efile Public Vis			al Render	<b>Object</b> I	[d: 2023212	4934930003	37 - Submissi	on: 2023-0	)5-04	T.	IN: 93-1289894	
Form <b>990</b>			Return of Organization Exempt From Income						e Tax	(	OMB No. 1545-0047	
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except privat						ivate founda	tions)	2022	
Department of the Treasury Internal Revenue Service			<ul> <li>Do not enter social security numbers on this form as it may be made pull</li> <li>Go to <u>www.irs.gov/Form990</u> for instructions and the latest information</li> </ul>								Open to Public Inspection	
			lendar vear	or tax year	beginning 01	-01-2022 a	nd ending 12-3	1-2022				
			alendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 C Name of organization							D Employer identification number		
<ul> <li>B Check if applicable:</li> <li>Address change</li> <li>Name change</li> <li>Jaitial return</li> </ul>			WILD RIVERS LAND TRUST						93-128	93-1289894		
			Doing business	Doing business as						5054		
<ul> <li>Initial return</li> <li>Final return/terminated</li> </ul>												
🗆 An	nende	d return ion pending	Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 1158						E Telephor	E Telephone number		
-			City or town, state or province, country, and ZIP or foreign postal code PORT ORFORD, OR 97465						<b>G</b> Gross re	<b>G</b> Gross receipts \$ 2,045,219		
			F Name and address of principal officer: H(a) Is						nis a group re	turn for		
			H(b) Are						rdinates? □Yes ☑No all subordinates ded? □Yes □No			
I Tax	x-exer	mpt status:								o," attach a list. See instructions.		
J W	ebsi	te: 🕨 WIL	DRIVERSLAND	RUST.ORG	iorg H(c) g				up exemption number 🕨			
K Forr	n of o	organization:	□ Corporation ✔ Trust □ Association □ Other ►					L Year of form	L Year of formation: 2001		M State of legal domicile: OR	
Pa	art I	Sum	narv									
		1 Briefly describe the organization's mission or most significant activities:										
e.		OUR MISS	OUR MISSION IS TO CONSERVE THE NATURAL TREASURES AND WORKING LANDS ON OREGONS WILD RIVERS COAST IN PERPETUITY.									
an												
Nen												
Activities & Governance	2	Check this box ► U Number of voting members of the governing body (Part VI, line 1a)									8	
	4	Number o	nber of independent voting members of the governing body (Part VI, line 1b)							4	8	
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)							5	4		
	6	Total num	ber of voluntee	of volunteers (estimate if necessary)					•	6		
Ac	7a	Total unre	lated business	revenue fro	m Part VIII, col	n Part VIII, column (C), line 12				7a	0	
	b	Net unrela	ated business ta	ness taxable income from Form 990-T, Part I, line 11						7b	0	
Revenue			ons and grants (Part VIII, line 1h)					Р	rior Year		Current Year	
	8	Contributi							306,744		2,043,445	
	9	Program s	ervice revenue (Part VIII, line 2g)						1,286		249	
Rev			-	e (Part VIII, column (A), lines 3, 4, and 7d)						122	1,413	
			Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						308,152		112 2,045,219	
			Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)					500,152				
			nts and similar amounts paid (Part IX, column (A), lines 1–3 )								0	
		•			on, employee benefits (Part IX, column (A), lines 5–10)				197	487	0 215,033	
Exp enses			•					187,487			0	
en o		a Professional fundraising fees (Part IX, column (A), line 11e)									0	
ă			Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)				<u> </u>	87,952			157,200	
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)						275,				
		Revenue less expenses. Subtract line 18 from line 12			-	32,713			1,672,986			
ces Ces	-							Beginnin	Beginning of Current Year		End of Year	
Net Assets or Fund Balances	20	Total acco	ssets (Part X, line 16)						810,	602	2,483,588	
dB			lities (Part X, line 26)						010,	002	2,463,588	
Pun		Net assets or fund balances. Subtract line 21 from line 20						810,	602	2,483,588		
	art II	-	ature Block						/			

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