Form 9	а∩_т	E	cempt Organization			Tax Retur	n .		No 1545-0687
Form 3					der section 6033(604	6	
`` <i>`</i> ``		For cale	ndar year 2017 or other tax year begin	0 1 8	2	<u> </u>			
 Department of Internal Revenu 			► Go to www irs.gov/Form990	F	Open to F	Public Inspection for			
-		▶ Do	Name of organization (Check by		ay be made public if your orga me changed and see instruction:				Public Inspection for Organizations Only Ication number
	eck box if Iress changed		Name of organization (Check bi	DX II IIA	me changed and see instructions	,			ee instructions)
B Exempt un	nder section		NATIONAL FISH AND W	דת.דד	TEE FOUNDATION				
X 501(Print	Number, street, and room or suite no				52-1	384139	
408(e)		_ or	, , , , , , , , , , , , , , , , , , , ,			1			ess activity codes
408A	530(a)	Type	1133 15TH STREET NW	STE	: 1000		(See in	nstructions)	•
529(a)			City or town, state or province, countr	y, and 2	ZIP or foreign postal code				
C Book value			WASHINGTON, DC 2000	5 - 27	27		5259	90	
at end of y	ear	F Gro	up exemption number (See instruct	ions)	>				
27859	913208.	G Che	ck organization type X 501	(c) co	rporation 501(c)	trust	401(a)	trust	Other trust
H Describe	e the organiza	ation's p	rimary unrelated business activity	▶ PA	RTNERSHIP INVEST	MENT			
			corporation a subsidiary in an affile					▶ 🗌	Yes X No
			identifying number of the parent co	rporati					
J The bool	ks are in care	of ▶ 7	OKUNBO FALAYI		Telephon	e number ▶ 20	2-857-	-0166	
Part I	Inrelated 7	Trade o	or Business Income		(A) Income	(B) Expen	ses		(C) Net
1a Gross	s receipts or s	ales							
	eturns and allowar		c Balance ▶	1c				<u> </u>	
			ule A, line 7)	2				 	
			2 from line 1c	3_					
			ttach Schedule D)	4a	30,703.				30,703.
			Part II, line 17) (attach Form 4797)	4b			<u> </u>		
c Capit	al loss deduc	ction for t	rusts	4c				ļ	
		,	os and S corporations (attach statement)	5	-10,136.	ATCH 1		ļ	-10,136.
6 Rent	income (Sche	edule C)		6	ļ <u>.</u>			 	
7 Unrel	ated debt-fin	anced in	come (Schedule E)	7				<u> </u>	
			its from controlled organizations (Schedule F)	8				ļ	
			1(c)(7), (9), or (17) organization (Schedule G)	9				 	
•	•	-	ncome (Schedule I)	10					
	_		ule J)	11	130,328.	ATICIL 2		 	130,328.
			tions, attach schedule)	12	150,895.	ATCH 2		+	150,895.
			ough 12	13		eductions) (F	-vcent f	or contri	
			be directly connected with t				-xcept i	Or Coriu	ibutions,
			directors, and trustees (Schedule K)				44	T	
								+	
							· -	 	
							-	<u> </u>	
								<u> </u>	
19 Taxes	and licenses		RECEIV	ΈÒ			19		9,269.
20 Chari	table contribi	utions (S	See instructions for limitation rules)	ĀŢĪ	ACHMENT 3 ATT	ACHMENT	6 20		13,510.
21 Depre	eciation (attac	ch Form	4562)		. 0	21			
22 Less	depreciation	claimed	on Schedule & and elsewhere on re	ELUI	21 22a		22b		21.
					<u> </u>		. 23		
			compensation plansOGDEN:	. 					
			000211,						
			Schedule I)						
27 Exces	s readership	costs (So	chedule J)				. 27		
28 Other	deductions ((attach s	chedule)		ATTACHM	ENT.4	. 28		6,506.
			s 14 through 28					ļ	29,306.
			le income before net operating					<u> </u>	121,589.
31 Net of	perating loss	deduction	on (limited to the amount on line 30))			. 31	<u> </u>	
32 Unrela	ated busines:	s taxable	e income before specific deduction	Subt	ract line 31 from line 30		. 32	<u> </u>	121,589.
•		•	ally \$1,000, but see line 33 instruc						1,000.
			ole income. Subtract line 33 fro		_	~ \(\lambda \)			
			line 32	<u></u>	<u> </u>	?\$%	. 34		120,589.
7X2740 2 000	ork Reduction	on Act N	otice, see instructions.				•	Fo	m 990-T (2017)
409	9301 6490	C			4	IFWF			PAGE 13

Par	t III Tax Computation				
35	Organizations Taxable as Corporations. See instructions for tax computation Controlled group)			
	members (sections 1561 and 1563) check here ▶ See instructions and	1			
à	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)				
	(1)[\$ (2)[\$ (3)[\$	1 1			
b	Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$				
	(2) Additional 3% tax (not more than \$100,000)				
С	Income tax on the amount on line 34	▶ 35c		26,	573.
36	Trusts Taxable at Trust Rates See instructions for tax computation Income tax of	n 🗌			
	the amount on line 34 from Tax rate schedule or Schedule D (Form 1041)	▶ 36	_		
37	Proxy tax. See instructions	▶ 37	<u></u>		
38	Alternative minimum tax	. 38			
39	Tax on Non-Compliant Facility Income. See instructions	. 39			
40	Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies	. 40		26,	573.
Par	t IV Tax and Payments				
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a		_		
	Other credits (see instructions)				
	General business credit Attach Form 3800 (see instructions)	7			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)				
	Total credits. Add lines 41a through 41d	. 41e			
42	Subtract line 41e from line 40	. 42		26,	573.
43	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedulg)				
44		3 44		26,	573.
45 a	Total tax. Add lines 42 and 43				
	2017 estimated tax payments	디 ㅣ			
	Tax deposited with Form 8868	7			
	Foreign organizations Tax paid or withheld at source (see instructions)	_			
	Backup withholding (see instructions)				
	Credit for small employer health insurance premiums (Attach Form 8941)	7			
	Other credits and payments Form 2439	7			
9	Form 4136	1 1			
46	Total payments Add lines 45a through 45g	46		27,	554.
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached.	47			
	Tax due If line 46 is less than the total of lines 44 and 47, enter amount owed				
	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49			981.
	Enter the amount of line 49 you want Credited to 2018 estimated tax ▶ 981 . Refunded	_ 			
Pari					
_	At any time during the 2017 calendar year, did the organization have an interest in or a signature		authority	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the				1
	here ▶	3			X
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foi	eian taist'	, 		Х
42	If YES, see instructions for other forms the organization may have to file	eigii uust			†··
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$				1
<u></u>	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the	best of my	knowledge a	and bel	lief, it is
Sign	true, correct, and of holete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		_		
Here		•	RS discuss preparer sh		
			ns)? X Ye		No
	Print/Tyne preparers ame Preparers signsture Date		PTIN		لتنت
Paid	MARY TORRETTA Mary) Journal 7/24/2019 Set	eck lead of f-employed	P008	4785	<u>i</u> 1
Prep	arer Firm's pame GRANT THORNTON LLP		6-6055		
Use	UNIV		03-847-		0
			Form 99		

NATIONAL FISH AND WILDLIFE FOUNDATION

(2) (3)	Form 990-T (2017)									F	Page 3
2 Purchases	Schedule A - Cost of G	oods Sold. Er	ter method	of inventory valuation	n 🕨						
3 Cast of labor	1 Inventory at beginning of y	/ear _ 1		6 Invente	ory at en	nd of yea	r	6			
## Additional section 263A costs (attach schedule)	2 Purchases	2		7 Cost of goods sold Subtract			d Subtract line				
(attach schedule) 4a 8 8 Do the rules of section 263A (with respect to Ves No Property produced or acquired for resale) apply X X Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) X X Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) X X X X X X X X X	3 Cost of labor	3		6 from	n line	5 Ent	ter here and in	1			
(attach schedule) 4a 8 8 Do the rules of section 263A (with respect to Ves No Property produced or acquired for resale) apply X X Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) X X Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) X X X X X X X X X	4a Additional section 263A co	osts		Part I,	ine 2			7			
b Other costs (attach schedule) 4b 5 Total Add lines 1 through 4b 5 5 Total Add lines 1	(attach schedule)	4a						ith re	spect to	Yes	No
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Total Total Total Total Total Total (b) Total deductions Enter here and on page 1, Part I, line 6, column (A) ▶ Part I, line 6, column (B) ▶										-	
Total (c) Total income Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A) ▶ Schedule E - Unrelated Debt-Financed Income (see Instructions) 1 Description of debt-financed property 1 Description of debt-financed property 2 Gross income from or allocable to debt-financed property (a) Straight line depreciation (attach schedule) (b) Total deductions Enter here and on page 1, Part I, line 6, column (B) ▶ 2 Gross income from or allocable to debt-financed property (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (column a schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (column a schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (a) Straight line depreciation (att						_			-		
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Schedule E - Unrelated Debt-Financed Income (see Instructions) 1 Description of debt-financed property 2 Gross income from or allocable to debt-financed property (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (1) (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5 Average adjusted basis of or allocable to debt-financed property (attach schedule) (b) Other deductions (attach schedule) 7 Gross income reportable (column 5 x total of columns 3(a) and 3(b)) (c) (d) (2) (3) (4) (4) (5) (6) (7) (7) (8) (8) (8) (8) (8) (9) (9) (9	• •	, ,	•								
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acquaint detail of the column of allocable to debt-financed property (attach schedule) (1) (2) (3) (4) Enter here and on page 1, Part I, line 7, column (B) Totals	4 Amount of average	5 Average adju	sted basis	0.000							
property (attach schedule) (attach schedule) by column 5 3(a) and 3(b)) (1) % (2) % (3) % (4)	•				7						ns
(1)				by column 5	- 1	(column	2 X COIUMN 6)	,	3(a) and 3(b))	
(2)		· · ·			%	-					
(3)											
(4) % Enter here and on page 1, Part I, line 7, column (A) Totals			 ,								
Enter here and on page 1, Part I, line 7, column (A) Totals											
Part I, line 7, column (A) Part I, line 7, column (B)				<u> </u>		nter here	and on page 1	Enter	here and or	nage	1
	Takala										
							—				

Schedule F - Interest, Arm	uities, Noyaities		pt Controlled O			1110113 (366	S III SU UCUO	113)	<u> </u>
Name of controlled organization	2 Employer identification numb	per 3 Ne	t unrelated income) (see instructions)	4 Total	of specifi	of specified included in the controlling organization's gross incom		olling	6 Deductions directly connected with income in column 5
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organi	zations								
7 Taxable Income	8 Net unrelated ii (loss) (see instruc	I .	9 Total of specific payments mad		Inclu	Part of column uded in the co nization's gros	ntrolling		Deductions directly inected with income in column 10
(1)						_		_	-
(2)									
(3)	<u></u>								
(4)	_ _		_						
Totals				•	Ente	d columns 5 a er here and on t I, line 8, colu	page 1,	Ent	d columns 6 and 11 er here and on page 1, rt I, line 8, column (B)
Schedule G - Investment In	ncome of a Sec	tion 501/c)(7) (9) or (1	7) Orga	nizatio	n /saa ins	tructions)		
1 Description of income	2 Amount of		3 Dedu directly co	ctions innected	Inzatio	4 Se	t-asides schedule)		5 Total deductions and set-asides (col 3
(1)	+		(attach so	(TEGUIE)				+	plus col 4)
(1)			-		+			+	-
(2)	 				-+			+	
(3)	 		 					-+	
(4)	<u> </u>							 ∤-	Enter here and on page 1
Totals	Enter here and Part I, line 9, c	olumn (A)							Part I, line 9, column (B)
Schedule I - Exploited Ex	empt Activity In	come, Othe	er Than Advert	ising In	come	(see instru	ictions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expense directly connected v production unrelated business inc	or business 2 minus co	ted tradé (column dumn 3) compute	from a	oss income activity that t unrelated ess income	6 Exper attributal columi	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	 								
(2)	 				-				-
(3)	 		- 				 		
					<u> </u>				
(4)	Enter here and on page 1, Part I, line 10, col (A)	Enter here an page 1, Par line 10, col	ti,		<u> </u>		L		Enter here and on page 1, Part II, line 26
Totals									
Schedule J - Advertising Ir				<u>. </u>					
Part I Income From Per	iodicals Report	ed on a Co	nsolidated Ba	SIS					
1 Name of periodical	2 Gross advertising income	3 Direct advertising c	2	ss) (col ol 3) If ompute	1	irculation icome	6 Reade costs	•	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				_					
(2)	 					-			7
(3)	 						 		┪
(4)	 -			,					┪
\¬/							 		+
Totals (carry to Part II, line (5))		•							Form 990-T (2017

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		_ ,				
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)		•		Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶						

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

	1 Name	1	2 T	itle	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
1)			·		- %	
2)					%	
3)					%	
4)					%	
otal. Enter here and	on page 1. Par	t II. line 14			.	

Form **990-T** (2017)

SCHEDULE D (Form 1120)

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T

▶ Go to www irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

Department of the Treasury Internal Revenue Service Name

NATIONAL FISH AND WILDLIFE FOUNDATION

NAT	IONAL FISH AND WILDLIFE FOUNDATION)N				52-1384139
Par	t I Short-Term Capital Gains and Losses	- Assets Held Or	ne Year or Less			
	See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from For 8949, Part I, line column (g)	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<u>. 1a</u>	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
11	b Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	-26.				-26.
4	Short-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		4	
5	Short-term capital gain or (loss) from like-kind exchar	nges from Form 8824	· · · · · · · · · · · · · · · · · · ·		5_	
6	Unused capital loss carryover (attach computation)				6_	(
7 Par	Net short-term capital gain or (loss) Combine lines 1				7_	-26.
ıaı	See instructions for how to figure the amounts to enter on			(g) Adjustments	to gain	(h) Gain or (loss)
	the lines below	(d) Proceeds	(e) Cost	or loss from For	n(s)	Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	8949, Part II, lini column (g)	e 2,	the result with column (g)
8 8	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
81	Totals for all transactions reported on Form(s) 8949 with Box D checked				•	
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	26,924.	" , ,			26,924.
		20/321.		_ <u></u>		20,321.
11	Enter gain from Form 4797, line 7 or 9				11	3,805.
12	Long-term capital gain from installment sales from F	orm 6252, line 26 or 37	'		12	
13	Long-term capital gain or (loss) from like-kind exchan	ges from Form 8824			13	
14	Capital gain distributions (see instructions)	• • • • • • • • • •			14	
15	Net long-term capital gain or (loss) Combine lines 8	a through 14 in column	h	· · · · · · · · · · · · · · · · · · ·	15	30,729.
Part						
16	Enter excess of net short-term capital gain (line 7) ov	ver net long-term capita	l loss (line 15)		16	
17	Net capital gain Enter excess of net long-term capital	al gain (line 15) over ne	et short-term capital lo	ess (line 7)	17	30,703.
18	Add lines 16 and 17 Enter here and on Form 1120,	· •				
	the corporation has qualified timber gain, also comple Note. If losses exceed gains, see Capital losses in the			• • • • • • • •	18	30,703.

ATTACHMENT 1

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

INCOME (LOSS) FROM PARTNERSHIPS

-10,136.

ATTACHMENT	2

PART I - LINE 12 - OTHER INCOME

IRC 512(A)(7) QUALIFIED TRANSPORTATION FRINGE

PART I - LINE 12 - OTHER INCOME

130,328.

130,328.

ATTACHMENT	3	

FORM 990T - PART II - LINE 20 - CHARITABLE CONTRIBUTIONS

UNRELATED TRADE OR BUSINESS INCOME ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION	150,895.
LESS: DEDUCTIONS WITHOUT CHARITABLE CONTRIBUTIONS AND DPAD	15,796.
CHARITABLE CONTRIBUTION LIMITATION (10%)	* 10% 13,510.
CHARITABLE CONTRIBUTION	13,510.
CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)	13,510.

ATTACHMENT 4

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION UNDER SECTION 199

TAX PREPARATION FEES INVESTMENT MANAGEMENT FEES

4,875. 1,631.

PART II - LINE 28 - OTHER DEDUCTIONS

6,506.

52-1384139 ATTACHMENT 5

FORM 990-T: FISCAL YEAR CORPORATION TAX COMPUTATION APPLYING BI	LENDED TAX RATE
1 UNRELATED BUSINESS TAXABLE INCOME (PAGE1, PART II, LINE 34). 2 TAX ON LINE 1 FIGURED USING THE TAX RATE SCHEDULE OR TAX	120,589.
COMPUTATION WORKSHEET FOR MEMBERS OF A CONTROLLED GROUP 3 TAX ON LINE 1 FIGURED USING THE 21% RATE	30,280. 25,324.
4 MULTIPLY LINE 2 BY THE NUMBER OF DAYS 92	•
IN THE CORPORATION'S TAX YEAR BEFORE 01/01/2018	2,785,760.
IN THE CORPORATION'S TAX YEAR AFTER 12/31/2017	6,913,452.
IN THE CORPORATION'S TAX YEAR	7,632.
7 DIVIDE LINE 5 BY THE TOTAL NUMBER OF DAYS 365 IN THE CORPORATION'S TAX YEAR	18,941.
8 ADD LINES 6 AND 7: THE TOTAL TAX FOR THE FISCAL YEAR	26,573.

Form 990-T, Part I, Line 20 FYE 9/30/2018

Charitable Contributions Carryforward

Fiscal Year Ended	Charitable Contributions Made	Charitable Contributions Used	Carryforward available for next year	Period Charitable Contributions used
9/30/2017	240,084,503	(424)	240,084,079	2016
		(13,510)	240,070,569	2017
9/30/2018	221,581,336		461,665,415	N/A

Carryforward to FYE 9/30/2019

461,665,415

Form 8949

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Social security number or taxpayer identification number

Department of the Treasury Internal Revenue Service Name(s) shown on return

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

NATIONAL FISH AND WILL	DLIFE FOUR		52-1384139							
Before you check Box A, B, or C below, statement will have the same informat broker and may even tell you which bo	ion as Form 10		, , ,							
Part I Short-Term. Transactions, see page		ng capital a	ssets you held	1 year or less	are short te	rm For long-te	erm			
Note: You may aggree reported to the IRS and Schedule D, line 1a	and for whic	h no adjustr	nents or codes	are required	Enter the to	otals directly on	1			
You must check Box A, B, or C be complete a separate Form 8949, for one or more of the boxes, com	page 1, for e	ach applicab	le box If you ha	ve more short-	term transact	term transactions tions than will fit o	s, n this page			
(A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	reported on F	orm(s) 1099	-B showing basis			e Note above)				
1 (a)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if a If you enter an a enter a coo See the sepa	(h) Gain or (loss) Subtract column (e)				
Description of property (Example 100 sh XYZ Co)					(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)			
ST CAPITAL GAIN (LOSS)	VAR	VAR	-26				-26			
		_								
			-							
				·						
						<u></u>				
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above	here and incl	ude on your								

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

For Paperwork Reduction Act Notice, see your tax return instructions.

above is checked), or line 3 (if Box C above is checked)

Form 8949 (2017)

-26

Form 8949 (2017) Attachment Sequence No. 12A Page 2 Social security number or taxpayer identification number Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side NATIONAL FISH AND WILDLIFE FOUNDATION 52-1384139 Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1 Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D. line 8a, you aren't required to report these transactions on Form 8949 (see instructions) You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss (h) if you enter an amount in column (g) (e) (c) enter a code in column (f) Gain or (loss) (d) Cost or other basis (b) (a) Date sold or See the separate instructions Subtract column (e) Proceeds See the Note below Description of property Date acquired from column (d) and disposed (sales price) and see Column (e) (Example 100 sh XYZ Co) (Mo, day, yr) (Mo , day, yr) combine the result (see instructions) in the separate with column (g) instructions Code(s) from Amount of adjustment instructions LT CAPITAL GAIN (LOSS) VAR VAR 26,924 26,924

2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, Ilne 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)

26,924 26.924 Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2017)

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

Attachment

OMB No 1545-0172 20**17**

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

► Go to www irs gov/Form4562 for instructions and the latest information.

Attachment Sequence No 179

ldentifying number Name(s) shown on return 52-1384139 NATIONAL FISH AND WILDLIFE FOUNDATION Business or activity to which this form relates GENERAL DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing 6 (a) Description of property Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 . . Carryover of disallowed deduction to 2018 Add lines 9 and 10, less line 12 . Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part II. Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 14 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 21 Part III MACRS Depreciation (Don't include listed property) (See instructions) 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. Section B - Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (a) Classification of property placed in (e) Convention (g) Depreciation deduction (business/investment use only - see instructions) service 3-year property 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental property 27 5 yrs ММ S/L ММ S/L Nonresidential real MM S/L Section C - Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/L 40 yrs c 40-year ММ S/L Part IV Summary (See instructions) 22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 21. here and on the appropriate lines of your return Partnerships and S corporations - see instructions,

23 For assets shown above and placed in service during the current year, enter the

52-1384139

Page 2

Pa		perty (Include					ehicles	s, ce	rtaın aır	craft, (certain	comp	outers,	and p	ropert	
		itertainment, rec					l milosi	-0 rot	o or do	duction	loace i	ovnone.		uloto en	alu 24a	
	24b. column	ny vehicle for whis (a) through (c) o	of Section A	e using	y the s Section	B. and	Section	Cıfa.	e or det policable	aucung	lease (expense	e, comp	nete of	ily 24a	
		Depreciation and									rpasse	enger au	utomobi	es)		
24	a Do you have evidence								24b If "					Yes	X No	
	(a)	(b)	(c)		(4)		(e)		(f)		(g)		(h)		(1)	
	Type of property (list vehicles first) Date placed in service Business/ investment in percentage					Basis for depreciation (business/investment use only)		Recovery period	Method/ Convention		Depreciation deduction		Elected section 179 cost			
25	Special depreciation the tax year and us										. 25					
26	Property used mor	e than 50% in a q	ualified busi	ness us	se											
				%												
			%									<u> </u>		<u> </u>		
_			<u> </u>	%							<u></u>		L			
27	Property used 50%	or less in a quali	fied busines													
_			 	%		_			S/L -		ļ		ļ			
_				%				S/L -			 		4			
_	Add	 	45 5 03	%			04	4	L	S/L -	T	 -		_		
28 29	Add amounts in co											<u></u>				
	Add amounts in co	idiffi (i), lifle 20 L			Inform					<u></u>	· · · · ·	<u></u> .	. 29			
Cor	mplete this section fo	r vehicles used hv					-			er" or r	elated r	nerson	if you r	rovided	vehicles	
	our employees, first an														verno.c.	
_					(a)		b)	Ι	(c)	(d)		(e)	(f)	
30	Total business/investment miles driven during		en during	Vehicle 1		Veh	Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		Vehicle 6	
•	the year (don't include commuting miles)			1												
31	Total commuting m	ııles driven during	the year .													
32	Total other p	ersonal (nonco	mmuting)					1	_					ļ		
	miles driven							<u> </u>								
33	Total miles drive															
	lines 30 through 32				г			ļ.,	T	ļ	 	ļ.,			T	
34	Was the vehicle		-	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
	use during off-duty				+		 -	-		-	 	<u> </u>	┼			
35	Was the vehicle	•													1	
20	than 5% owner or r	•			+			 	+	 	 		 -			
30	Is another vehicle		-												ĺ	
_	use?	ction C - Questi		nlovo	re Mh	Provi	ida Val	niclos	for Hea	by Th	oir Em	ploye		1		
Δno	swer these question													who a	ron't	
	re than 5% owners o				CPHOII		picting	000	3/1 B 101	vornoic.	o uscu	by citi	picycco	W110 Q		
37	Do you maintain a	a written policy	statement t	hat nr	ohihits	all ner	sonal u	se of	vehicles	ınclud	dina co	mmutir	na hv	Yes	No	
٠.	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?															
38	Do you maintain a	a written policy	statement i	that pr	ohibits	persor	al use	of ve	hicles, e	xcept o			-			
	employees? See th	e instructions for	vehicles usi	ed by c	orporat	e office	rs, direc	ctors, c	or 1% or	more o	wners					
39	•	of vehicles by en	iployees as	person	al use?											
40	Do you provide m	iore than five ve	hicles to y	our en	nployee	s, obta	in infor	matio	n from	your er	nployee	es abo	ut the		l	
	use of the vehicles,						• • • •									
41	Do you meet the re Note: If your answ	quirements conce er to 37, 38, 39, 4	erning qualif 10, or 41 is	ried aut "Yes," (omobile don't co	e demo mplete	nstratio Section	n use' B for	(See ins	truction red vel	ns). nicles					
Pa	rt VI Amortizati															
	(a) Description of	(a) (b) Date amo		tization (C)				(d) Code section		(e) Amortization period or Amortization		(f) ation for this year				
42	Amortization of cos	ts that begins dur	ing your 20	17 tax	year (se	e instri	ictions)							 -		
		_	<u> </u>		Ţ <u></u>											
_					<u> </u>											
	Amortization of cos	_	-								<i></i>	43				
44	Total. Add amount	s in column (f) Se	ee the instr	uctions	for whe	ere to re	port	<u> </u>	<u> </u>	<u> </u>	<u></u>	44				
	<u> </u>							_			-		Fo	m 4562	2 (2017)	