Form **990**

Return of Organization Exempt From Income Tax

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.

Open to Public Inspection

OMB No. 1545-0047 2022

Depa Inter	artment of th nal Revenue	he Treasury e Service	Do not ente Go to www.i	er social securi rs.gov/Form99	ty numbers on t Ø for instructi	his form as it i ons and the	may be made a latest info	e public. ormation			Inspect	
Α	For the 2	2022 calendar	year, or tax year begin	-			and ending			,	20	
В	Check if ap	oplicable: C	<u> </u>					-	D Employ	er identi	ification numbe	r
	Addres	ss change Wi	lldcat Ridge Sam	nctuary					93-1	L320	051	
	Name	change 21	1389 Hazelnut R	idge Rā					E Telepho	ne numt	ber	
	Initial	return	cotts Mills, OR	97375					(503	3) 8	73-2309	
	Final ret	turn/terminated										
	Ameno	ded return							G Gross re	ceipts	\$60)7,881.
	Applic	ation pending F	Name and address of principal	l officer:				.,	a group return			Yes X No
			me As C Above					H(b) Are all If "No,"	subordinates ' attach a list.	included See ins	d? structions.	Yes No
	Tax-exer	mpt status: X	501(c)(3) 501(c) () (in	sert no.)	4947(a)(1) or	527					
J	Websi		wildcatridgesar	nctuary.	org	i		H(c) Group	exemption nu			
ĸ		-	Corporation Trust	Association	Other	LY	ear of formation	on: 200	1 M s	tate of l	egal domicile:	or
Pa		Summary										
			the organization's missi									
e			<u>ats_that_have_k</u> he_public_about									
nan		s pets.			per cris	515. []		TUEDIC		<u>110 v</u>		
Governance		neck this box	if the organization	n discontinue	ed its operation	ons or dispo	sed of mo	re than 2	5% of its i	net as		
ğ			g members of the gover	ning body (F	Part VI, line 1	a)				3		8
80 80			endent voting members							4		6
/itie			individuals employed in volunteers (estimate if							5 6		10
Activities &			business revenue from F							о 7а		<u> </u>
q			siness taxable income						1	7ŭ 7b		0.
								-	rior Year		Curren	
<i>a</i>	8 Co	ontributions and	d grants (Part VIII, line	1h)					730,5	59.	6	07,881.
'nu		-	revenue (Part VIII, line	.								
Revenue			me (Part VIII, column (A	•								
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)							8,4		<u> </u>	07 001
			ar amounts paid (Part I						738,9		61	07,881.
				-					1,4	50.		461.
		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							219,3	67	2.	36,600.
ses		Professional fundraising fees (Part IX, column (A), line 11e)							217,5	07.	2.	50,000.
Expenses			expenses (Part IX, col									
Ä		0			·		1,920.		272 4	27		
		•	(Part IX, column (A), lir Add lines 13-17 (must e						373,4 594,2			<u>62,579.</u>
			penses. Subtract line 1					•	144,7			99,640. 91,759.
۲8 8					<u> </u>			Reginnin	ng of Curren		End of	-
Net Assets or Fund Balances	20 To	otal assets (Pa	rt X, line 16)					3	, 310, 2			18,454.
Ass I Bal	21 To	tal liabilities (F	Part X, line 26)						, , -	0.		0.
Funct	22 Ne	et assets or fur	nd balances. Subtract li	ne 21 from li	ne 20			. 1	,310,2	13.	1,2	18,454.
		Signature E	Block					I	<u> </u>		//	
Unde	er penalties	of perjury, I declare	e that I have examined this retu (other than officer) is based on a	Irn, including acc	ompanying sched	ules and statem	nents, and to t	he best of m	iy knowledge	and beli	ef, it is true, co	rrect, and
com	plete. Decla	iration of preparer (other than officer) is based on a	all information of	which preparer h	as any knowled	ge.					
•		Signature of office	or					Date				
Siq He	jn ro	5										
пе	re	Michael Type or print nam					P	reside	ent			
		Print/Type prepa		Preparer's sign	ature		Date		Check	if	PTIN	
Ра	id	51- F 5F			d Prepar	er	5/02/	23	self-employe	<u>"</u> "		
	eparer	Firm's name			a rrepar	ς τ	57027	2.5				
Üs	e Only	Firm's address							Firm's EIN			
	-								Phone no.			
May	/ the IRS	discuss this r	eturn with the preparer	shown abov	e? See instru	ictions					. Yes	No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	n 990 (2022)	Wildcat	Ridge	anctuary	93-1	320051	Page 2
Par	t III State	ement of P	rogram S	ervice Accomplishments			
				a response or note to any line in this Part III			
1	Briefly descr	-					
				ary to captive born wildcats			
				ith our facility. Educate t	<u>he public about exo</u>	<u>tic pet c</u>	risis.
	_Promote	e_ideolog	y_of_NC	wild_animals_as_pets			
2	Did the organ	ization underts	ako anv sign	ficant program services during the year which we	are not listed on the prior		
2	Form 990 or		and any sign			Yes	X No
		ribe these new	v services or				
3				g, or make significant changes in how it cond	ucts, any program services?	Yes	X No
•		ribe these cha					<u> </u>
4	Describe the	organization	's program	ervice accomplishments for each of its three	largest program services, as i	measured by e	expenses.
	Section 501((c)(3) and 501	(c)(4) orga	izations are required to report the amount of service reported.	grants and allocations to othe	rs, the total ex	(penses,
		, 11 arry, 101 e	acii piograi	i service reported.			
/12	(Code:) (Evn	enses \$	607,189. including grants of $\$$) (Revenue	Ś	
44	·			ary to 41 captive born wildc	/ \		,
				ith our facility. Resident			
				and Caracals. Educate the p			
				wild animals as pets.			<u> </u>
	11011010	10001091					
4b	(Code:) (Exp	enses \$	including grants of \$) (Revenue	\$)
4c	(Code:) (Exp	enses \$	including grants of \$) (Revenue	Ś)
	(0000.) (itevenue	+	/
4d	Other progra	m services (Describe on				
	(Expenses	\$		including grants of \$) (Revenue \$)
	Total program	m service exp	oenses	607,189.			
BAA				TEEA0102L 09/01/22		Form	990 (2022)

Form 990 (2022)Wildcat Ridge SanctuaryPart IVChecklist 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	X	
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		Х
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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? <i>If "Yes," complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 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		Х
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		Х
d	I 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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	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
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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		Х
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		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

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Form 990 (2022)

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? <i>If "Yes," complete Schedule J</i> .	23		Х
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 a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part l</i> .	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26	Х	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, 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? <i>If "Yes," complete Schedule L, Part III.</i>	27		X
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, 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		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .	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? <i>If "Yes," complete Schedule R, Part I.</i>	33		X
	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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
1~	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3		Yes	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	

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.

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No

Х

Yes

22

93-1320051

Form 990 (2022)	Wildcat	Ridge	Sanctuary	Y
Part IV	Check	list of Re	quired S	chedules	(continued)

BAA

Form	990 (2022) Wildcat Ridge Sanctuary 93-13200	51	F	Page 5
Part				
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a 1	.0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	Х	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	. 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5-		. 5a		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	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?			x
	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).	00		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
ŭ	services provided to the payor?	. 7a		Х
	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
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	. 70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
0	Form 1098-C?	. 7h		
ð	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		X
٥	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?			<u> </u>
	Section 501(c)(7) organizations. Enter:	. 55		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
	Section 501(c)(12) organizations. Enter:	-		
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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	_		
	Enter the amount of reserves on hand			X
	Did the organization receive any payments for indoor tanning services during the tax year?			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	. 14b		<u> </u>
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
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	. 16		Х
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 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 O.								
b	Enter the number of voting members included on line 1a, above, who are independent 1b								
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee? See Schedule 0	2	Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6		Х					
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
	The governing body?	8a	Х						
b	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 reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni		ode.)					
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		Х					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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	Х						
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O								
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> See. Schedule.O	12c	Х						
13	Did the organization have a written whistleblower policy?	13		Х					
14	Did the organization have a written document retention and destruction policy?	14	Х						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a		Х					
b	Other officers or key employees of the organization	15b		Х					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
	List the states with which a copy of this Form 990 is required to be filed OR WA								
				 y)					
	Own website Another's website X Upon request X Other (explain on Schedule O) S	See S	Sch.	0					

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O

TEEA0106L 09/01/22

20 State the name, address, and telephone number of the person who possesses the organization's books and records. Catt Tuller 21389 Hazelnut Ridge Rd Scotts Mills or 97375 (503) 873-2309

Section A. Governing Body and Management

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.

1a Enter the number of voting members of the governing body at the end of the tax year.....

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Х

Yes No

8

Form 990 (2022) Wildcat Ridge Sanctuary	93-1320051	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	Compensated Employee	es, and
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 Compensat	ted 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.

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

	(C)									
(A) Name and title	(B) Average hours per	is	s both dire	an o ctor/	officer trust			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Cheryl Tuller	40									
Executive Dir.	0	X		Х				0.	0.	0.
_(2) Ian_Ford	2									
Director	0	Х						0.	0.	0.
_(3)_Jan_Vales	2									
Director	0	Х						0.	0.	0.
_(4) James Caliva	2									
Director	0	Х						0.	0.	0.
_(5) Linda Melton	2									
Director	0	Х						0.	0.	0.
_(6) Cheryl Starr	2									
Director	0	X						0.	0.	0.
_(7) Michael Tuller	2									
President	0			Х				0.	0.	0.
(8) Angi Ford	2									
Secretary/Treas	0			Х				0.	0.	0.
_(9)		-								
(10)		-								
(11)		-								
(12)		-								
(13)		-								
						$\left \right $				
BAA	TEEA0	107L	09/01/	/22						Form 990 (2022)

Form 990 (2022) Wildcat Ridge Sanctuary 93-1320051 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		(B)			(0	C)						
	(A)	Average			heck		than		(D)	(E)	(F))
	Name and title	hours per week	offic	, unie cer ar	nd a d	direct	is both or/trus	tee)	Reportable compensation from the organization	Reportable compensation from related organizations	Estimated of oth	ner
		(list any hours for	or dir	Institu	Officer	Key employee	Highest cc employee	Former	(W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensat the organ and rel	ization
		related organiza	Individual trustee or director	nstitutional trustee	Q	anplo	ist co byee	P			organiza	
		- tions below	trust	3 trus		yee	mper					
		dotted line)	8	stee			Highest compensated employee					
(15)												
<u></u>												
(16)												
(17)												
<u></u>												
(18)												
(19)												
(10)_												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
	Subtotal	on A						•••	0.	0.		0.
	Total (add lines 1b and 1c)							· · ·	0.	0.		0.
	Total number of individuals (including but not limited										ensation	
	from the organization 0											
3	Did the organization list any former officer, direc	tor tructe			mnla		or	hiał	ast companyated	employee	Ye	es No
Ū	on line 1a? If "Yes,"complete Schedule J for suc	h individu	al								3	X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportab	le co 50 0	mpe	nsa If "	ition Yes	and	oth	er compensation	from		
	such individual										. 4	X
5	Did any person listed on line 1a receive or accrude for services rendered to the organization? If "Yes	e compen s," comple	isatic e <i>te S</i>	n fro cheo	om : dule	any 9 <i>J f</i> a	unre or su	late ch p	d organization or	individual	5	X
	tion B. Independent Contractors									¢100.000 (
-	Complete this table for your five highest compen compensation from the organization. Report compen	sated inde	epen the c	dent alen	dar <u>y</u>	ntra year	endi	tha ng v	t received more the vith or within the or	an \$100,000 of ganization's tax year		
	(A) Name and business addi	ress							(B) Description of	of services	(C) Compensa	ation
									20001010110		2 0	
2	Total number of independent contractors (including b	out not lim	ited to	o tho	se l	isteo	abo	ve)	who received more	than		
	\$100,000 of compensation from the organization	0										

Form 990 (2022) Wildcat Ridge Sanctuary Part VIII Statement of Revenue

93-1320051

Page 9

1 41	U VI	Check if Schedule		a resp	onse or note to an	v line in this Part V			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ភូ ឆ	1a	Federated campaigns		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues		1b					
a, G Am	С	Fundraising events		1c	10,000.				
ia di	d	Related organizations		1d					
si is	e	Government grants (contrib		1e					
ē ē	T	All other contributions, gifts similar amounts not include		1f	597,881.				
털	g	Noncash contributions inclu	uded in		557,001.				
t p		lines 1a-1f							
	h	Total. Add lines 1a-11	t			607,881.			
nue	20			+	Business Code				
eve	2a								
e B	b								
ivio	c c								
Š	e u								
Iran	f	All other program ser	rvice reven						
Program Service Revenue		Total. Add lines 2a-21							
	3	Investment income (inc							
	-	other similar amounts	s)						
	4	Income from investm			•				
	5	Royalties							
				Real	(ii) Personal				
		Gross rents 6	-						
		Less: rental expenses 6 Rental income or (loss) 6	ib						
		d Net rental income or (loss) 7a Gross amount from sales of assets			(ii) Other				
	7a				() 0 0.101				
	.	other than inventory	'a						
	b	Less: cost or other basis and sales expenses 7	'b						
	с	Gain or (loss) 7	/c						
	d	Net gain or (loss)							
ø	8a	Gross income from fundrais	sina events						
n		(not including \$	10,00	0.					
eve		of contributions reported or	-						
č		See Part IV, line 18		8a					
Other Revenue		Less: direct expenses		8b					
δ		Net income or (loss)		aising e	vents				
	9a	Gross income from gaming See Part IV, line 19	j activities.	9a					
	ь	Less: direct expenses		9b					
		Net income or (loss)		ng activ	ties				
	100	Gross sales of inventory, le returns and allowances		10a					
		Less: cost of goods s		1 0 b					
	C	Net income or (loss)	trom sales	ot inve	-				
SI	11-				Business Code				
Miscellaneous Revenue	11a b c d								
ella.	c								
Sc. Re	d	All other revenue	·						
Ξ		Total. Add lines 11a-							
		Total revenue. See in				607,881.	0.	0.	0.

Form 990 (2022) Wildcat Ridge Sanctuary Part IX Statement of Functional Expenses

0.

0.

21,920.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX... (B) (D) (A) Total expenses (C) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Management and general expenses Program service Fundraising expenses expenses Grants and other assistance to domestic organizations and domestic governments. 1 See Part IV, line 21..... 461 461 Grants and other assistance to domestic 2 individuals. See Part IV, line 22.....

3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16			
4	Benefits paid to or for members			
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.
7	Other salaries and wages	217,681.	195,913.	21,768.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		,	,
9	Other employee benefits			
0	Payroll taxes	18,919.	17,027.	1,892.
1	Fees for services (nonemployees):		/	
а	Management			
b	Legal	8,250.		8,250.
С	Accounting	5,317.		5,317.
d	Lobbying			
е	Professional fundraising services. See Part IV, line 17			
f	Investment management fees			
-	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)			
2	Advertising and promotion.	21,920.		
3	Office expenses	29,764.		29,764.
4	Information technology			
5	Royalties			
6	Occupancy			
7	Travel	314.	314.	
8	Payments of travel or entertainment expenses for any federal, state, or local public officials			
9	Conferences, conventions, and meetings			

Interest Payments to affiliates..... 22 Depreciation, depletion, and amortization Insurance 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 O.)

a Animal Care 120,465. 120,465 100,000 b Legal_Settlement____ 100,000 Property_Maintenance_ 42,291 42,291 d Utilities____ 18,299 16,469. 1,830 e All other expenses..... 42,052. 40,342. 1,710. 25 Total functional expenses. Add lines 1 through 24e. . . . 699,640. 607,189. 70,531. Joint costs. Complete this line only if the organization reported in column (B)

28,620.

45,287.

28,620.

45,287.

joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720).....

26

3 (

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9 (10 F

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С

F Δ 5

21,920.

Form 990 (2022) Wildcat Ridge Sanctuary Part X Balance Sheet

		(A) Beginning of year		(B) End of year
1	Cash – non-interest-bearing	176,284.	1	107,48
2	Savings and temporary cash investments.		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	500.	5	
6				
	section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net		7	
8			8	
9	Prepaid expenses and deferred charges		9	
10	a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b Less: accumulated depreciation 10b 194, 387.	1,129,209.	1 0 c	1,106,74
11		1/10/1001	11	1/100//1
12			12	
13	the second se		13	
14			14	
15	-	4,220.	15	4,22
16		1,310,213.	16	1,218,45
17	Accounts payable and accrued expenses		17	
18			18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
23			23	
23			23	
25			27	
	and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
26		0.	26	
	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
27		1,310,213.	27	1,218,45
28		1,310,213.	28	1,210,43
27 28 30 31 32 33	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.		20	
29			29	
30			30	
31			31	
32	-	1,310,213.	32	1,218,45
33			33	
1 33	Total habilities and het assets/fullu balances.	1,310,213.	33	1,218,45 Form 990 (2

		3-13	20051		Pa	ige 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)		1	6	07,8	381.
2	Total expenses (must equal Part IX, column (A), line 25)		2	699,64		
3	Revenue less expenses. Subtract line 2 from line 1	3	3	-	91,7	759.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		1	1,3	10,2	213.
5	Net unrealized gains (losses) on investments	!	5			
6	Donated services and use of facilities	🤇	5			
7	Investment expenses		7			
8	Prior period adjustments	8	3			
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)	1,2	18,4	154.
Pai	t XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					÷Ц
			,		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	iewed	on a			
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 se basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	parate				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	udit,		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Guidance, 2 C.F.R Part 200, Subpart F?		iform	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		
BAA	TEEA0112L 09/01/22			Form	99 0	(2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

2022	
Open to Public	

OMB No. 1545-0047

Employer identifies	tion

Name of the organization	ame of the organization Employer identification number					
Wildcat Ridge Sanctuary					93-132005	1
Part I Reason for Public Cha	arity Status. (All o	organizations must	comple	ete this	s part.) See instruc	ctions.
The organization is not a private found	dation because it is: (For lines 1 through 12,	check o	nly one	box.)	
1 A church, convention of church	hes, or association of cl	nurches described in sec	tion 1 70(b)(1)(A)(i).	
2 A school described in section	on 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)			
3 A hospital or a cooperative h	hospital service organ	ization described in se	ction 170)(b)(1)(A)(iii).	
4 A medical research organiza	ation operated in conju	unction with a hospital	describe	d in sec	tion 1 70(b)(1)(A)(iii) . E	inter the hospital's
name, city, and state:						
5 An organization operated for section 170(b)(1)(A)(iv). (Co	r the benefit of a colle omplete Part II.)	ege or university owned	or operation	ated by	a governmental unit de	escribed in
6 A federal, state, or local gov	vernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).	
7 An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial p (Complete Part II.)	part of its support from a	governm	ental uni	t or from the general pub	olic described
8 A community trust described	d in section 170(b)(1)(A)(vi). (Complete Part	II.)			
9 An agricultural research organ or university or a non-land-gra university:						
10 X An organization that normal from activities related to its investment income and unre June 30, 1975. See section	exempt functions, sub elated business taxable	oject to certain exceptic e income (less section	ns; and	(2) no r	nore than 33-1/3% of it	ts support from gross
11 An organization organized a	ind operated exclusive	ely to test for public saf	ety. See	section	i 509(a)(4).	
12 An organization organized a or more publicly supported o lines 12a through 12d that d	organizations describe	ed in section 509(a)(1) o	or sectio	n 509(a))(2). See section 509(a)	
a Type I. A supporting organizati organization(s) the power to re complete Part IV, Sections A	ion operated, supervise	11 5 5) the supported on. You must
 b Type II. A supporting organiz management of the supporting must complete Part IV, Sect 	zation supervised or c organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organization	having control or ion(s). You
c Type III functionally integrated organization(s) (see instruct	I. A supporting organizat	tion operated in connectio	n with, ar A. D. an	nd functio d E.	onally integrated with, its	supported
d Type III non-functionally integrated. The functionally integrated. The instructions). You must com	organization generally	v must satisfy a distribu	nnection tion requ	with its s uiremen	supported organization(s) t and an attentiveness) that is not requirement (see
e Check this box if the organiz integrated, or Type III non-fu	zation received a writt	en determination from		that it is	a Type I, Type II, Type	e III functionally
f Enter the number of supported						
g Provide the following information	on about the supported	d organization(s).				
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						
10141						

Wildcat Ridge Sanctuary

93-1320051

Page 2

Dart II	Support Schodula for Organizations Day	cribed in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi
Farti	Support Scheudle for Organizations Des	Cribeu III Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi

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.)

Section A. Public Support

					•		
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	vities, etc. (see ins	structions)				
13	First 5 years. If the Form 990 is organization, check this box and	for the organization for the organization for the organization of the second state of	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pu	blic Support P	Percentage				
14	Public support percentage for 20)22 (line 6, colum	n (f), divided by li	ne 11, column (f))	14	%
15	Public support percentage from	2021 Schedule A,	Part II, line 14			15	%
16a	16a 33-1/3% support test–2022. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.						
b	b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	7a 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a	nd-circumstances	s test, check this I	box and stop here	e. Explain in Part	VI how the
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

BAA

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	tion A. Public Support	· · ·	·	· · ·			
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	495,099.	406,463.	671,594.	730,779.	607,881.	2,911,816.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	495,099.	400,403.	071,394.	130,119.	007,001.	0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	495,099.	406,463.	671,594.	730,779.	607,881.	2,911,816.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the vear.						
~	Add lines 7a and 7b.	0.	0.	0.	0.	0.	0.
	Public support. (Subtract line	0.	0.	0.	0.	0.	0.
	7c from line 6.)						2,911,816.
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	495,099.	406,463.	671,594.	730,779.	607,881.	2,911,816.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	433,033.	400,403.	071,354.	130,119.	007,001.	0.
-	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
	Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
	Total support. (Add lines 9, 10c, 11, and 12.)	495,099.	406,463.	671,594.	730,779.	607,881.	2,911,816.
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or fi	fth tax year as a s	section 501(c)(3)	
	tion C. Computation of Pul			10 1			100.55
	Public support percentage for 20						100.00 %
	Public support percentage from 2					16	100.00 %
	tion D. Computation of Inv		•			ı	
17	Investment income percentage f	•		2	())		0.00 %
18	Investment income percentage f						0.00 %
	33-1/3% support tests – 2022. If t is not more than 33-1/3%, check	, this box and stop	here. The organi	zation qualifies a	s a publicly suppo	orted organization	X
	33-1/3% support tests — 2021. If t line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qua	alifies as a publicl	y supported organ	nization
20 <u> </u> <u> </u>	Private foundation. If the organiz	zation did not cheo	ter a box on line 1		neck this box and		

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Page 4

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
	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). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b	2		
b	and 3c below. 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	3a		
	made the determination. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	3b		
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and	3c		
	<i>if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled</i>	4a		
	or supervised by or in connection with its supported organization that does not have an IRS determination under	4b		
L	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.	4c		
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).	5a		
	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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	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	C		
	the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
	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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	7		
8	Did the organization make a loan to a disgualified person (as defined in section 4958) not described on line 7? If "Yes,"			
	complete Part I of Schedule L (Form 990).	8		
	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))? <i>If "Yes," provide detail in Part VI.</i>	9a		
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? <i>If "Yes," provide detail in Part VI.</i>	9b		
с	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 .	9с		
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)? <i>If "Yes,"</i> answer line 10b below.	10a		
h	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.)	1 0 b		

Part IV Supporting Organizations (continued)	
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

Wildcat Ridge Sanctuary

b A family member of a person described on line 11a above?

C A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

Schedule A (Form 990) 2022

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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 played			
	in this regard.	3		

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).
 - a The organization satisfied the Activities Test. Complete line 2 below.
 - **b** | The organization is the parent of each of its supported organizations. *Complete line 3 below.*
 - c | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

Yes

No

11b 11c

1

2

Yes No

Yes

No

Schedule A (Form 990) 2022 Wildcat Ridge Sanctuary Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Page 6

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a nen functionally into	aratod	Tupo III supporting or	appization

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

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Schedule A (Form 990) 2022

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	edule A (Form 990) 2022 Wildcat Ridge Sanctu	ary			0051 Page 7
-	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continue	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pur	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization in Part VI). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributic Pre-2022	ons	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
Ŀ	• From 2018				
	From 2019				
	From 2020				
	• From 2021				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ł	Applied to 2022 distributable amount				
	i Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
Ŀ	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
C	Excess from 2021				
e	Excess from 2022				

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Schedule A (Form 990) 2022

(Fo	HEDULE D rm 990)	Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.				OMB No. 1	22
	tment of the Treasury al Revenue Service	Go to www.irs.	gov/Form990 for instructions and	I the latest informat		Open to Inspecti	on
Name	of the organization				Employer id	lentification nu	mber
Wil	dcat Ridge	Sanctuary			93-132	0051	
Pa			nor Advised Funds or Othe	er Similar Fund			
	Complete	if the organization answered	"Yes" on Form 990, Part IV, line 6.				
	-		(a) Donor advised fun	ds	(b) Funds and	other accou	nts
1		end of year					
2		ants from (during year)					
4		at end of year					
5	Did the organizati are the organizati	ion inform all donors and dor ion's property, subject to the	nor advisors in writing that the as organization's exclusive legal cor	sets held in donor a	advised funds	Yes	No
6	Did the organizati	ion inform all grantees, dono	rs, and donor advisors in writing	that grant funds car	n be used only	_	
	impermissible pri	vate benefit?	t of the donor or donor advisor, or	for any other purp		Yes	No
Pai		vation Easements.				_	
_			"Yes" on Form 990, Part IV, line 7.				
1		nservation easements held by of land for public use (for exam	y the organization (check all that		a historiaally imp	ortant land	oroo
		natural habitat			a historically imp a certified historie		area
		of open space				e structure	
2			neld a qualified conservation contribution	ution in the form of a	conservation ease	ment on the	
	last day of the tax	x year.			Held at the	End of the	Tax Year
ä	a Total number of c	conservation easements			2a		
ł) Total acreage res	tricted by conservation ease	ments		2 b		
C	Number of conser	rvation easements on a certi	fied historic structure included in	(a)	2 c		
(historic structure	listed in the National Registe	n (c) acquired after July 25, 2006 r		2 d		
3	Number of conserv tax year	vation easements modified, trar	nsferred, released, extinguished, or t	erminated by the org	janization during th	e	
4			onservation easement is located				
5			garding the periodic monitoring, ints it holds?			Yes	No
6			inspecting, handling of violations, ar			iring the year	r
7	Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and er	forcing conservation	easements during	the year	
8	Does each conse and section 170(h	rvation easement reported or)(4)(B)(ii)?	n line 2(d) above satisfy the requi	rements of section	170(h)(4)(B)(i)	Yes	No
9	In Part XIII, desci include, if applica conservation ease	able, the text of the footnote	oorts conservation easements in i to the organization's financial stat	ts revenue and expe tements that describ	ense statement a bes the organizati	nd balance on's accour	sheet, and iting for
Pai	t III Organiz Complete	zations Maintaining Co if the organization answered	Ilections of Art, Historical [*] "Yes" on Form 990, Part IV, line 8.	Treasures, or O	ther Similar A	ssets.	
	historical treasure Part XIII the text	es, or other similar assets he of the footnote to its financia	r FASB ASC 958, not to report in Id for public exhibition, education Il statements that describes these	, or research in furt items.	herance of public	service, pro	ovide in
ł	following amounts	s relating to these items:	r FASB ASC 958, to report in its r or public exhibition, education, or re-				
	(i) Revenue inclu	uded on Form 990, Part VIII,	line 1		\$		
2	(ii) Assets includ	ed in Form 990, Part X	nistorical treasures or other similar	assets for financial of	ain provide the follo	lowing	
	amounts required	I to be reported under FASB	nistorical treasures, or other similar a ASC 958 relating to these items:	ussets for inidificial ye	מווו, אוטאומב נוופ 101	own ig	
ć	Revenue included	1 on Form 990, Part VIII, line n Form 990, Part V	1 Instructions for Form 990.		\$ م		
BAA	For Paperwork R	reduction Act Notice, see the	Instructions for Form 990	TEEA33011 07/06/	ې ۲۰۰۰ کې ۲۰۰۰ کې ۲۰۰۰ کې ۲۰۰۰ کې ۲۰۰۰ کې	ule D (Form	990) 2022

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L 07/06/22	Schedule D (F
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1 along the upgan calms accusation, accusasion, and other records, check any of the following that make significant use of its collection 1 along the upgan calms accusation, accusasion, and other records, check any of the following that make significant use of its collection 1 along the upgan calms accusation for future generations 1 preservation for future generations 1 along the upgan calms accusation for future generations 1 along the upgan calms accusation for future generations 1 be add to raise funds raher than to be maintained as part of the organization societ are used. How consider the upgan calms assets 1 be add to raise funds raher than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or 1 along the organization and part the upgan calms assets and include an amount on Form 990, Part X, line 21. 1 a bit or generation the upgan calms accusation with the upgan calms assets and include an amount on Form 990, Part X, line 21. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the organization include an amount on Form 990, Part X, line 21, for escore or custodial account liability. 1 along the upgan calms the arrangement in Part XIII. Once here if the esplanation has been provided on Part XIII. 1 along the the organization accue the asset in the arr	Schedule D (Form 990) 2022 Wilde	cat Ridge	Sanctuary		93-132		Page 2
a	Part III Organizations Main	taining Col	lections of Art, His	storical Treasures,	or Other Similar As	ssets (con	tinued)
b Scholary research c c Preservation for future generations 4 Powies a description of the organization's collections and explain how they further the organization's collection? No 5 During the year, did the organization solicit or receive dorations of art. historical treasures, or other similar assets Image: Solicital Science of a state that a state state that a state that a state that a state state t	items (check all that apply):	, accession, a			ake significant use of its	collection	
c ☐ Preservation for thurs generations 4 Parotes a description of the organization's collections and explain how they further the organization's collection? ☐ No 5 During the year, did the organization solid or receive donations of art. historical treasures, or other similar assets ☐ Yes' on Form 900, Part IV, line 9, or 7 Paroted a donation of form 990, Part X, line 21. ☐ Complete if the organization answered "Yes' on Form 900, Part IV, line 9, or 1 a is the organization and part of the organization answered "Yes' on Form 900, Part IV, line 9, or ☐ Complete if the organization answered "Yes" on Form 900, Part IV, line 9, or 1 a is the organization and part X, line 21. ☐ Complete if the organization and part IV, line 21. ☐ Complete if the organization and part IV, line 21. C Beginning balance. ☐ Complete if the organization include an amount on Form 900, Part X, line 21, for escrow or custodial account liability? ☐ Yes No Dart V Endowment Funds. Complete if the organization answered "Yes" on Form 900, Part IV, line 10. ☐ Part V Endowment Funds. Complete if the organization answered "Yes" on Form 900, Part IV, line 10. 1 a Beginning of year balance. ☐ Ourient year ☐ Oi Tree years back (d) Three years back (d) Three years back (d) For years back 1 A Complete if the organization answered "Yes" on Form 900, Part IV, line 10. ☐ <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>							
 Proving the scarption of the organization's collections and explain how they further the organization's exempt purpose in Part XII. Part W Excrow and Custodial Arrangements, Complete if the organization answered "Yes" on Form '990, Part IV, line 9, or reprint of an annual to form '990, Part X, line 21. 1 a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X, line 21. 1 a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X, line 21. 1 a is the organization any agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X, line 21. for ding balance. 1 a is the organization any agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X, line 21. for escrow or custodial account liability?. 1 a is the organization include an amount on Form '990, Part X, line 21. for escrow or custodial account liability? 1 a Beginning of year balance. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a and dusgnable of radiables, and constant line organizations 2 Provide the estimated percentage of the current year end balance (line 1g,		ationa	e 🔤 Other				
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets in the properties of the organization's collection's collec	4 Provide a description of the organiz		ons and explain how the	y further the organization's	s exempt purpose in		
to be sold to raise funds rather than to be maintained as part of the organization's collection? Ves No Part IV Excove and Custodial Arrangements. Complete if the organization answerd "Yes" on Form 990, Part X, Ine 21. 1<		tion solicit or	receive donations of ar	t. historical treasures. o	r other similar assets		_
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Get motions during the year. 1c 2 Did the organization include an amount on Form 990, Part X, line 21. for escrew or custodial account liability? Yes 2 Did the organization include an amount on Form 990, Part X, line 21. for escrew or custodial account liability? Yes Part V Endowment Funds. Complete if the organization naswered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance. (a) Current year b Contributions. (b) Prioryear c Not investment earnings, gains, and programs. (b) Prioryear and torses (c) For years back c Other expenditures for facilities and programs. (c) For years back d Carals or scholarships. (c) The organization on time shall be recented or quasi-endowment 3a Are there estimated percentage of the current year end balance (line 1g, column (a)) held as: a board designated or quasi-endowment a Carals or scholarships. (c) The organization shall be organization shall be required on schedule R? (c) Motinthe organization by:	to be sold to raise funds rather the	nan to be mai	ntained as part of the c	organization's collection?)		
on Form 390, Part X2.		i al Arrange orm 990, Part	ments. Complete if th X, line 21.	ne organization answered	"Yes" on Form 990, Par	t IV, line 9, o	r
b If Yes,* explain the arrangement in Part XIII and complete the following table:	1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other intermediary	for contributions or othe	er assets not included	Yes	No
c Beginning balance							
d Additions during the year. 1 d e Distributions during the year. 1 e 1 1 2 Ending balance. 11 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?. Yes Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back a Beginning of year balance. (a) Current year (b) Prior year (c) Two years back (d) Three years back a d diases (a) Current year (b) Prior year (c) Two years back (d) Three years back c Net investment earnings, gains, and losses (d) Grants or scholarships (d) Three years back (e) Four years back a d drants or scholarships (d) Grants or scholarships (d) Three years back (e) Four years back a d programs (f) and programs (f) and programs (f) Two years (f) Two years a d designated or quasi-endowment (f) (f) (f) Two years (f) Two years b Permanent endowment (Amount	
e Distributions during the year	0 0						
f Ending balance. 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back b Contributions. (a) Current year (b) Prior year (c) Two years back (d) Three years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back g End of year balance. (d) Grants or scholarships (d) Three years back (e) Four years back g End of year balance e. (d) Grants or scholarships (d) Three years back (e) Four years back g End of year balance (e) Four years (f) Headed prior facilities (f) Headed prior facilities a Board designated or quasi-endowment % (f) Privative expenses (g) Four years g End of year balance % (f) Previde the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment %	0,						
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance							
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Image: Check here if the organization answered "Yes" on Form 990, Part IV, line 10. 1 a Beginning of year balance. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1 a Beginning of year balance. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 6 Contributions. (b) Prior year (c) Two years back (d) Three years back (e) Four years back 6 Contributions. (c) Two years back (d) Three years back (e) Four years back 6 Contributions. (c) Two years back (d) Three years back (e) Four years back 6 Contributions. (d) Controlutions. (d) Three years back (e) Four years back 7 Administrative expensions. (d) Controlutions. (e) Controlutions. (e) Controlutions. 7 Administrative expenses. (e) Controlutions. (e) Controlutions. (e) Four years back 9 Erroride the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment (f) Preventages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment 1mods not in the possession of the organ	-					Vec	No
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance	-				- 1		
1 a Beginning of year balance							
1 a Beginning of year balance	Part V Endowment Funds.	Complete if t	he organization answere	d "Yes" on Form 990, Par	rt IV, line 10.		
b Contributions		(a) Current	year (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four ye	ears back
c Net investment earnings, gains, and losses	1 a Beginning of year balance						
and losses and losses and losses d Grants or scholarships and programs and programs e Other expenditures for facilities and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End of year balance and programs and programs g End organizations and programs and programs and programs g (i) Unrelated organizations isted as required on Schedule R? isted isted as required on Schedule R? g End of property (a) Cost or other basis (b) Cost or other b) Cost or other	b Contributions						
e Other expenditures for facilities and programs							
and programs	d Grants or scholarships						
g End of year balance	and programs						
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment * b Permanent endowment * c Term endowment * main percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other depreciation 1a Land. 779,000. 779,000. b Buildings. 205,646. 30,060. 175,586. c Leasehold improvements. 65,618. 41,235. 24,383. d Equipment. 249,644. 122,970. 126,674. 1,224. 122. 1,102. 1,106,745.	•						
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c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiii) Related organizations (iiii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. 1a Land. 779,000. 779,000. 1a Land. 779,000. 779,000. 1a Land. 205,646. 30,060. 175,586. c Leasehold improvements. 65,618. 41,235. 24,383. d Equipment <td>a 1</td> <td></td> <td>ō</td> <td></td> <td></td> <td></td> <td></td>	a 1		ō				
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Part VILand, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1 a Land.779,000.779,000.779,000.779,000.b Buildings.205,646.30,060.175,586.c Leasehold improvements.65,618.41,235.24,383.d Equipment249,644.122,970.126,674.e Other1,224.122.1,102.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.).1,106,745.		•				. 3b	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1 a Land.779,000.779,000.779,000.b Buildings.205,646.30,060.175,586.c Leasehold improvements.65,618.41,235.24,383.d Equipment249,644.122,970.126,674.e Other1,224.122.1,102.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.).1,106,745.				ent funds.			
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b Buildings	Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
c Leasehold improvements. 65,618. 41,235. 24,383. d Equipment 249,644. 122,970. 126,674. e Other 1,224. 122. 1,102. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.). 1,106,745.							
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e Other 1,224. 122. 1,102. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.). 1,106,745.							
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)							
			nual Form 990 Dart V				
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TEEA3302L 07/06/22

Schedule D (Form 990) 2022 Wildcat Ridge Sanc	tuary	93-13	20051 Page 3
Part VII Investments – Other Securities.		N/A	
Complete if the organization answered "Yes" on			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests.			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
_(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
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 end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7) (8)			
(3)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX Other Assets.	N/A		
Complete if the organization answered "Yes" on	Form 990, Part IV, line scription	11d. See Form 990, Part X, line 15.	(b) Book value
(a) Des			
(2)			
(3)			
(4)			
(5)			
- (6) (7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (E	B) line 15.)		
Description Other Liabilities. Complete if the organization answered "Yes" on	Form 000 Port IV line	110 or 11f Soc Form 000 Port V line	25
	ption of liability		(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			

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.

Page 3

Schedule D (Form 990) 2022 Wildcat Ridge Sanctuary		93-1320051	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per	Return. N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b			
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	
Part XII Reconciliation of Expenses per Audited Financial Statemer Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	nts With Expenses p	er Return. N/A	
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses.	2c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1.		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b.		-	
5 Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>).		5	
Part 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.

SCHEDULE L (Form 990)

Transactions With Interested Persons

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b,	26. 27.
28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.	-/ /
Attach to Form 990 or Form 990-EZ.	
Go to www.irs.gov/Form990 for instructions and the latest information.	

2022 Open To Public

Open				
Ins	pec	:ti	on	I

Department of the Treasury Internal Revenue Service Name of the organization

Wildcat	Ridae	Sanctuary
WIIUCal	rtuge	Sanctuary

Employer identification number 93-1320051

\$

\$

Part I	Excess Benefit Transa	ctions (section 501(c)(3), section 501(c)(4),	and section 501(c)(29) organizations only). Complete if the
	organization answered "Yes" of	n Form 990, Part IV, line 25a or 25b, or Form	and section 501(c)(29) organizations only). Complete if the 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and		(d) Cor	(d) Corrected?			
	(a) Name of disqualmed person	organization		Yes	No			
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
2 Enter the amount of tax incurred by the organization managers or disgualified persons during the year under								

-	Enter the amount of tax meaned by the organization managers of disqualmed persons during the year ander
	section 4958

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fror	an to or n the zation?	(e) Original principal amount	(f) Balance due	(g) In c	lefault?	(h) Ap by bo comm	proved ard or hittee?	(i) Wi agreei	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
(1) Catt Tuller	Board Memb	Short-Term	Х		500.			Х	Х			Х
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total					\$							

Part III Grants or Assistance Benefiting Interested Persons.

^{*} Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990) 2022

 Schedule L (Form 990) 2022
 Wildcat Ridge Sanctuary

 Part IV
 Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?	
				Yes	No	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Provide additional information for responses to questions on Schedule L (see instructions).

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.

OMB No.	1545-0047
20	22

Open to Public Inspection

Wildcat Ridge Sanctuary

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Cheryl and Michael Tuller are husband and wife.

Angi and Ian Ford are Cheryl and Michael tuller's children.

Form 990, Part VI, Line 11b - Form 990 Review Process

The board of directors reviewed the Form 990 before it was filed.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Wildcat Ridge Sanctuary monitors compliance with the conflict of interest policy by

reviewing transactions and documenting in the minutes.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

Governing documents and tax forms are available for review upon request.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Schedule M - method of Determining Non-Cash Contribution Amounts

The property on which Wildcat Ridge Sanctuary operates was received as a donation in 2017. The value of the property was determined by reference to the donor's purchase price in 2014 less related debt.