047 **Open to Public** Inspection

AF	or th	e 2023 calendar year, or tax year beginning and	ending		
Вс	heck if	C Name of organization		D Employer identific	cation number
a	oplicab	INTERNATIONAL WILDERNESS LEADERSHIP			
	Addre	FOUNDATION, INC.			
	Name	Doing business as THE WILD FOUNDATION		**-***974	49
	Initial return		Room/suite	E Telephone number	
	 Final return	717 DODLAR AVE		303-442-8	
	termir			G Gross receipts \$	6,790,603.
	Amen			H(a) Is this a group re	
				for subordinates	
	pendi	<sup>ng</sup> SAME AS C ABOVE		H(b) Are all subordinates in	
I T	ax-ex	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1)	or 527	1 • •	list. See instructions
	Vebsi			H(c) Group exemption	
		f organization: X Corporation Trust Association Other	L Year		State of legal domicile: NY
	rt I	Summary			
	1	Briefly describe the organization's mission or most significant activities: THE	WILD F	OUNDATION WO	DRKS
ce	-	INTERNATIONALLY TO PROTECT AND SUSTAIN WI			
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos			
ver	3			3	11
g	4	Number of independent voting members of the governing body (Part VI, line 1b)			11
8	-	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			6
ties		Total number of volunteers (estimate if necessary)			0
tivi		Total unrelated business revenue from Part VIII, column (C), line 12			0.
A		Net unrelated business texcilite income from Form 990-T, Part I, line 11		·····	0.
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		5,818,381.	6,718,182.
anı	9	Program service revenue (Part VIII, line 2g)		26,060.	27,567.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,943.	9,025.
Re	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-37,227.	-25,209.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,817,157.	6,729,565.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		4,285,889.	3,762,229.
	.e	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		408,550.	479,351.
ses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 73, 93	35.	••	••
EX		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,204,261.	1,209,860.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,898,700.	5,451,440.
	19	Revenue less expenses. Subtract line 18 from line 12		-81,543.	1,278,125.
or	15			ginning of Current Year	End of Year
ets c	20	Total assets (Part X, line 16)		4,982,905.	6,078,197.
Assets of Balanc		Total liabilities (Part X, line 16)		342,767.	150,561.
Vet , und		Net assets or fund balances. Subtract line 21 from line 20		4,640,138.	5,927,636.
Pa	rt II	Signature Block		-,,,,,,,,,,	5,527,050.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date			
Here	JENNIFER MEYER, CHIEF OPE	RATIONS OFFICER					
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date				
Paid	KELSIE BOYLE, CPA			self-employed P01833050			
Preparer	Firm's name BROCK AND COMPANY	, CPAS, P.C.		Firm's EIN **-**0288			
Use Only	se Only Firm's address 4940 PEARL EAST CR., SUITE 300						
	BOULDER, CO 80301			Phone no. 303-444-2971			
May the IRS discuss this return with the preparer shown above? See instructions							
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)						

	INTERNATIONAL WILDERNESS LEADERSHIP
	990 (2023) FOUNDATION, INC. **-**9749 Page 2
Par	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROTECT WILDERNESS WHILE MEETING THE NEEDS OF HUMAN COMMUNITIES,
	WORKING ACROSS CULTURES AND BOUNDARIES BY COLLABORATING WITH LOCAL
	PEOPLES, ORGANIZATIONS, THE PRIVATE SECTOR, AND GOVERNMENTS TO CREATE
	DYNAMIC PRACTICAL PROJECTS AND COMMUNICATION INITIATIVES.
2	Did the organization undertake any significant program services during the year which were not listed on the
-	
	prior Form 990 or 990-EZ?
•	, ,
3	
-	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$3,477,792. including grants of \$2,235,040. ) (Revenue \$27,567. )
	NATURE NEEDS HALF: PROMOTING THE UNDERSTANDING AND PROTECTION OF
	WILDERNESS AND WILDLIFE THROUGHOUT THE WORLD; INCREASING PUBLIC
	AWARENESS THAT NATURE AND PEOPLE NEED TO SHARE THE EARTH EQUALLY.
4b	
	LOCATION SPECIFIC PROJECTS IN AFRICA, NORTH AMERICA, ASIA, SOUTH
	AMERICA, AND EUROPE THAT HELP PROTECT AND INTEGRATE WILDERNESS AND
	WILDLIFE WITH HUMAN COMMUNITIES.
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 5,004,980.
-+0	

**-***9749	Page 3
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	990 (2023) FOUNDATION, INC. **_***	749	Р	age <b>3</b>
Par	t 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," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		x
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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	Ť		
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	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		X X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	Х	

Form	990 (2023) FOUNDATION, INC. **-**9	749	Р	age 2
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
ام	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
258	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		23
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule 0           t V         Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V		 I -	
			Yes	No
-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 29			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b>			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	Х	

332004 12-21-23

orm	990	(2023)

**-**9749 р	<sub>age</sub> 5
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Form	<u>990 (</u> 2023) FOUNDATION, INC. **-**9	749	Р	<sub>age</sub> 5
Par				
			Yes	No
2a	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 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	Зb		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign countryMALI			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a			
		-		
		1		
11	Section 501(c)(12) organizations. Enter:         Gross income from members or shareholders         11a			
	Gross income from other sources. (Do not net amounts due or paid to other sources against	1		
U				
1 <b>2</b> a	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	100		
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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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		x
	If "Yes," see the 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.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

# INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.

\*\*-\*\*\*9749

\*9749 Page 6

X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

					Yes	No	
19	Enter the number of voting members of the governing body at the end of the tax year	1a	11		165		
10	If there are material differences in voting rights among members of the governing body, or if the governing			-			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.						
h	Enter the number of voting members included on line 1a, above, who are independent	1b	11				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	<u> </u>		-			
-	officer director tructor or low employee	, man a	ly other	2		x	
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision	-			
Ŭ			eapornoion	3		x	
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		x	
6	Did the organization have members or stockholders?			6		x	
7a							
	more members of the governing body?			7a		x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			<u> </u>			
	persons other than the governing body?			7b		x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
	The governing body?	-	-	8a	х		
	Each committee with authority to act on behalf of the governing body?			8b	Х		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea						
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		x	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue (	ode.)				
			,		Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?			10a		X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters,	affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ before	filing the form?	11a	X		
b	<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	′es," de	scribe				
	on Schedule O how this was done			12c	X		
13	Did the organization have a written whistleblower policy?			13	X		
14	Did the organization have a written document retention and destruction policy?			14	X		
15	Did the process for determining compensation of the following persons include a review and approva	l by ind	ependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				v		
	The organization's CEO, Executive Director, or top management official			15a	X		
b	Other officers or key employees of the organization			15b	X		
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	oont:+	h a				
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger taxable optituduring the year?			160		x	
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			<u>16a</u>		- 23	
U	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		•				
	exempt status with respect to such arrangements?			16b			
Sec	tion C. Disclosure			1.00	1	1	
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ai	nd 990-1	(section 501(c)(3)	s onlv)	availal	ble	
	for public inspection. Indicate how you made these available. Check all that apply.						
	X       Own website       X       Another's website       X       Upon request       Other (explain	on Sch	edule ()				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	d finan	cial		
	statements available to the public during the tax year.		,, u				

20	State t	he name, add	ress, and tel	ephone number o	of the per	son who pos	sesses the o	rganization's	books and	records
	THE	ORGANIZ	ZATION	- 303-44	2-882	11		-		
	717	POPLAR	AVE.,	BOULDER,	CO	80304				

Form 990 (2023)

INTERNATION	AL WILDERNESS	LEADERSHIP
FOUNDATION.	INC.	

Form 990 (	2023)	FOUNDAT:	ION, II	NC.			**_
Part VII	Compensation	of Officers,	Director	s, Trustees,	, Key Employees,	Highest	Compensated
	Fmplovees an	d Independe	ent Contr	actors			

### 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unles	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	id a d	Irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con	_	1099-1120)		organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JOEL HOLTROP	2.00									
CHAIR		х		х				0.	Ο.	0.
(2) CLAY STRANGER	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(3) EDWARD SANDERS	2.00									
TREASURER		Х		Х				0.	0.	0.
(4) LINDSAY ELLIS	2.00									
CO-SECRETARY		Х		Х				0.	0.	0.
(5) SWATI HINGORANI	2.00									
CO-SECRETARY		Х		Х				0.	0.	0.
(6) DAVID BARRON	1.00									
DIRECTOR		Х						0.	0.	0.
(7) CHARLOTTE BARON	1.00									
DIRECTOR		х						0.	0.	0.
(8) LENA GEORGAS	1.00									-
DIRECTOR		х						0.	0.	0.
(9) KAT HABER	1.00									-
DIRECTOR		Х						0.	0.	0.
(10) JOHNATHAN MILLER	1.00									_
DIRECTOR		х						0.	0.	0.
(11) KEITH SPROULE	1.00									-
DIRECTOR		х						0.	0.	0.
(12) AMY LEWIS	40.00									_
CEO				Х				119,875.	0.	0.
(13) JENNIFER MEYER	40.00									_
<u> </u>				Х				119,167.	0.	0.
						-				

			ER	NE	SS	L	EZ	ADERSHIP	**_**	**0"	740		
Form 990 (2023) FOUNDATIO					J LI:	~h ~ ~	+ 0			9	49	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus (A) Name and title	<b>(B)</b> Average hours per	(do box	not c , unle	(C Pos heck i ss per	C) ition <sup>more</sup> rson i	<b>)</b> than o s both	one n an	(D) (D) Reportable compensation	s (continued) (E) Reportable compensatio	n		(F) timate	
	week (list any hours for related organizations below line)	beek     officer and a director/trustee)     from     from       any     integration     integration     the     organization       rs for     integration     integration     (W-2/1099-MISC/     10       atted     integration     integration     10099-NEC/     10       low     integration     integration     integration     integration			from related organizations (W-2/1099-MIS 1099-NEC)	ations 0-MISC/		other pensation the anization relate nization	e ion ed				
		-											
		-											
										_			
		-											
1b Subtotal								239,042.		0.			0.
c       Total from continuation sheets to Part VI         d       Total (add lines 1b and 1c)         2       Total number of individuals (including but n	<u></u>	<u></u>						0 • 239 , 042 • eceived more than \$100,	000 of reportable	0.			0.
compensation from the organization											Г	Yes	2 No
<b>3</b> Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s			•		-				•	ſ	3		X
<ul> <li>For any individual listed on line 1a, is the su and related organizations greater than \$150</li> </ul>	im of reportabl	e co	mpe	ensa	tion	and	otł	ner compensation from t	he organization		4		х
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," corr	accrue comper	nsati	on fi	rom	any	unre	elate	ed organization or individ	dual for services		5		х
Section B. Independent Contractors 1 Complete this table for your five highest co	mpensated inc	lepe	nde	nt co	ontra	acto	rs th	hat received more than \$	100,000 of comp	ensat	ion fro	m	
the organization. Report compensation for (A)					ith c	or wi	thir	(B)			(C		
Name and business	address	NC	ONE	3				Description of s	ervices	C	omper	nsatior	<u>ו</u>
2 Total number of independent contractors (ii	ncludina but n	ot lin	niter	d to t	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	•			-	(			,					

INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.

Form	1 99(	) (2	2023) FOUNDATION, I	NC.			**_***9	749 Page 9
Pa	rt V	111	Statement of Revenue					
			Check if Schedule O contains a response	or note to anv lin	e in this Part VIII			
					(A) Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(0, (0	4	_	Federated campaigns 1a					
, Grants mounts	'				-			
Dor:					-			
fts,					-			
Gif			Related organizations 1d	000,000.				
ns, Sim				000,000.				
utio er (		t	All other contributions, gifts, grants, and	710 100				
Contributions, Gifts, and Other Similar Ar				718,182.				
ont		-	Noncash contributions included in lines 1a-1f		6,718,182.			
<u>a</u> C		n	Total. Add lines 1a-1f		0,/10,102.			
				Business Code	16 407	16 407		
ice	2		SUBSCRIPTIONS	900099 561000	16,427. 11,140.	<u>16,427.</u> 11,140.		
erv		b	CCA AND MANAGEMENT FEE	201000	11,140.	11,140.		
n S 'eni		С						
Program Service Revenue		d						
rog		е						
٩		f	All other program service revenue					
		g	Total. Add lines 2a-2f		27,567.			
	3		Investment income (including dividends, intere		70 062			70 062
			other similar amounts)		70,063.			70,063.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
			(i) Real	(ii) Personal				
	6		Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory <b>7a</b>					
		b	Less: cost or other basis	<b>C1</b> 0.20				
anu			and sales expenses 7b	61,038.				
evenue			Gain or (loss) 7c	-61,038.	61 020	<u> </u>		
Å			Net gain or (loss)	1	-61,038.	-61,038.		
Other Re	8	а	Gross income from fundraising events (not including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a					
		b	Less: direct expenses 8b					
		с	Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
		b	Less: direct expenses 9b					
		с	Net income or (loss) from gaming activities	<u>.</u>				
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10k					
			Net income or (loss) from sales of inventory					
				Business Code				
Miscellaneous Revenue	11	а	FOREIGN CURRENCY TRANS	525990	-25,209.	-25,209.		
ane		b						
eve:		с						
Alisc B.		d	All other revenue					
2			Total. Add lines 11a-11d		-25,209.			
			Total revenue See instructions		6.729.565.	-58,680.	0.	70,063.

# INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.

 Form 990 (2023)
 FOUNDATION, INC.

 Part IX
 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	se or note to any line in t	his Part IX	, , , , , , , , , , , , , , , , , , , ,	X
Doi	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		
	and domestic governments. See Part IV, line 21	2,205,858.	2,205,858.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	29,183.	29,183.		
3	Grants and other assistance to foreign	,			
_	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,527,188.	1,527,188.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
J	trustees, and key employees	239,042.	133,217.	88,771.	17,054.
6	Compensation not included above to disqualified	20070120	10072170		1//0010
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7		176,760.	98,508.	65,642.	12,610.
7	Other salaries and wages	170,700.	50,500.	05,042.	12,010.
8	Pension plan accruals and contributions (include	12,142.		12,142.	
~	section 401(k) and 403(b) employer contributions)	13,811.		13,811.	,
9	Other employee benefits	37,596.	18,266.	17,044.	2,286.
10	Payroll taxes	57,590.	10,200.	1/,044•	2,200.
11	Fees for services (nonemployees):				
	Management				
b	Legal	70 242	41 520	20 011	
	Accounting	72,343.	41,532.	30,811.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g		004 050	<b>F10 00F</b>		01 11 6
	column (A), amount, list line 11g expenses on Sch 0.)	804,950.	710,225.	73,009.	21,716.
12	Advertising and promotion	26,923.	8,361.	2,633.	15,929.
13	Office expenses	112,886.	102,136.	9,361.	1,389.
14	Information technology	8,311.	650.	7,661.	
15	Royalties				
16	Occupancy	1,794.		1,794.	
17	Travel	78,305.	73,034.	5,271.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,146.	5,146.		
20	Interest	2,864.		2,864.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	25,681.	7,034.	18,647.	
23	Insurance	7,262.	500.	6,762.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	DUES AND SUBSCRIPTIONS	32,505.	17,429.	14,281.	795.
b	BAD DEBT EXPENSE	20,000.	20,000.		
с	EDUCATION AND OUTREACH	6,371.	6,371.		
d	PRINTING AND PUBLICATIO	2,494.	273.	65.	2,156.
е	All other expenses	2,025.	69.	1,956.	
25	Total functional expenses. Add lines 1 through 24e	5,451,440.	5,004,980.	372,525.	73,935.
26	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)				
22201	) 12-21-23				Form <b>990</b> (2023)

### INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.

	990 (2			**_	***9749 Page 11
Par	tΧ	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
	-	Oralis and interaction	1,854,098.		1,377,553.
	1	Cash - non-interest-bearing	553,666.		749,272.
	2	Savings and temporary cash investments	663,440.		2,421,381.
	3	Pledges and grants receivable, net	005,440.		2,421,301.
	4	Accounts receivable, net		4	
	5	•			
		trustee, key employee, creator or founder, substantial contributor, or 35%		E	
	6	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		6	
	-	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6 7	
ets	7	Notes and loans receivable, net		8	
Assets	8	Inventories for sale or use	5,858.		37,111.
`	9 10-	Prepaid expenses and deferred charges	5,050.	9	57,111.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 777, 496.			
	<b>L</b>		591,353.	10c	490,466.
		······································	1,178,400.	11	1,002,414.
	11 12	Investments - publicly traded securities	136,090.		0.
			130,050.		
	13	Investments - program-related. See Part IV, line 11		13 14	
	14 15	Intangible assets			
	15 16	Other assets. See Part IV, line 11	4,982,905.	15 16	6,078,197.
	17	Total assets. Add lines 1 through 15 (must equal line 33)           Accounts payable and accrued expenses	51,581.		62,267.
	18		51,501.	18	02,207.
	19	Grants payable Deferred revenue	50,000.		
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
bili		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	105,096.		88,294.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	136,090.	25	0.
	26	Total liabilities. Add lines 17 through 25	342,767.		150,561.
		Organizations that follow FASB ASC 958, check here			
ses		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	1,792,569.	27	1,471,641.
Bal	28	Net assets with donor restrictions	2,847,569.	28	4,455,995.
pu		Organizations that do not follow FASB ASC 958, check here			
μ		and complete lines 29 through 33.			
s or	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	4,640,138.		5,927,636.
_	33	Total liabilities and net assets/fund balances	4,982,905.	33	6,078,197. Form <b>990</b> (2023

Form 990 (2023)

INTERNATIONA	L WILDERNESS	LEADERSHIP
FOINDATION	TNC	

-	INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.	**_**	0710	_	10
	rt XI Reconciliation of Net Assets		9749	Pag	<sub>ge</sub> 12
. u	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	6,729	),5	65.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,451	.,4	40.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,278	3,1	25.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,640	),1	38.
5	Net unrealized gains (losses) on investments	5			73.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	5,927	7,6	36.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	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?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		

Form 990 (2023)

SCHEDULE A			<b>Dublic Cha</b>	rity Status an	d Duk	slia Qu	unnort		OMB No. 1545-0047
(Form 990)			Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section						2023
		0.	• •	47(a)(1) nonexempt cha					2020
	nt of the Treasury evenue Service			ttach to Form 990 or Fo Form990 for instructior			ormation		Open to Public Inspection
Name o	of the organization			WILDERNESS LI			ormation.	Employer	identification number
	U U		DATION, IN						*-***9749
Part I	Reason 1	or Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The orga	anization is not a	private found	lation because it is: (I	For lines 1 through 12, cl	heck only	one box.)			
1	A church, cor	vention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).		
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	-	-		anization described in se			-		
4		-	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
-	city, and state		ar the henefit of a cal	llaga ar university overad			verementel	ait describe	
5				llege or university owned	or operat	ed by a go	overnmental u	nit describe	a in
6	-		Complete Part II.) vernment or governm	nental unit described in a	section 17	70(h)(1)(A)	(v)		
7 X		· -	-	ntial part of its support fr				ne deneral r	ublic described in
	•		complete Part II.)		on a gore			ie general j	
8	<b>-</b>			(1)(A)(vi). (Complete Parl	t II.)				
9	An agricultura	al research org	ganization described	in section 170(b)(1)(A)(i	i <b>x)</b> operate	ed in conju	inction with a	land-grant	college
	or university o	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or
_	university:								
10				than 33 1/3% of its supp					
				t to certain exceptions; a					-
			mplete Part III.)	(less section 511 tax) fro	m busines	ses acqui	rea by the org	anization a	iller Julie 30, 1975.
11	-			vely to test for public sat	etv See	section 5(	)9(a)(4).		
12		-	-	vely for the benefit of, to	•			rrv out the	purposes of one or
	-	-	-	d in section 509(a)(1) o				•	
	lines 12a thro	ugh 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and	12g.	
a	Type I. A si	upporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		0	., .	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting
. г	~		complete Part IV, Se						
b L			-	or controlled in connect			-		-
		-	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntroi or manag	ge the supp	orted
c	Ŭ	( )	• •	g organization operated	in connect	tion with	and functional	lv integrate	d with
		-		). You must complete F		,		ly integrate	
d [		•	.,.	porting organization oper				ted organiz	zation(s)
	that is not f	unctionally int	tegrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	an attentiv	veness
_	requiremen	t (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .		
e	Check this	box if the orga	anization received a v	written determination from	m the IRS	that it is a	Туре I, Туре	II, Type III	
	•	-	• •	nally integrated supportir	ng organiz	ation.			[]
	nter the number of the following the second s		0	d arganization(a)					
<b>g</b> Pi	(i) Name of supp		n about the supporte (ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monetary	(vi) Amount of other
	organization			(described on lines 1-10 above (see instructions))	in your governi <b>Yes</b>	No	support (see ir	structions)	support (see instructions)
									<u> </u>
Total									<u> </u>

# Schedule A (Form 990) 2023 FOUNDATION , INC. \*\*-\*\*9 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(v)
(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	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	4393355.	5069595.	5607750.	5818381.	6718182.	27607263.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	4393355.	5069595.	5607750.	5818381.	6718182.	27607263.	
5	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,							
							7100150	
-	column (f)						7488458.	
	Public support. Subtract line 5 from line 4.						20118805.	
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
7	Amounts from line 4	4393355.	5069595.	5607750.	5818381.	6718182.	27607263.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources $\dots$	50,164.	33,006.	18,241.	9,943.	70,063.	181,417.	
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.)	15,227.	144,733.	385,285.	-37,227.	-25,209.	482,809.	
11	Total support. Add lines 7 through 10						28271489.	
12		etc. (see instructio	ons)			12	124,676.	
13	First 5 years. If the Form 990 is for th	•	,			01(c)(3)		
	organization, check this box and <b>stop</b>			-				
Sec	ction C. Computation of Publi							
	Public support percentage for 2023 (I			olumn (f))		14	71.16 %	
	Public support percentage from 2022					15	77.99 %	
	<b>33 1/3% support test - 2023.</b> If the o							
	stop here. The organization qualifies						V	
h	<b>33 1/3% support test - 2022.</b> If the o		-					
~	and <b>stop here.</b> The organization qual							
17~	10% -facts-and-circumstances test				13 16a or 16b a			
178								
	and if the organization meets the fact			-	achien	-		
	meets the facts-and-circumstances te	-		• • • •	-	7		
b	10% -facts-and-circumstances test	-					IU% Or	
	more, and if the organization meets th							
	organization meets the facts-and-circu				• •			
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990) 2023

\*\*-\*\*\*9749 Page 3

 Schedule A (Form 990) 2023
 FOUNDATION, INC.

 Part III
 Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	3 <b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3 (f) Total
	Amounts from line 6	(0) 2013	(6) 2020	(0) 2021	(0) 2022		
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on 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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third, t	fourth, or fifth tax	year as a section 5	501(c)(3) orga	nization,
	check this box and stop here						
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	ivided by line 13, o	olumn (f))		15	%
16	Public support percentage from 2022	Schedule A, Part	III, line 15			16	%
See	ction D. Computation of Inves	stment Income	Percentage				
17	Investment income percentage for 20	<b>)23</b> (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	<b>33 1/3% support tests - 2023.</b> If the					33 1/3%, and	
	more than 33 1/3%, check this box ar						
Ŀ	<b>33 1/3% support tests - 2022.</b> If the						/3%, and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

### INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.

1

Yes

No

# Schedule A (Form 990) 2023 FOUI Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

- 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 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 under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.**
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on 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.**
- **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 line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

\*\*-\*\*\*9749 Page 5 FOUNDATION, INC. Schedule Supporting Organizations (continued) Part IV Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in P</u>art VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. supported organization other than the supported rolled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised. or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed 1 the supported organization(s) Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 1 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how

the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

supported organizations plaved in this regard.

# Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions).
---	---	---------------------

- а The organization satisfied the Activities Test. Complete line 2 below.
- h 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 governmental entity (see instruction <u>s).</u>	
-----	---	---	--

- 2 Activities Test. Answer lines 2a and 2b below.
- 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, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, 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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3
- 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? If "Yes" or "No" provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2

3

2a

2b

3a

Yes No

A	(Form	990	2023	

2	Did the organization operate for the benefit of any
	organization(s) that operated, supervised, or contr
	Dort VI to a station of the office state of the

### \*\*-\*\*\*9749 Page 6 FOUNDATION, INC. Schedule A (Form 990) 2023 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, column A) 1 1 Enter 0.85 of line 1. 2 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6

INTERNATIONAL WILDERNESS LEADERSHIP

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

#### INTERNATIONAL WILDERNESS LEADERSHIP \T TN MOTTA **-**--2

	t V Type III Non-Functionally Integrated 509		nizatione / //		* - * * * 9 / 4 9 Page 7
		(a)(5) Supporting Orga	nizations (continu	<u>ed)</u>	Ourse and Manage
	on D - Distributions		Г	-	Current Year
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity	a of our ported or conjugations		2 3	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	j	4	
<u>4</u> 5	Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - pro-			4 5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.		7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive		- 1	
U	(provide details in <b>Part VI</b> ). See instructions.	ie organization is responsive		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
10		(i)	(ii)	10	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	s	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	INTERNATIONA FOUNDATION,		5 LEADERSHIP	**-**9749 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, li	nation. Provide the ex 2, 3b, 3c, 4b, 4c, 5a, 6, 9 nes 2 and 3; Part IV, Sec	planations required by F 9a, 9b, 9c, 11a, 11b, and tion E, lines 1c, 2a, 2b,	Part II, line 10; Part II, line 17a d d 11c; Part IV, Section B, lines 3a, and 3b; Part V, line 1; Part omplete this part for any addition	or 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

OMB No. 1545-0047

Attach to Form 990, 990-EZ, or 990-PF.	
Go to www.irs.gov/Form990 for the latest informati	on.

2023

Employer identification number

INTERNATIONAL W	ILDERNESS	LEADERSHIP
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FOUNDATION, INC.

\*\*-\*\*\*9749

Filers of:	Section:			
Form 990 or 990-EZ	$\fbox{3}$ 501(c)( 3) (enter number) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation			
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set is the set in the set is the set in the set is the set is the set in the set is the set in the set is t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

### Schedule B (Form 990) (2023)

Name of organization INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC. Employer identification number

\*\*-\*\*\*9749

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	INTERNATIONAL CONSERVATION FUND OF CANADA P.O. BOX 40 CHESTER, NOVA SCOTIA, CANADA B0J 1J0	\$ <u>185,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DISNEY WORLDWIDE SERVICES PO BOX 10000 LAKE BUENA VISTA, FL 32830	\$ <u>    146,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WENDY AND ERIC SCHMIDT 555 BRYANT ST # 370 PALO ALTO, CA 94301	\$600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
4	Name, address, and ZIP + 4         UNITED NATIONS         UNITED NATIONS AVENUE         NAIROBI, KENYA 00100	Total contributions         \$         168,994.	Type of contribution         Person       X         Payroll
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4         EUROPEAN COMMISSION         2 RUE DE LA LOI 200         BRUSSELS, BELGIUM 1000	Total contributions           \$2,000,000.	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	MAI FAMILY FOUNDATION 50 CORNWALL LANE PORT WASHINGTON, NY 11050	\$ <u>250,418.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Schedule B (Form 990)	(2023)
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Name of organization INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.

\*\*-\*\*\*9749

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7_	BELLINI BETTER WORLD FOUNDATION C/O CONNECTWISE PO BOX 172100 TAMPA, FL 33672	\$ <u>301,350.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_	COMMUNITY FOUNDATION OF TAMPA BAY 4300 W. CYPRESS STREET, SUITE 700 TAMPA, FL 33607	\$ <u>208,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	EDWARD E HADDOCK, JR. FAMILY FOUNDATION 15 N EOLA DRIVE ORLANDO, FL 32801	\$ <u>168,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>   10</u>	THE LIZ CLAIBORNE AND ART ORTENBERG FOUNDATION 1385 BROADWAY, 23RD FLOOR NEW YORK, NY 10018	\$230,940.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	THE VOLGENAU FOUNDATION 8300 GREENSBORO DRIVE, SUITE 950 MCLEAN, VA 22102	\$ <u>275,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

	NATIONAL WILDERNESS LEADERSHIP ATION, INC.		**-**9749
Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.)	
		_   _   _ \$	

Schedule B (Form 990) (2023) Name of organization

Schedule B (Form 990) (2023)

Page 3

Employer identification number

Schedule	B (Form 990) (2023)			Page <b>4</b>		
Name of c	organization			Employer identification number		
INTER	NATIONAL WILDERNESS LEAD	DERSHIP				
	ATION, INC.			**-***9749		
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	htrough (e) and the following line entricharitable, etc., contributions of <b>\$1,000 or l</b>	v. For organizations			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	iption of how gift is held		
		(e) Transfer of gif	:			
	Transferee's name, address, a	nd ZIP + 4	Relationship of trans	sferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	iption of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a		Relationship of trans	sferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	iption of how gift is held		
		(e) Transfer of gif	I			
	Transferee's name, address, a	nd ZIP + 4	Relationship of trans	sferor to transferee		
			1			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	iption of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of trans	sferor to transferee		

90	SCHEDULE D Supplemental Financial Statements			OMB No. 1545-0047	
	Form 990) Complete if the organization answered "Yes" on Form 990,			2023	
•	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			Open to Public	
	ment of the Treasury I Revenue Service	Venue Service Go to www.irs.gov/Form990 for instructions and the latest information.			
Nam	e of the organization	FOUNDATION, INC.			ployer identification number **-**9749
Pa			d Funds or Other Similar Funds or <i>I</i>	Accour	its. Complete if the
	organizatio	n answered "Yes" on Form 990, Part IV, line		(1) =	
	<b>-</b>		(a) Donor advised funds	(b) Fur	ids and other accounts
1 2		nd of year f contributions to (during year)			
2		f grants from (during year)			
4		t end of year			
5			writing that the assets held in donor advised fu	nds	
	-		exclusive legal control?		Yes 📃 No
6	Did the organization	on inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used	only	
	for charitable purp	oses and not for the benefit of the donor or	r donor advisor, or for any other purpose confe	erring	
De	impermissible priva				
Pa			ganization answered "Yes" on Form 990, Part	V, line 7.	
1		servation easements held by the organization			inconstant land over
		n of land for public use (for example, recreat f natural habitat	Preservation of a ce		important land area
		of open space		nuneu m	
2			ied conservation contribution in the form of a	conserva	tion easement on the last
-	day of the tax year	<b>o o</b> .			Held at the End of the Tax Year
а	Total number of co	onservation easements		2a	
b	Total acreage rest				
с	Number of conserv	vation easements on a certified historic stru	ucture included on line 2a	2c	
d	Number of conserv	vation easements included on line 2c acqui	red after July 25, 2006, and not		
	on a historic struct	ture listed in the National Register		2d	
3		vation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	nization	during the tax
	year		energia de la contra d		
4 5		where property subject to conservation eas tion have a written policy regarding the peri			
5		orcement of the conservation easements it			Yes No
6	,		handling of violations, and enforcing conserva		
		с, т с,	5		5
7	Amount of expens	es incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	easemen	ts during the year
8		-	satisfy the requirements of section 170(h)(4)(E		
9		-	on easements in its revenue and expense state		
		ounting for conservation easements.	ote to the organization's financial statements	nat desc	cribes the
Pa	rt III Organiza	ations Maintaining Collections of	Art, Historical Treasures, or Other	Simila	r Assets.
		f the organization answered "Yes" on Form			
1a			8, not to report in its revenue statement and b	alance sl	neet works
	of art, historical tre	easures, or other similar assets held for pub	plic exhibition, education, or research in furthe	ance of	oublic
	service, provide in	Part XIII the text of the footnote to its finan	icial statements that describes these items.		
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balan	ce sheet	works of
	art, historical treas	ures, or other similar assets held for public	exhibition, education, or research in furtheran	ce of pu	blic service,
	-	ng amounts relating to these items.			
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1			\$
	.,				\$
2	-		asures, or other similar assets for financial gair	, provide	9
	-	unts required to be reported under FASB A	-		٨
a L					\$
<u>b</u>		eduction Act Notice, see the Instructions	for Form 990		<u>\$</u> Schedule D (Form 990) 2023
гЦА	I UI FAPELWORK RO	subction Act Notice, see the instructions			Schedule D (FULIII 990) 2023

		TIONAL WIL	DERNESS	LEADERSH	ΓP			
-	dule D (Form 990) 2023 FOUNDAT	ION, INC.				**_	***9749	Page <b>2</b>
Par	t III Organizations Maintaining C	ollections of Ar	t, Historica	Treasures, o	r Other	Similar Ass	ets <sub>(contin</sub>	ued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any o	f the following tha	t make sig	nificant use of	its	
	collection items (check all that apply).							
а	Public exhibition	d	I 📃 Loan d	or exchange progr	am			
b	Scholarly research	e	• 🗌 Other					
с	X Preservation for future generations							
4	Provide a description of the organization's co	ollections and explair	n how they furt	her the organizati	on's exem	ot purpose in F	Part XIII.	
5	During the year, did the organization solicit of	or receive donations of	of art, historica	l treasures, or oth	er similar a	issets		
	to be sold to raise funds rather than to be ma						Yes	X No
Par	t IV Escrow and Custodial Arran		te if the organi	zation answered "	'Yes" on Fo	orm 990, Part I	V, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.						
1a	Is the organization an agent, trustee, custod	ian, or other intermed	diary for contrik	outions or other as	ssets not ir	ncluded		
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:					
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow	or custodial acco	ount liability	/?	Yes	No
	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds Complete it							
		(a) Current year	(b) Prior ye	ar <b>(c)</b> Two yea	ars back (	d) Three years ba	ack <b>(e)</b> Four	years back
	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g, colui	mn (a)) held as:				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are h	eld and administe	red for the		_	
	organization by:							Yes No
	(i) Unrelated organizations?						3a(i)	
	(ii) Related organizations?						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	ed on Schedul	e R?			3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm	ient						
	Complete if the organization answere	d "Yes" on Form 990	), Part IV, line 1	1a. See Form 990	), Part X, lii	ne 10.		
	Description of property	<b>(a)</b> Cost or o basis (investr	,	Cost or other pasis (other)	1	cumulated reciation	<b>(d)</b> Book	value
1a	Land			116,200.			116	5,200.
	Buildings			419,655.	1	12,988.	306	5,667.
	Leasehold improvements							
	Equipment			143,412.	1	23,042.	20	,370.
	Other			98,229.		51,000.		,229.
	Add lines 1a through 1e. (Column (d) must e		X. line 10c. co	-				,466.

Schedule D (Form 990) 2023

INTERNATIONA	L WILDERNESS	LEADERSHIP
	TNO	

Schedule D	(Form 990) 2023 FOUNDATION	, INC.	*	<u>*-***9749 Page</u> 3
Part VII				
	Complete if the organization answered "Yes			
(a) Descrip	tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financia	al derivatives			
(2) Closely	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments - Program Related.	•	•	
	Complete if the organization answered "Yes	" on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes	" on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
		a) Description		(b) Book value
(1)	·	<u>, , , , , , , , , , , , , , , , , , , </u>		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 15, c	(P)		
Part X	Other Liabilities	,ог. (b))		
	Complete if the organization answered "Yes	" on Form 990, Part IV, line	11e or 11f. See Form 990. Part X. line 2	25.
1	(a) Description of liability			(b) Book value
1. (1) Fec	leral income taxes			
(2)				
(3)				
(4)				
(5)				+
(6)				
(7)				
(8)				
(9)				
Total. <u>(Colu</u>	<u>ımn (b) must equal Form 990, Part X, line 25, c</u>	col. (B))		1

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

X

	INTERNATIONAL WILDERNESS								
Sche	dule D (Form 990) 2023 FOUNDATION, INC.			***9749 Page 4					
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return									
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	6,825,185.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:								
а	Net unrealized gains (losses) on investments	2a	9,373.						
b									
с	Recoveries of prior year grants								
d	Other (Describe in Part XIII.)	2d							
е	Add lines 2a through 2d			2e	9,373.				
3	Subtract line 2e from line 1			3	6,815,812.				
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	-86,247.						
с	Add lines 4a and 4b			4c	-86,247.				
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)					6,729,565.				
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return									
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.							
1	Total expenses and losses per audited financial statements			1	5,537,687.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:								
а	Donated services and use of facilities	2a							
b	Prior year adjustments	2b							
С	Other losses	2c							
d	Other (Describe in Part XIII.)	2d	86,247.						
е	Add lines 2a through 2d			2e	86,247.				
3	Subtract line 2e from line 1			3	5,451,440.				
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	0.				
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					5,451,440.				
Pa	t XIII Supplemental Information								

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 III, LINE 4:

AFRICAN ART, INCLUDING CARPETS, PAINTINGS AND SCULPTURES, ARE ON DISPLAY

AT THE COLORADO OFFICE TO HELP PRESERVE THE CULTURE THAT THE ORGANIZATION

WORKS WITH ON A CONTINOUS BASIS TO ACHIEVE PROGRAM GOALS AND OBJECTIVES.

PART X, LINE 2:

THE ORGANIZATION UTILIZES THE PROVISIONS OF ASC 740, PERTAINING TO

ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE PRONOUNCEMENT REQUIRES THE

USE OF A MORE-LIKELY-THAN-NOT RECOGNITION CRITERIA BEFORE AND SEPARATE

FROM THE MEASUREMENT OF A TAX POSITION. AN ENTITY SHALL INITIALLY

RECOGNIZE THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION WHEN IT IS

MORE LIKELY THAN NOT, BASED ON THE TECHNICAL MERITS, THAT THE POSITION

Schedule D (Form 990) 2023       INTERNATIONAL WILDERNESS LEADERSHIP         FOUNDATION, INC.       **-***9749 Page 5
Part XIII Supplemental Information (continued)
WILL BE SUSTAINED UPON EXAMINATION. WITH RESPECT TO THE ORGANIZATION, THIS
WOULD PRIMARILY RELATE TO THE DETERMINATION OF UNRELATED BUSINESS TAXABLE
INCOME AND TO THE MAINTENANCE OF ITS TAX EXEMPT STATUS.
MANAGEMENT HAS EVALUATED THE ADOPTED POLICIES AND PROCEDURES THAT HAVE
BEEN IMPLEMENTED TO PROVIDE ASSURANCE THAT INCOME IS PROPERLY
CHARACTERIZED AND ACTIVITIES THAT JEOPARDIZE ITS TAX EXEMPT STATUS ARE
WITHIN LIMITS ESTABLISHED UNDER EXISTING TAX CODE AND REGULATIONS.
MANAGEMENT HAS DETERMINED THE EFFECTS OF UNCERTAIN TAX POSITIONS ARE NOT
MATERIAL TO THE ORGANIZATION FOR RECOGNITION OR DISCLOSURE IN THE
ACCOMPANYING FINANCIAL STATEMENTS AND, ACCORDINGLY, NO INCOME TAX
LIABILITY HAS BEEN RECORDED FOR UNCERTAIN INCOME TAX POSITIONS IN THE
ACCOMPANYING FINANCIAL STATEMENTS.

TOTAL TO SCHEDULE D, PART XI, LINE 4B	-86,247.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
PARI AII, LINE 2D - OTHER ADJUSIMENTS:	
FOREIGN CURRENCY TRANSLATION	25,209.
LOSS ON DISPOSAL OF EQUIPMENT	61,038.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	86,247.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FOREIGN CURRENY TRANSLATION

LOSS ON DISPOSAL OF EQUIPMENT

-25,209.

-61,038.

SCHEDULE F	Stateme	nt of Act	ivities Outside the Ur	nited Sta	ntes ⊢	OMB No. 1545-0047
(Form 990)			inswered "Yes" on Form 990, Part IV			2023
Department of the Treasury			Attach to Form 990.			Open to Public
Internal Revenue Service	Go to w	ww.irs.gov/Forn	1990 for instructions and the latest	information.		Inspection
Name of the organization		S LEADER	SHIP			lentification number
FOUNDATION, IN					**_**	
		ctivities Out	side the United States. Comp	lete if the orgar	ization answer	red "Yes" on
Form 990, Part	•					
•	•		ds to substantiate the amount of its gra the selection criteria used to award the			X Yes No
-	scribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and ot	her assistance	outside the
United States.						
			an be duplicated if additional space is r			
(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in (d) gram service,	) (f) Total expenditures
	in the region	agents, and	gram services, investments, grants to		e specific type	for and
	in the region	independent contractors	recipients located in the region)		(s) in the regio	n investments
		in the region	, , , , , , , , , , , , , , , , , , ,		., 3	in the region
				CONSERVATIO		
				WILDERNESS	PROTECTION	
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES AND GRANTS	PROJECTS		1,467,169.
				CONSERVATIO		
				WILDERNESS	PROTECTION	
SOUTH AMERICA	0	0	PROGRAM SERVICES AND GRANTS	PROJECTS		40,896.
SOUTH ASIA -						
AFGHANISTAN,				CONSERVATIO	ON AND	
BANGLADESH, BHUTAN,				WILDERNESS	PROTECTION	
INDIA, MALDIVES,	0	0	PROGRAM SERVICES AND GRANTS	PROJECTS		1,000.
EUROPE (INCLUDING						
ICELAND & GREENLAND)				CONSERVATIO	ON AND	
<ul> <li>ALBANIA, ANDORRA,</li> </ul>				WILDERNESS	PROTECTION	
AUSTRIA, BELGIUM	0	0	PROGRAM SERVICES AND GRANTS	PROJECTS		14,333.
				CONSERVATIO	N AND	
EAST ASIA AND THE				WILDERNESS	PROTECTION	
PACIFIC	0	0	PROGRAM SERVICES AND GRANTS	PROJECTS		1,000.
				CONSERVATIO	N AND	
				WILDERNESS	PROTECTION	
NORTH AMERICA	0	0	PROGRAM SERVICES AND GRANTS	PROJECTS		2,790.
3 a Subtotal	0	0				1,527,188.
<b>b</b> Total from continuatio		ľ				_,,
sheets to Part I		o				0.
c Totals (add lines 3a		ľ				
and 3b)	0	0				1 527 188.

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

FOUNDATION, INC.

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Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (g) Amount of (h) Description (i) Method of (b) IRS code section (d) Purpose of (e) Amount (f) Manner of (a) Name of organization (c) Region noncash of noncash valuation (book, FMV. and EIN (if applicable) of cash grant cash disbursement grant assistance assistance appraisal, other) SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, CONSERVATION AND BURKINA FASO EDUCATION 218,616.WIRE Ο. CASH SOUTH AMERICA -ARGENTINA BOLIVIA, BRAZIL, CONSERVATION AND CHILE, COLUMBIA, EDUCATION 40 896. WIRE 0. CASH SUB-SAHARAN AFRICA - ANGOLA BENIN, BOTSWANA, CONSERVATION AND BURKINA FASO EDUCATION 25,000.WIRE 0. CASH SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, CONSERVATION AND BURKINA FASO EDUCATION 46,500.WIRE 0. CASH SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, CONSERVATION AND BURKINA FASO EDUCATION 109,456.WIRE 0. CASH SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, CONSERVATION AND BURKINA FASO EDUCATION 935,592.WIRE 0. CASH

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2023

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Schedule F (Form 990) 2023

FOUNDATION, INC.

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Part III       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.       Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)			
	SUB-SAHARAN AFRICA - ANGOLA,									
ONSERVATION AND EDUCATION	BENIN, BOTSWANA, BURKINA FASO,	1	124,890.	WIRE	0.		CASH			
	EUROPE (INCLUDING ICELAND &									
ONSERVATION AND EDUCATION	GREENLAND)	1	13,333.	WIRE	0.		CASH			

Schedule F (Form 990) 2023

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FOUNDATION, INC.

Schedule F (Form 990) 2023

Part	IV	Foreign Forms		
1	Was	s the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"		
	the	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Cor	poration (see the Instructions for Form 926)	Yes	X No
2	Did	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be r	equired to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Rec	eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a		
	U.S.	. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the	organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Cert	tain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was	s the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qua	lified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Info	rmation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing		
	Fun	d (see the Instructions for Form 8621)	Yes	X No
5	Did	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the	organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Fore	eign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did	the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes	s," the organization may be required to separately file Form 5713, International Boycott Report (see		
	the	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

INTERNATIONAL WILDERNESS LEADERSHIP	
Schedule F (Form 990) 2023 FOUNDATION, INC. **-**9749	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 2:	
A GRANT REPORT DESCRIBING THE USE OF FUNDS ALONG WITH THE GRANTEE	
ORGANIZATION'S FINANCIAL STATEMENTS ARE SUBMITTED AND REVIEWED NO LESS	
THAN ONCE A YEAR.	
PART I, LINE 3:	
ACCRUAL METHOD USED AND REPORTED AS GRANTS AND PROJECTS.	

SCHEDULE I	G	rants and Oth	ner Assistan	ce to Organ	izations.		OMB No. 1545-0047				
(Form 990)	Gov	vernments, an ete if the organization	nd Individual	s in the Ŭni	ted States		2023				
Department of the Treasury	Comple		Attach to Form				Open to Public				
Internal Revenue Service			s.gov/Form990 for	the latest information	ation.		Inspection				
Name of the organization       INTERNATIONAL WILDERNESS LEADERSHIP       Employer identification number         FOUNDATION, INC.       **-***9749											
Part I General Information on Grants	and Assistance										
<ol> <li>Does the organization maintain records criteria used to award the grants or ass</li> <li>Describe in Part IV the organization's p</li> </ol>	istance?						on XYes No				
Part II Grants and Other Assistance to recipient that received more than	Domestic Organiz	ations and Domestic	c Governments. C	complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any				
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
FRANS LANTING, INC. 108 HIGH ROAD SANTA CRUZ, CA 95060			53,603.	0.			RESEARCH AND EDUCATION				
WILD PATH 1517 E 7TH AVE, STE C TAMPA. FL 33605			1,153,897.	0.			RESEARCH AND EDUCATION				
EARTH VISION INSTITUTE 2334 BROADWAY STREET BOULDER, CO 80304	**-***1029		680,209.	0.			RESEARCH AND EDUCATION				
NORTH EXPOSURE STUDIOS 2825 TRIPLEHORN LANE FAIRBANKS, AK 99709			8,000.	0.			RESEARCH AND EDUCATION				
EXPOSURE LABS 3200 CARBON PL, STE 100 BOULDER, CO 80301			100,000.	0.			RESEARCH AND EDUCATION				
WISDOM WEAVERS OF THE WORLD 41020 RUTH WAY HOMER, AK 99603 2 Enter total number of section 501(c)(3)	and dovernment org	anizations listed in the	54,000.	0.			RESEARCH AND EDUCATION				

3 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) 2023

Schedule I (Form 990) FOUNDATION, INC.

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	ress of (b) EIN (c) IRC and the service of the serv		(d) Amount of cash grant	(e) Amount of noncash assistance (book, FMV, appraisal, other)		(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ALE UNIVERSITY								
.O. BOX 1873 OFFICE OF SPONSORED P								
EW HAVEN, CT 06508			65,703.	٥.			RESEARCH AND EDUCATION	
OUTH PASSAGEWAYS								
D BOX 46631								
ANSAS CITY, MO 64188			90,446.	٥.			RESEARCH AND EDUCATION	

Schedule I (Form 990)

Schedule I (Form 990) 2023

FOUNDATION, INC.

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Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ESEARCH AND EDUCATION	2	29,183.	0.		

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

A GRANT REPORT DESCRIBING THE USE OF FUNDS ALONG WITH THE GRANTEE

ORGANIZATION'S FINANCIAL STATEMENTS ARE SUBMITTED AND REVIEWED NO LESS THAN

ONCE A YEAR.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. INTERNATIONAL WILDERNESS LEADERSHIP



Employer identification number \*\*-\*\*9749

## FORM 990, PART VI, SECTION B, LINE 11B:

FOUNDATION,

A COPY OF THE ORGANIZATION'S FORM 990 IS PROVIDED TO MANAGEMENT AND MEMBERS

OF THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL PRIOR TO SUBMISSION.

INC.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY AND ALL MEMBERS OF THE

ORGANIZATION. MEMBERS OF THE ORGANIZATION ARE REQUIRED TO NOTIFY THE BOARD

IMMEDIATELY IF A SITUATION ARISES DURING THE YEAR THAT COULD GIVE RISE TO

CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE PROCESS FOR DETERMINING COMPENSATION FOR THE ORGANIZATION'S PRESIDENT

INCLUDES A REVIEW OF MARKET RATES IN THE AREA BY AN INDEPENDENT COMMITTEE

OF THE BOARD. ONCE A COMPENSATION PACKAGE IS DETERMINED BY THE COMMITTEE,

IT IS TAKEN TO THE BOARD FOR REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION C, LINE 18:

THE GOVERNING DOCUMENTS ARE AVAILABLE FOR PUBLIC REVIEW UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS OF THE

ORGANIZATION ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

IT CONSULTANTS:

PROGRAM SERVICE EXPENSES

Schedule O (Form 990) 2023 Name of the organization INTERNATIONAL WILDERNESS LEADERSHIP FOUNDATION, INC.	Page 2 Employer identification number ** - *** 9749
MANAGEMENT AND GENERAL EXPENSES	5,741.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	12,867.
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	694,400.
MANAGEMENT AND GENERAL EXPENSES	56,122.
FUNDRAISING EXPENSES	14,209.
TOTAL EXPENSES	764,731.
PAYROLL ADMIN FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	8,606.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	8,606.
FUNDRAISING:	
PROGRAM SERVICE EXPENSES	5,504.
MANAGEMENT AND GENERAL EXPENSES	2,540.
FUNDRAISING EXPENSES	7,507.
TOTAL EXPENSES	15,551.
OTHER :	
PROGRAM SERVICE EXPENSES	3,195.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,195.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	804,950. Schedule O (Form 990) 2023

## PART XII, LINE 2C

THE FINANCE COMMITTEE ASSUMES RESPONSIBILTY FOR OVERSIGHT OF THE AUDIT

OF ITS FINANCIAL STATEMENTS AND SELECTION OF INDEPENDENT ACCOUNTANTS.

THIS PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR.

							OMB No. 154	15-0047
SCHEDULE R (Form 990)	Comple	Related Organization ete if the organization answered At			, or 37.		2023 Open to Put	
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form990	for instructions and the latest	t information.			Inspect	
Name of the organization	INTERNATIONAL FOUNDATION, IN	WILDERNESS LEADEF	SHIP				lentification n * * 9749	umber
Part I Identification o	of Disregarded Entities. Comple	te if the organization answered "Y	es" on Form 990, Part IV, line 3	3.				
	(a)	(b)	(c)	(d)	(e)		(f)	
	, and EIN (if applicable) egarded entity	Primary activity	Legal domicile (state c foreign country)	or Total inco	me End-of-year a	assets L	Direct controlling entity	
		_						
		-						
		-						
		-						
		_						
		-						
	of Related Tax-Exempt Organization of the tax year.	ations. Complete if the organization	on answered "Yes" on Form 990	J, Part IV, line 34, t	because it had one o	r more related ta	ax-exempt	
	(a) ddress, and EIN ed organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct control entity	ling <sub>con</sub>	<b>(g)</b> 512(b)(13) htrolled htity?
					501(c)(3))		Yes	No
	PARKS, INC - 77-0471097	-			100/00/10/00/			
717 POPLAR AVE BOULDER, CO 80304		WILDLIFE CONSERVATION	COLORADO	501(C)(3)	170(B)(1)(A)( VI)			x
WILDERNESS FOUNDATIO	NCIORAI	WILDLIFE CONSERVATION	COLORADO	501(C)(3)	V I )			
11 NEWINGTON STREET	N GLOBAL	-						
PORT ELIZABETH, SOUT	H AFRICA 6001	WILDLIFE CONSERVATION	SOUTH AFRICA					x
,		_						
		-						ļ
		-						
For Paperwork Reduction	Act Notice, see the Instruction	s for Form 990.				Sched	ule R (Form 9	90) 2023

332161 09-28-23 LHA

## Schedule R (Form 990) 2023 FOUNDATION, INC.

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Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?		Genera manag partn	<sup>ll or</sup> Percentage <sup>jing</sup> ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
											<u> </u>
	1										
	1	1	1			1		I	1		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) (f) (g) Type of entity (C corp, S corp, or trust) (f) and the formula of total income assets		<b>(h)</b> Percentage ownership	e (i) Section 512(b)(13) controlled entity?		
		country)				235013		Yes	No

# Schedule R (Form 990) 2023 FOUNDATION, INC.

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				No
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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b		X
с	Gift, grant, or capital contribution from related organization(s)	1c		X
d	Loans or loan guarantees to or for related organization(s)	1d		X
е	Loans or loan guarantees by related organization(s)	1e		_X
f	Dividends from related organization(s)	1f		X
	Sale of assets to related organization(s)	1g		X
	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		<u>X</u>
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
Т	Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
ο	Sharing of paid employees with related organization(s)	10		<u>X</u>
р	Reimbursement paid to related organization(s) for expenses	1p		X
	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
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.			

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amount involved
(1) FRIENDS OF THE PEACE PARKS, INC	L	11,000.	CASH
<u>(2)</u>			
_(3)			
_(4)			
<u>(5)</u>			
<u>(6)</u>			

Schedule R (Form 990) 2023 FOUNDATION, INC.

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

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.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners s 501(c)(3 orgs.? Yes N	<b>(g)</b> Share of end-of-year assets	(r Disprotion allocat Yes	) opor- ate ions? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managin partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2023

INTERNATIONA	L WILDERNESS	LEADERSHIP
FOUNDATION,	INC.	

Schedule R	(Form 990	)) 2023
		12020

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.