


|  |  |  |
|--|--|--|
| <b>Form 990</b><br><br>Department of the Treasury<br>Internal Revenue Service | <b>Return of Organization Exempt From Income Tax</b><br><br><b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b> | OMB No 1545-0047<br><div> <b>2012</b><br/> <b>Open to Public Inspection</b> </div> |
|  | ▶ The organization may have to use a copy of this return to satisfy state reporting requirements   |  |

**A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013**

|  |   |            |  |
|--|---|------------|--|
| <b>B</b> Check if applicable<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C</b> Name of organization<br>AFRICAN WILDLIFE FOUNDATION INC  |            | <b>D</b> Employer identification number<br>52-0781390  |
|  | Doing Business As   |            |  |
|  | Number and street (or P O box if mail is not delivered to street address)<br>1400 16TH STREET NW NO 120                   | Room/suite | <b>E</b> Telephone number<br>(202) 939-3333  |
|  | City or town, state or country, and ZIP + 4<br>WASHINGTON, DC 200362249   |            | <b>G</b> Gross receipts \$ 39,457,331  |
|  | <b>F</b> Name and address of principal officer<br>PATRICK BERGIN<br>1400 16TH STREET NW NO 120<br>WASHINGTON,DC 200362249 |            | <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br><b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list (see instructions)<br><br><b>H(c)</b> Group exemption number ▶ |
| <b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  |   |            |  |
| <b>J</b> Website: ▶ WWW.AWF.ORG  |   |            |  |

Part I Summary

|                             |   |                           |              |
|-----------------------------|---|---------------------------|--------------|
| Activities & Governance     | 1 Briefly describe the organization's mission or most significant activities<br>AWF WORKS TO ENSURE THE WILDLIFE AND WILD LANDS OF AFRICA WILL ENDURE FOREVER |                           |              |
|                             | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets                      |                           |              |
|                             | 3 Number of voting members of the governing body (Part VI, line 1a)   | 3                         | 34           |
|                             | 4 Number of independent voting members of the governing body (Part VI, line 1b)   | 4                         | 33           |
|                             | 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)  | 5                         | 50           |
|                             | 6 Total number of volunteers (estimate if necessary)  | 6                         | 39           |
|                             | 7a Total unrelated business revenue from Part VIII, column (C), line 12   | 7a                        | 0            |
|                             | 7b Net unrelated business taxable income from Form 990-T, line 34   | 7b                        | 0            |
| Revenue                     | 8 Contributions and grants (Part VIII, line 1h)   | Prior Year                | Current Year |
|                             | 9 Program service revenue (Part VIII, line 2g)  | 19,132,189                | 21,999,183   |
|                             | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | 483,098                   | 152,091      |
|                             | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   | 406,343                   | 1,592,665    |
|                             | 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | -309,922                  | 231,462      |
|                             |   | 19,711,708                | 23,975,401   |
| Expenses                    | 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)   | 5,767,833                 | 2,743,905    |
|                             | 14 Benefits paid to or for members (Part IX, column (A), line 4)  | 0                         | 0            |
|                             | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)  | 7,330,014                 | 8,180,459    |
|                             | 16a Professional fundraising fees (Part IX, column (A), line 11e)   | 23,517                    | 215,728      |
|                             | 16b Total fundraising expenses (Part IX, column (D), line 25) <u>1,808,485</u>  |                           |              |
|                             | 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)   | 9,682,434                 | 9,425,000    |
|                             | 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)   | 22,803,798                | 20,565,092   |
|                             | 19 Revenue less expenses Subtract line 18 from line 12  | -3,092,090                | 3,410,309    |
| Net Assets or Fund Balances |   | Beginning of Current Year | End of Year  |
|                             | 20 Total assets (Part X, line 16)   | 32,775,642                | 36,706,549   |
|                             | 21 Total liabilities (Part X, line 26)  | 3,221,054                 | 4,413,465    |
|                             | 22 Net assets or fund balances Subtract line 21 from line 20  | 29,554,588                | 32,293,084   |

## Part II Signature Block

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

|                               |  |                      |
|-------------------------------|--|----------------------|
| <b>Sign Here</b>              | *****  |                      |
|                               | Signature of officer   |                      |
| <b>Paid Preparer Use Only</b> | JEFF CHRISFIELD CHIEF FINANCIAL OFFICER                                    |                      |
|                               | Type or print name and title   |                      |
|                               | Print/Type preparer's name<br>FRANK H SMITH                                | Preparer's signature |
|                               | Firm's name    ➤ RAFFA PC  |                      |
|                               | Firm's address    ➤ 1899 L STREET NW SUITE 900<br><br>WASHINGTON, DC 20036 |                      |



















May the IRS discuss this return with the preparer shown above? (see instruction

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

Check if Schedule O contains a response to any question in this Part III . . . . . ☐

Form **990** (2012)

Part IV Checklist of Required Schedules

|   | Yes     | No |
|---|---------|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A    | 1 Yes   |    |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?    | 2 Yes   |    |
| 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       | No |
| 4 <b>Section 501(c)(3) organizations.</b> 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       | No |
| 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       | No |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I   | 6 Yes   |    |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7       | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III    | 8       | No |
| 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       | No |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V    | 10 Yes  |    |
| 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   |         |    |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.   | 11a Yes |    |
| 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     | No |
| c 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     | No |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX   | 11d     | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X    | 11e Yes |    |
| 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 Yes |    |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII   | 12a     | No |
| 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 Yes |    |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13      | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States?   | 14a Yes |    |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  | 14b Yes |    |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV   | 15 Yes  |    |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV   | 16 Yes  |    |
| 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 Yes  |    |
| 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      | No |
| 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      | No |
| 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   | 20a     | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b     |    |

Part IV

Checklist of Required Schedules (continued)

|     |  |     |     |    |
|-----|--|-----|-----|----|
| 21  | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .   | 21  | Yes |    |
| 22  | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .   | 22  |     | No |
| 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  | Yes |    |
| 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .                             | 24a |     | No |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .  | 24b |     |    |
| c   | 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 | <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .  | 25a |     | No |
| 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 I</i> . . . . .                                       | 25b |     | No |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .   | 26  |     | No |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . . | 27  |     | No |
| 28  | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)   |     |     |    |
| a   | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   | 28a |     | No |
| b   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .  | 28b |     | No |
| c   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . .  | 28c |     | No |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .  | 29  | Yes |    |
| 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  |     | No |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .  | 31  |     | No |
| 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  |     | No |
| 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  |     | No |
| 34  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .  | 34  | Yes |    |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a | Yes |    |
| 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 | Yes |    |
| 36  | <b>Section 501(c)(3) organizations.</b> 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  |     | No |
| 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  |     | No |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .  | 38  | Yes |    |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

|     |   | Yes | No |
|-----|---|-----|----|
| 1a  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.   | 11  |    |
| 1b  | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.  | 0   |    |
| c   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  | Yes |    |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  | 50  |    |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).                                   | Yes |    |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year?   |     | No |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.   |     |    |
| 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)?                            | Yes |    |
| b   | If "Yes," enter the name of the foreign country: TZ, SF, CG, ZA, UK, MZ, MP, KE, UV, UG<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.   |     |    |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   |     | No |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  |     | No |
| c   | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  |     |    |
| 6a  | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?   |     | No |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   |     |    |
| 7   | Organizations that may receive deductible contributions under section 170(c).   |     |    |
| a   | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?   |     | No |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?   |     |    |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  |     | No |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year.  | 7d  |    |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   | 7e  | No |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7f  | No |
| g   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  | 7g  |    |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  | 7h  |    |
| 8   | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8   |    |
| 9   | Sponsoring organizations maintaining donor advised funds.   |     |    |
| a   | Did the organization make any taxable distributions under section 4966?   | 9a  |    |
| b   | Did the organization make a distribution to a donor, donor advisor, or related person?  | 9b  |    |
| 10  | Section 501(c)(7) organizations. Enter  |     |    |
| a   | Initiation fees and capital contributions included on Part VIII, line 12.   | 10a |    |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  | 10b |    |
| 11  | Section 501(c)(12) organizations. Enter   |     |    |
| a   | Gross income from members or shareholders.  | 11a |    |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  | 11b |    |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  | 12a |    |
| b   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  | 12b |    |
| 13  | Section 501(c)(29) qualified nonprofit health insurance issuers.  |     |    |
| a   | Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.  | 13a |    |
| b   | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.  | 13b |    |
| c   | Enter the amount of reserves on hand.   | 13c |    |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year?  | 14a | No |
| b   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  | 14b |    |

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

|    |   |     |     |
|----|---|-----|-----|
|    |   | Yes | No  |
| 1a | Enter the number of voting members of the governing body at the end of the tax year . . . . .   |     |     |
|    | 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 in Schedule O              |     |     |
| b  | Enter the number of voting members included in line 1a, above, who are independent . . . . .  |     |     |
| 2  | 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? . . . . .   | 2   | No  |
| 3  | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . . | 3   | No  |
| 4  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .  | 4   | No  |
| 5  | Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .  | 5   | No  |
| 6  | Did the organization have members or stockholders? . . . . .  | 6   | No  |
| 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? . . . . .  | 7a  | No  |
| b  | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .   | 7b  | No  |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following  |     |     |
| a  | The governing body? . . . . .   | 8a  | Yes |
| b  | Each committee with authority to act on behalf of the governing body? . . . . .   | 8b  | Yes |
| 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? If "Yes," provide the names and addresses in Schedule O . . . . .        | 9   | No  |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

|     |  |     |     |
|-----|--|-----|-----|
|     |  | Yes | No  |
| 10a | Did the organization have local chapters, branches, or affiliates? . . . . .   | 10a | No  |
| b   | 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 | Yes |
| b   | Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .   |     |     |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .  | 12a | Yes |
| b   | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .  | 12b | Yes |
| c   | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .   | 12c | Yes |
| 13  | Did the organization have a written whistleblower policy? . . . . .  | 13  | Yes |
| 14  | Did the organization have a written document retention and destruction policy? . . . . .   | 14  | Yes |
| 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?   |     |     |
| a   | The organization's CEO, Executive Director, or top management official . . . . .   | 15a | Yes |
| b   | Other officers or key employees of the organization . . . . .  | 15b | Yes |
|     | If "Yes" to line 15a or 15b, describe the process in 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 | No  |
| 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 |     |

Section C. Disclosure

|    |   |  |
|----|---|--|
| 17 | List the States with which a copy of this Form 990 is required to be filed  | AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OR, OK, PA, RI, SC, TN, UT, VA, WA, WV, WI |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.<br><input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O) |  |
| 19 | Describe in 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   |  |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization  | JEFF CHRISFIELD 1400 16TH STREET NW SUITE 120 WASHINGTON, DC (202) 939-3333  |

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

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

Form **990** (2012)

## Part VII

| (A)<br>Name and Title  | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |  | Individual trustee or director  | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
|  |  |   |                       |         |              |                              |        |  |   |   |
| <b>1b Sub-Total</b>  |  |   |                       |         |              |                              |        |  |   |   |
| <b>c Total from continuation sheets to Part VII, Section A</b> |  |   |                       |         |              |                              |        |  |   |   |
| <b>d Total (add lines 1b and 1c)</b>                           |  |   |                       |         |              |                              |        | 1,409,727  | 0   | 230,728   |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization: 9

|          |   | Yes      | No  |
|----------|---|----------|-----|
| <b>3</b> | Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .  | <b>3</b> | No  |
| <b>4</b> | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . . | <b>4</b> | Yes |
| <b>5</b> | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .                       | <b>5</b> | No  |

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address                                | (B)<br>Description of services | (C)<br>Compensation |
|---|--------------------------------|---------------------|
| PRODUCTION SOLUTIONS INC 1953 GALLOWES ROAD 600 VIENNA VA 22182 | PRINTING AND MAILSHOP          | 676,016             |
| PAPPAS GROUP 671 NORTH GLEBE ROAD 700 ARLINGTON VA 22203        | WEBSITE DEVELOPMENT            | 215,000             |
| CONSERVATION CAPITAL CONSULTING NEW CAVENDISH STREETLONDONUK    | DEVELOPMENT & STRATEGIC MGMT   | 213,470             |
| BLACKBAUD INC PO BOX 930256 CHARLESTON SC 29492                 | SOFTWARE CONSULTING            | 200,336             |
| ABCO CONSTRUCTION LTD KAREN ROAD OFF NGONG ROAD PO BONAIROBIKE  | CONSTRUCTION PROJECT           | 120,212             |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 5



Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

|   |   |  | (A)<br>Total revenue                        | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512, 513, or<br>514 |         |
|---|---|--|---|--|---|---|---------|
| Contributions, Gifts, Grants<br>and Other Similar Amounts | 1a  | Federated campaigns . . .  | 1a  |  |   |   |         |
|   | b   | Membership dues . . . . .  | 1b  |  |   |   |         |
|   | c   | Fundraising events . . . . .   | 1c  |  |   |   |         |
|   | d   | Related organizations . . . .  | 1d  |  |   |   |         |
|   | e   | Government grants (contributions)  | 1e  | 10,924,096   |   |   |         |
|   | f   | All other contributions, gifts, grants, and<br>similar amounts not included above  | 1f  | 11,075,087   |   |   |         |
|   | g   | Noncash contributions included in lines<br>1a-1f \$  |   | 264,560  |   |   |         |
|   | h   | Total. Add lines 1a-1f . . . . .   |   | 21,999,183   |   |   |         |
| Program Service Revenue                                   |   |  | Business Code                               |  |   |   |         |
|   | 2a  | SAFARI INCOME  | 900099                                      | 92,081   | 92,081                                  |   |         |
|   | b   | PROGRAM INCOME   | 900099                                      | 36,466   | 36,466                                  |   |         |
|   | c   | MEETINGS   | 900099                                      | 23,544   | 23,544                                  |   |         |
|   | d   |  |   |  |   |   |         |
|   | e   |  |   |  |   |   |         |
|   | f   | All other program service revenue  |   |  |   |   |         |
|   | g   | Total. Add lines 2a-2f . . . . .   |   | 152,091  |   |   |         |
| Other Revenue   | 3   | Investment income (including dividends, interest,<br>and other similar amounts) . . . . .  |   | 641,135  | 28,969                                  | 612,166   |         |
|   | 4   | Income from investment of tax-exempt bond proceeds . . . . .   |   |  |   |   |         |
|   | 5   | Royalties . . . . .  |   | 191,644  |   | 191,644   |         |
|   | 6a  | Gross rents  | (i) Real                                    | (ii) Personal                                      |   |   |         |
|   |   | b  | Less rental expenses                        |  |   |   |         |
|   |   | c  | Rental income or (loss)                     |  |   |   |         |
|   |   | d  | Net rental income or (loss) . . . . .       |  |   |   |         |
|   | 7a  | Gross amount from sales of assets other than inventory   | (i) Securities                              | (ii) Other   |   |   |         |
|   |   | b  | Less cost or other basis and sales expenses |  |   |   |         |
|   |   | c  | Gain or (loss)                              |  |   |   |         |
|   |   | d  | Net gain or (loss) . . . . .                |  | 951,530                                 |   | 951,530 |
|   | 8a  | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . | a   |  |   |   |         |
|   | b   | Less direct expenses . . . . .   | b   |  |   |   |         |
|   | c   | Net income or (loss) from fundraising events . . . . .   |   |  |   |   |         |
|   | 9a  | Gross income from gaming activities<br>See Part IV, line 19 . . . . .  | a   |  |   |   |         |
|   | b   | Less direct expenses . . . . .   | b   |  |   |   |         |
|   | c   | Net income or (loss) from gaming activities . . . . .  |   |  |   |   |         |
|   | 10a                                       | Gross sales of inventory, less returns and allowances . . . . .  | a   |  |   |   |         |
|   | b   | Less cost of goods sold . . . . .  | b   |  |   |   |         |
|   | c   | Net income or (loss) from sales of inventory . . . . .   |   |  |   |   |         |
|   | Miscellaneous Revenue                     |  | Business Code                               |  |   |   |         |
|   | 11a                                       | MAILING LIST RENTAL  | 900099                                      | 19,143   |   |   | 19,143  |
|   | b   | MERCHANDISE SALES  | 900099                                      | 19,000   |   |   | 19,000  |
| c   | AFRICA REV HOLDINGS                       | 900099   | 1,675                                       |  |   | 1,675   |         |
| d   | All other revenue . . . . .               |  |   |  |   |   |         |
| e   | Total. Add lines 11a-11d . . . . .        |  | 39,818                                      |  |   |   |         |
| 12  | Total revenue. See Instructions . . . . . |  | 23,975,401                                  | 181,060  | 0                                       | 1,795,158   |         |

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX

☐

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. |  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|--|-----------------------|---------------------------------|--|-----------------------------|
| 1  | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.   | 316,136               | 316,136                         |  |                             |
| 2  | Grants and other assistance to individuals in the United States. See Part IV, line 22.   |                       |                                 |  |                             |
| 3  | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.  | 2,427,769             | 2,427,769                       |  |                             |
| 4  | Benefits paid to or for members.   |                       |                                 |  |                             |
| 5  | Compensation of current officers, directors, trustees, and key employees.  | 1,096,231             | 811,641                         | 195,886                                | 88,704                      |
| 6  | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).   |                       |                                 |  |                             |
| 7  | Other salaries and wages.  | 4,638,082             | 3,723,813                       | 388,983                                | 525,286                     |
| 8  | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).  | 470,465               | 377,494                         | 39,782                                 | 53,189                      |
| 9  | Other employee benefits.   | 1,738,066             | 1,373,567                       | 172,729                                | 191,770                     |
| 10   | Payroll taxes.   | 237,615               | 188,022                         | 23,897                                 | 25,696                      |
| 11   | Fees for services (non-employees):   |                       |                                 |  |                             |
| a  | Management.  |                       |                                 |  |                             |
| b  | Legal.   | 113,134               | 110,104                         | 3,030                                  |                             |
| c  | Accounting.  | 109,720               | 12,929                          | 96,791                                 |                             |
| d  | Lobbying.  |                       |                                 |  |                             |
| e  | Professional fundraising services. See Part IV, line 17.   | 215,728               |                                 |  | 215,728                     |
| f  | Investment management fees.  | 243,299               |                                 | 243,299                                |                             |
| g  | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).  | 1,812,578             | 1,806,633                       | 5,945                                  |                             |
| 12   | Advertising and promotion.   | 25,692                | 20,602                          | 70                                     | 5,020                       |
| 13   | Office expenses.   | 978,345               | 846,556                         | 47,069                                 | 84,720                      |
| 14   | Information technology.  | 425,057               | 264,114                         | 58,608                                 | 102,335                     |
| 15   | Royalties.   |                       |                                 |  |                             |
| 16   | Occupancy.   | 601,446               | 311,652                         | 289,794                                |                             |
| 17   | Travel.  | 1,226,451             | 1,094,626                       | 27,246                                 | 104,579                     |
| 18   | Payments of travel or entertainment expenses for any federal, state, or local public officials.  |                       |                                 |  |                             |
| 19   | Conferences, conventions, and meetings.  | 817,200               | 726,574                         |  | 90,626                      |
| 20   | Interest.  | 30,722                | 19,823                          | 4,661                                  | 6,238                       |
| 21   | Payments to affiliates.  |                       |                                 |  |                             |
| 22   | Depreciation, depletion, and amortization.   | 349,449               | 243,486                         | 103,611                                | 2,352                       |
| 23   | Insurance.   | 20,993                | 11,866                          | 9,118                                  | 9                           |
| 24   | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):  |                       |                                 |  |                             |
| a  | DIRECT MAILING COSTS   | 797,736               | 578,227                         | 0                                      | 219,509                     |
| b  | FIELD EQUIPMENT  | 641,031               | 640,693                         | 0                                      | 338                         |
| c  | VEHICLE OPERATIONS   | 533,750               | 531,052                         | 1,711                                  | 987                         |
| d  | CONSTRUCTION   | 376,744               | 376,744                         | 0                                      | 0                           |
| e  | All other expenses   | 321,653               | 566,903                         | -336,649                               | 91,399                      |
| 25   | Total functional expenses. Add lines 1 through 24e.  | 20,565,092            | 17,381,026                      | 1,375,581                              | 1,808,485                   |
| 26   | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). | 1,011,280             | 407,937                         | 0                                      | 603,343                     |

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

|                             |   |  |              | (A)               |     | (B)         |
|-----------------------------|---|--|--------------|-------------------|-----|-------------|
|                             |   |  |              | Beginning of year |     | End of year |
| Assets                      | 1   | Cash—non-interest-bearing  |              | 1,262,596         | 1   | 2,794,946   |
|                             | 2   | Savings and temporary cash investments   |              | 1,053,919         | 2   | 4,206,694   |
|                             | 3   | Pledges and grants receivable, net   |              | 5,982,163         | 3   | 5,372,938   |
|                             | 4   | Accounts receivable, net   |              | 131,405           | 4   | 159,425     |
|                             | 5   | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L   |              |                   | 5   |             |
|                             | 6   | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L |              |                   | 6   |             |
|                             | 7   | Notes and loans receivable, net  |              | 443,942           | 7   | 741,548     |
|                             | 8   | Inventories for sale or use  |              |                   | 8   |             |
|                             | 9   | Prepaid expenses and deferred charges  |              | 274,077           | 9   | 354,257     |
|                             | 10a   | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  | 10a5,817,627 |                   |     |             |
|                             | b   | Less accumulated depreciation  | 10b1,428,437 | 4,192,541         | 10c | 4,389,190   |
|                             | 11  | Investments—publicly traded securities   |              | 19,454,697        | 11  | 18,595,768  |
|                             | 12  | Investments—other securities See Part IV, line 11  |              | -193,657          | 12  | -710,379    |
|                             | 13  | Investments—program-related See Part IV, line 11   |              |                   | 13  |             |
|                             | 14  | Intangible assets  |              |                   | 14  |             |
|                             | 15  | Other assets See Part IV, line 11  |              | 173,959           | 15  | 802,162     |
|                             | 16  | Total assets. Add lines 1 through 15 (must equal line 34)  |              | 32,775,642        | 16  | 36,706,549  |
| Liabilities                 | 17  | Accounts payable and accrued expenses  |              | 1,112,437         | 17  | 1,470,599   |
|                             | 18  | Grants payable   |              |                   | 18  |             |
|                             | 19  | Deferred revenue   |              | 1,044,955         | 19  | 1,910,151   |
|                             | 20  | Tax-exempt bond liabilities  |              |                   | 20  |             |
|                             | 21  | Escrow or custodial account liability Complete Part IV of Schedule D   |              |                   | 21  |             |
|                             | 22  | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  |              |                   | 22  |             |
|                             | 23  | Secured mortgages and notes payable to unrelated third parties   |              | 621,962           | 23  | 596,961     |
|                             | 24  | Unsecured notes and loans payable to unrelated third parties   |              |                   | 24  |             |
|                             | 25  | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D   |              | 441,700           | 25  | 435,754     |
|                             | 26  | Total liabilities. Add lines 17 through 25   |              | 3,221,054         | 26  | 4,413,465   |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. |  |              |                   |     |             |
|                             | 27  | Unrestricted net assets  |              | 23,625,839        | 27  | 23,895,112  |
|                             | 28  | Temporarily restricted net assets  |              | 3,656,434         | 28  | 6,125,657   |
|                             | 29  | Permanently restricted net assets  |              | 2,272,315         | 29  | 2,272,315   |
|                             | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.                          |  |              |                   |     |             |
|                             | 30  | Capital stock or trust principal, or current funds   |              |                   | 30  |             |
|                             | 31  | Paid-in or capital surplus, or land, building or equipment fund  |              |                   | 31  |             |
|                             | 32  | Retained earnings, endowment, accumulated income, or other funds   |              |                   | 32  |             |
|                             | 33  | Total net assets or fund balances  |              | 29,554,588        | 33  | 32,293,084  |
|                             | 34  | Total liabilities and net assets/fund balances   |              | 32,775,642        | 34  | 36,706,549  |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

|    |   |    |            |
|----|---|----|------------|
| 1  | Total revenue (must equal Part VIII, column (A), line 12)   | 1  | 23,975,401 |
| 2  | Total expenses (must equal Part IX, column (A), line 25)  | 2  | 20,565,092 |
| 3  | Revenue less expenses Subtract line 2 from line 1   | 3  | 3,410,309  |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                     | 4  | 29,554,588 |
| 5  | Net unrealized gains (losses) on investments  | 5  | -671,813   |
| 6  | Donated services and use of facilities  | 6  |            |
| 7  | Investment expenses   | 7  |            |
| 8  | Prior period adjustments  | 8  |            |
| 9  | Other changes in net assets or fund balances (explain in Schedule O)  | 9  | 0          |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 32,293,084 |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

|    |  | Yes | No  |
|----|--|-----|-----|
| 1  | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O  |     |     |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a  | No  |
| b  | Were the organization's financial statements audited by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both<br><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                | 2b  | Yes |
| c  | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O  | 2c  | Yes |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?   | 3a  | Yes |
| b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits   | 3b  | Yes |

Additional Data

Software ID:

Software Version:

EIN: 52-0781390

Name: AFRICAN WILDLIFE FOUNDATION INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A)<br>Name and Title                         | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|   |  | Individual trustee or director  | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| MR DAVID THOMSON<br>CHAIR                     | 4 00   | X   |                       | X       |              |                              |        | 0  | 0   | 0   |
| HE BENJAMIN W MKAPA<br>VICE- CHAIR            | 2 00   | X   |                       | X       |              |                              |        | 0  | 0   | 0   |
| DR MYMA BELO-OSAGIE<br>SECRETARY              | 2 00   | X   |                       | X       |              |                              |        | 0  | 0   | 0   |
| MS MARLEEN GROEN<br>TREASURER                 | 4 00   | X   |                       | X       |              |                              |        | 0  | 0   | 0   |
| MR ROBIN BERKELEY OBE<br>TRUSTEE              | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR PAYSON COLEMAN<br>TRUSTEE                  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS LYNN DOLNICK<br>TRUSTEE                    | 3 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS LISA FIRESTONE<br>TRUSTEE                  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR ADRIAN GARDINER<br>TRUSTEE                 | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| DR HELEN GICHOHI<br>TRUSTEE                   | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR DONALD GRAHAM<br>TRUSTEE (THRU 11/2012)    | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR LARRY GREEN<br>TRUSTEE (THRU 11/2012)      | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR PHILIPP H GUTSCHE<br>TRUSTEE               | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS HEATHER STURT HAAGA<br>TRUSTEE             | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS MONA HAMILTON<br>TRUSTEE                   | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS CHRISTINE F HEMRICK<br>TRUSTEE             | 3 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR WILLIAM E JAMES<br>TRUSTEE                 | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS ADRIAN M JAY<br>TRUSTEE                    | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| HON KRISTINA M JOHNSON PHD<br>TRUSTEE         | 3 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| DR STEPHEN JUELSGAARD<br>TRUSTEE              | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR WILLIAM S KALEMA<br>TRUSTEE (THRU 11/2012) | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR RAHIM A KHAN<br>TRUSTEE                    | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR ROBERT E KING<br>TRUSTEE                   | 4 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS DENISE KOOPMANS<br>TRUSTEE                 | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS KRISTA KRIEGER<br>TRUSTEE                  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors |  |   |                       |         |              |                              |        |  |   |   |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A)<br>Name and Title   | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|   |  | Individual trustee or director  | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| MS SHANA LAURSEN TRUSTEE  | 3 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR CHRISTOPHER LEE TRUSTEE  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS VICTORIA LESLIE TRUSTEE  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS ANN LUSKEY TRUSTEE (THRU 01/2013)  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR JIMNAH MBARU TRUSTEE (THRU 11/2012)  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| HE FESTUS G MOGAE TRUSTEE   | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| HE RAZAN K AL MUBARAK TRUSTEE   | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS KRISTINA PERSSON TRUSTEE   | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS ELIZABETH ROBERTSHAW TRUSTEE (THRU 11/2012)  | 1 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR STUART SCOTT TRUSTEE   | 3 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS AGGIE SKIRBALL TRUSTEE   | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS VERONICA VAREKOVA TRUSTEE  | 2 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MR CHARLES R WALL TRUSTEE   | 4 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| MS MARIA WILHELM TRUSTEE  | 3 00   | X   |                       |         |              |                              |        | 0  | 0   | 0   |
| PATRICK BERGIN CHIEF EXECUTIVE OFFICER  | 40 00  | X   |                       | X       |              |                              |        | 238,075  | 0   | 48,805  |
| HELEN GICHOHI PRESIDENT (THRU 11/2012)  | 40 00  |   |                       | X       |              |                              |        | 142,808  | 0   | 25,640  |
| JOANNA ELLIOT VP OF KNOWLEDGE MGMT (THRU 03/2013)   | 40 00  |   |                       | X       |              |                              |        | 166,492  | 0   | 35,804  |
| JEFF CHRISFIELD CHIEF FINANCIAL OFFICER   | 40 00  |   |                       | X       |              |                              |        | 162,069  | 0   | 25,790  |
| CRAIG SHOLLEY VP OF PHILANTHROPY/MARKETING  | 40 00  |   |                       | X       |              |                              |        | 161,641  | 0   | 21,447  |
| DAUDI SUMBA VP OF PROGRAM OPERATIONS  | 40 00  |   |                       | X       |              |                              |        | 154,596  | 0   | 19,910  |
| HARRY VAN DER LINDE SNR DIR PROG DESIGN (THRU 10/2012)  | 40 00  |   |                       |         |              | X                            |        | 177,459  | 0   | 13,944  |
| JOHN BUTLER DIRECTOR OF MARKETING & MEMBERSHIP  | 40 00  |   |                       |         |              | X                            |        | 104,771  | 0   | 20,074  |
| TYRENE HARALSON DIRECTOR OF FINANCE   | 40 00  |   |                       |         |              | X                            |        | 101,816  | 0   | 19,314  |

SCHEDULE A  
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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. ▶ See separate instructions.

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I 

b

☐

Type II 

c

☐

Type III - Functionally integrated 

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)
- |          | Yes | No |
|----------|-----|----|
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? |    | (v) Did you notify the organization in col (i) of your support? |    | (vi) Is the organization in col (i) organized in the U S ? |    | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
|                                    |          |  | Yes  | No | Yes   | No | Yes  | No |                                  |
|                                    |          |  |  |    |   |    |  |    |                                  |
|                                    |          |  |  |    |   |    |  |    |                                  |
| Total                              |          |  |  |    |   |    |  |    |                                  |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

Support Schedule for Organizations Described in 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

| Calendar year (or fiscal year beginning in) ▶   | (a) 2008   | (b) 2009   | (c) 2010   | (d) 2011   | (e) 2012   | (f) Total   |
|---|------------|------------|------------|------------|------------|-------------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")   | 20,683,717 | 20,418,220 | 24,614,325 | 19,132,189 | 21,999,183 | 106,847,634 |
| 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  | 20,683,717 | 20,418,220 | 24,614,325 | 19,132,189 | 21,999,183 | 106,847,634 |
| 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) |            |            |            |            |            | 2,713,181   |
| 6 Public support. Subtract line 5 from line 4   |            |            |            |            |            | 104,134,453 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶  | (a) 2008   | (b) 2009   | (c) 2010   | (d) 2011   | (e) 2012   | (f) Total   |
|--|------------|------------|------------|------------|------------|-------------|
| 7 Amounts from line 4  | 20,683,717 | 20,418,220 | 24,614,325 | 19,132,189 | 21,999,183 | 106,847,634 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 270,899    | 504,472    | 1,039,029  | 865,510    | 851,922    | 3,531,832   |
| 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 IV.)                               | 11,032     | 5,577      | 10,190     | 11,618     | 20,675     | 59,092      |
| 11 Total support (Add lines 7 through 10)  |            |            |            |            |            | 110,438,558 |

|  |    |           |
|--|----|-----------|
| 12 Gross receipts from related activities, etc. (see instructions)   | 12 | 1,292,006 |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . . |    |           |

Section C. Computation of Public Support Percentage

|   |    |         |
|---|----|---------|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))   | 14 | 94.290% |
| 15 Public support percentage for 2011 Schedule A, Part II, line 14  | 15 | 90.530% |
| 16a 33 1/3% support test—2012. 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 33 1/3% support test—2011. 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 10%-facts-and-circumstances test—2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶✓    |    |         |
| b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶✓ |    |         |
| 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 ▶✓  |    |         |



Part IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)  
(Complete only if you checked the box on line 9 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.)

| Section A. Public Support  |          |          |          |          |          |           |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) ▶  | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")  |          |          |          |          |          |           |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513   |          |          |          |          |          |           |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |          |          |          |          |          |           |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| 6 Total. Add lines 1 through 5   |          |          |          |          |          |           |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons  |          |          |          |          |          |           |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year           |          |          |          |          |          |           |
| c Add lines 7a and 7b  |          |          |          |          |          |           |
| 8 Public support (Subtract line 7c from line 6.)   |          |          |          |          |          |           |

| Section B. Total Support   |          |          |          |          |          |           |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) ▶  | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 9 Amounts from line 6  |          |          |          |          |          |           |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   |          |          |          |          |          |           |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  |          |          |          |          |          |           |
| c Add lines 10a and 10b  |          |          |          |          |          |           |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on   |          |          |          |          |          |           |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   |          |          |          |          |          |           |
| 13 Total support. (Add lines 9, 10c, 11, and 12.)  |          |          |          |          |          |           |
| 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶ |          |          |          |          |          |           |

| Section C. Computation of Public Support Percentage                                       |    |  |  |
|---|----|--|--|
| 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) | 15 |  |  |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15                      | 16 |  |  |

| Section D. Computation of Investment Income Percentage   |    |  |  |
|--|----|--|--|
| 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))   | 17 |  |  |
| 18 Investment income percentage from 2011 Schedule A, Part III, line 17  | 18 |  |  |
| 19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶        |    |  |  |
| b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ |    |  |  |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶  |    |  |  |

**Part IV**

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

|                              |
|------------------------------|
| Facts And Circumstances Test |
|                              |

| Explanation  |  |  |  |  |
|--|--|--|--|--|
| SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME MISCELLANEOUS REVENUE - 2008 AMOUNT \$ 11,032 2009 AMOUNT \$ 5,577 2010 AMOUNT \$ 10,190 2011 AMOUNT \$ 11,618 2012 AMOUNT \$ 20,675 |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
Attach to Form 990. See separate instructions.

|   |  |
|---|--|
| Name of the organization<br>AFRICAN WILDLIFE FOUNDATION INC | Employer identification number<br>52-0781390 |
|---|--|

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

|   |  |                              |
|---|--|------------------------------|
|   | (a) Donor advised funds  | (b) Funds and other accounts |
| 1 | Total number at end of year  | 1                            |
| 2 | Aggregate contributions to (during year)   |                              |
| 3 | Aggregate grants from (during year)  |                              |
| 4 | Aggregate value at end of year   | 1,016,209                    |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div>YesNo</div>  |                              |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div>YesNo</div> |                              |

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education)

Preservation of an historically important land area

Protection of natural habitat

Preservation of a certified historic structure

Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

|   |  |
|---|--|
|   | Held at the End of the Year  |
| a | Total number of conservation easements   |
| b | Total acreage restricted by conservation easements   |
| c | Number of conservation easements on a certified historic structure included in (a)   |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register |

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4

Number of states where property subject to conservation easement is located

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

YesNo

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

YesNo

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

b

Assets included in Form 990, Part X

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or 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?

☐ Yes

☐ No

1b

If "Yes," explain the arrangement in Part XIII and complete the following table

|    |        |
|----|--------|
|    | Amount |
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

2b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

|    |  |               |                     |                     |                    |            |
|----|--|---------------|---------------------|---------------------|--------------------|------------|
|    | (a)Current year                                | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |            |
| 1a | Beginning of year balance                      | 19,788,812    | 15,239,993          | 12,423,622          | 11,375,778         | 12,778,709 |
| b  | Contributions                                  | 1,382,884     | 4,569,518           | 1,641,519           | 859,647            | 1,360,424  |
| c  | Net investment earnings, gains, and losses     | 1,179,053     | 424,401             | 1,571,398           | 188,197            | -2,241,114 |
| d  | Grants or scholarships                         |               |                     |                     |                    |            |
| e  | Other expenditures for facilities and programs | 181,904       | 445,100             | 396,546             |                    | 522,241    |
| f  | Administrative expenses                        |               |                     |                     |                    |            |
| g  | End of year balance                            | 22,168,845    | 19,788,812          | 15,239,993          | 12,423,622         | 11,375,778 |

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

89 750 %

b

Permanent endowment

10 250 %

c

Temporarily restricted endowment

0 %

The percentages in 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

3a(i)

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. 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 value |
| 1a Land  |                                      | 961,961                         |                              | 961,961        |
| b Buildings  |                                      | 2,191,696                       | 118,708                      | 2,072,988      |
| c Leasehold improvements   |                                      | 448,489                         | 180,726                      | 267,763        |
| d Equipment  |                                      | 1,089,754                       | 653,540                      | 436,214        |
| e Other  |                                      | 1,125,727                       | 475,463                      | 650,264        |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) |                                      |                                 |                              | 4,389,190      |

Schedule D (Form 990) 2012



|   |  |           |  |
|---|--|-----------|--|
| <b>Part XI    Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>    |  |           |  |
| <b>1</b>  | Total revenue, gains, and other support per audited financial statements . . . . .                       | <b>1</b>  |  |
| <b>2</b>  | Amounts included on line 1 but not on Form 990, Part VIII, line 12                                       |           |  |
| <b>a</b>  | Net unrealized gains on investments . . . . .  | <b>2a</b> |  |
| <b>b</b>  | Donated services and use of facilities . . . . .   | <b>2b</b> |  |
| <b>c</b>  | Recoveries of prior year grants . . . . .  | <b>2c</b> |  |
| <b>d</b>  | Other (Describe in Part XIII ) . . . . .   | <b>2d</b> |  |
| <b>e</b>  | Add lines <b>2a</b> through <b>2d</b> . . . . .  | <b>2e</b> |  |
| <b>3</b>  | Subtract line <b>2e</b> from line <b>1</b> . . . . .   | <b>3</b>  |  |
| <b>4</b>  | Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>                               |           |  |
| <b>a</b>  | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                               | <b>4a</b> |  |
| <b>b</b>  | Other (Describe in Part XIII ) . . . . .   | <b>4b</b> |  |
| <b>c</b>  | Add lines <b>4a</b> and <b>4b</b> . . . . .  | <b>4c</b> |  |
| <b>5</b>  | Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .  | <b>5</b>  |  |
| <b>Part XII    Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b> |  |           |  |
| <b>1</b>  | Total expenses and losses per audited financial statements . . . . .                                     | <b>1</b>  |  |
| <b>2</b>  | Amounts included on line 1 but not on Form 990, Part IX, line 25   |           |  |
| <b>a</b>  | Donated services and use of facilities . . . . .   | <b>2a</b> |  |
| <b>b</b>  | Prior year adjustments . . . . .   | <b>2b</b> |  |
| <b>c</b>  | Other losses . . . . .   | <b>2c</b> |  |
| <b>d</b>  | Other (Describe in Part XIII ) . . . . .   | <b>2d</b> |  |
| <b>e</b>  | Add lines <b>2a</b> through <b>2d</b> . . . . .  | <b>2e</b> |  |
| <b>3</b>  | Subtract line <b>2e</b> from line <b>1</b> . . . . .   | <b>3</b>  |  |
| <b>4</b>  | Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :                               |           |  |
| <b>a</b>  | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                               | <b>4a</b> |  |
| <b>b</b>  | Other (Describe in Part XIII ) . . . . .   | <b>4b</b> |  |
| <b>c</b>  | Add lines <b>4a</b> and <b>4b</b> . . . . .  | <b>4c</b> |  |
| <b>5</b>  | Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . . | <b>5</b>  |  |

|  |
|--|
| <b>Part XIII    Supplemental Information</b> |
|--|

Complete this part to 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.

| Identifier  | Return Reference | Explanation   |
|---|------------------|---|
| DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS      | PART V, LINE 4   | IN THE ABSENCE OF SPECIFIC SPENDING GUIDELINES ESTABLISHED BY A DONOR, AWF HAS A POLICY TO SPEND FIVE PERCENT OF THESE ENDOWMENT FUNDS' AVERAGE BEGINNING INVESTED MARKET VALUES FOR THE PRIOR THREE FISCAL YEARS. HOWEVER, A FUND'S SPENDING RATE IS REDUCED OR ELIMINATED IF THE RESULTING INVESTED BALANCE OF THAT FUND WOULD FALL BELOW THE FAIR VALUE OF THE ORIGINAL GIFT(S). IN ESTABLISHING THIS POLICY, AWF CONSIDERED ITS STATED RETURN OBJECTIVE WITH THE INTENT TO, OVER THE LONG TERM, ALLOW ITS ENDOWMENT FUNDS TO GROW AT OR ABOVE THAT OF INFLATION. THIS IS CONSISTENT WITH THE ORGANIZATION'S OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT FUNDS' ASSETS HELD IN PERPETUITY OR FOR A SPECIFIED TERM, AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN. THE BOARD OF TRUSTEES HAS ADOPTED A SPENDING POLICY TO USE OF UP TO SEVEN PERCENT OF THE BEGINNING INVESTED MARKET VALUE OF THE BOARD-DESIGNATED ENDOWMENT IN CURRENT YEAR OPERATIONS, OR A LOWER AMOUNT AS AGREED THROUGH AWF'S ANNUAL BUDGETING PROCESS. THIS SPENDING POLICY TAKES INTO ACCOUNT THE BOARD OF TRUSTEE'S POLICY TO ADD UNRESTRICTED LEGACY GIFTS TO THE BOARD-DESIGNATED ENDOWMENT. THE FUNDS ARE USED TO FURTHER THE IMPACT OF AWF'S CONSERVATION PROGRAMS. |
| DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 | PART X, LINE 2   | AWF PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED JUNE 30, 2013 AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION OR DISCLOSURE IN THESE CONSOLIDATED FINANCIAL STATEMENTS OR WHICH MAY HAVE AN EFFECT ON THE TAX-EXEMPT STATUS OF AWF, INC.   |

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

| (a) Region                                 | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
|--|-------------------------------------|--|---|--|--|
| See Add'l Data                             |                                     |  |   |  |  |
|  |                                     |  |   |  |  |
|  |                                     |  |   |  |  |
|  |                                     |  |   |  |  |
|  |                                     |  |   |  |  |
| 3a Sub-total                               | 19                                  | 144  |   |  | 16,835,381   |
| b Total from continuation sheets to Part I | 0                                   | 0  |   |  | 0  |
| c Totals (add lines 3a and 3b)             | 19                                  | 144  |   |  | 16,835,381   |

## Part II

**1**

2

3



**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

[illegible]

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes

☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes

☒ No

## Supplemental Information

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

[illegible]

Additional Data

Software ID:  
Software Version:  
EIN: 52-0781390  
Name: AFRICAN WILDLIFE FOUNDATION INC

Form 990 Schedule F Part I - Activities Outside The United States

| (a) Region         | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|--------------------|-------------------------------------|---|--|---|-----------------------------------|
| SUB-SAHARAN AFRICA | 0                                   | 142   | EMPLOYEES  |   | 5,002,048                         |
| SUB-SAHARAN AFRICA | 0                                   | 0   | FUNDRAISING  |   | 7,761                             |
| SUB-SAHARAN AFRICA | 0                                   | 0   | GRANTMAKING  |   | 2,370,812                         |

**Form 990 Schedule F Part I - Activities Outside The United States**

| (a) Region                               | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|--|-------------------------------------|---|--|--|-----------------------------------|
| SUB-SAHARAN AFRICA                       | 0                                   | 0   | PROGRAM SERVICES   | CONSERVATION PROGRAMS, EDUCATION & OUTREACH  | 8,314,187                         |
| SUB-SAHARAN AFRICA                       | 19                                  | 0   | MAINTAINING OFFICES  |  | 855,390                           |
| EUROPE (INCLUDING ICELAND AND GREENLAND) | 0                                   | 2   | EMPLOYEES  |  | 228,226                           |

Form 990 Schedule F Part I - Activities Outside The United States

| (a) Region                               | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|--|-------------------------------------|---|--|---|-----------------------------------|
| EUROPE (INCLUDING ICELAND AND GREENLAND) | 0                                   | 0   | GRANTMAKING  |   | 56,957                            |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | HEALTHY VILLAGE PROJECT IN MBANDAKA, DRC                           | 18,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | GRANT FOR OL MOLOG LODGE CONSTRUCTION                              | 347,297                  | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DEVELOPMENT OF FISH PONDS  | 6,000                    | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DEVELOPMENT OF PARTICIPATORY AGROFORESTRY FOR SUSTAINABLE LAND USE | 18,000                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | INITIATION OF WMA ESTABLISHMENT IN YAEDA CHINI                 | 50,329                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ECO-LODGE CONSTRUCTION ON NATIONAL PARK SITE IN UGANDA         | 250,000                  | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | LIMIT DAMAGE AND RESTORE THE CORE AREA OF GIRAFFE DISTRIBUTION | 10,252                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DEVELOPMENT SUPPORT OF FISH PONDS                              | 10,500                   | WIRE/EFT                        |                                   |  |   |



Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant  | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | WILDLIFE SCOUTS SUPPORT   | 58,979                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ANTI-POACHING OPERATIONS AND SUPPORT  | 69,993                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | CREATION OF NEW CENTERS OF DISSEMINATION OF BROODSTOCK, EDUCATION AND TRAINING IN FARMING TECHNIQUES AND ANIMAL HEALTH IN DJOLU | 18,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ALTERNATIVE LIVELIHOODS TRAINING & SUPPORT  | 22,500                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | SUPPORT AGRICULTURAL LIVELIHOODS IN MLW LANDSCAPE                                | 29,958                   |                                 |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ELEPHANT ANTI-POACHING OPERATIONS AND SUPPORT                                    | 31,334                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | WILDLIFE MANAGEMENT STUDIES  | 25,837                   |                                 |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DEVELOPING BIO-ENTERPRISES INCLUDING HONEY, COMMERCIAL PRODUCTION OF WILD PLANTS | 27,330                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | GREAT FISH RIVER RESERVE RHINO PROTECTION                    | 50,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DEVELOPMENT OF FISH PONDS                                    | 10,500                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | EWASO LIONS PROJECT-PREDATOR WORK SUPPORT                    | 7,392                    | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | COUNTER-POACHING WORK OF WILDLIFE RESERVE RANGERS IN FARO NP | 10,000                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant  | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | PECTO CAPACITY BUILDING SUPPORT FOR COMMUNITY BASED TOURISM ENTERPRISES | 14,666                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | COMMUNITY HEALTH CENTER CONSTRUCTION                                    | 33,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ANTI-POACHING AWARENESS FOR RHINO HORN IN ASIA (SINGAPORE)              | 15,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | FISHERIES DEVELOPMENT IN THE LANDSCAPE MLW                              | 36,000                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | CAPACITY BUILDING IN MAKAME WILDLIFE MANAGEMENT AREA               | 11,643                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | CAPACITY BUILDING - FISH FARM MANAGEMENT                           | 54,186                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | COMMUNITY SEED MULTIPLICATION TRAINING FOR INCREASED FOOD SECURITY | 129,467                  | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | IMPROVE WATER SPRINGS AND WATER HARVEST ACTIVITIES                 | 22,240                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                              | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | WILDLIFE AND NATIONAL PARK CONSERVATION           | 36,690                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ENDUIMENT WMA SURVEY GRANT                        | 18,615                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | SUPPORT FORMAL RECOG OF LAND USE PLAN WORK IN MLW | 71,304                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DONATION TO KALAHARI CONSERVATION SOCIETY         | 10,000                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | PROTECTED AREA INFRASTRUCTURE, CAPACITY BUILDING AND CONSERVATION LAND GRANT | 116,497                  | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | VILLAGE OFFICE CONSTUCTION PROJECT   | 9,000                    | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | HIV/AIDS INTERVENTIONS SUPPORT   | 15,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | CHAPOTO COMMUNITY DEVELOPMENT GRANT  | 11,718                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                                | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | SAVE VALLEY CONSERVANCY RHINO ANTI-POACHING SUPPORT | 50,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | SUPPORT FOR BOREHOLE DRILLING                       | 12,873                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | CAPACITY BUILDING FOR PASTORALIST DEVELOPMENT       | 12,844                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | WILDLIFE MANAGEMENT AREA AND SCOUTS TRAINING        | 5,034                    | WIRE/EFT                        |                                   |  |   |



Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                          | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | AGROFORESTRY CAPACITY BUILDING                | 12,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | TLCT SUPPORT                                  | 5,687                    | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | BONGANDANGE PROJECT DEVELOPMENT SUPPORT       | 39,844                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | PROCESSING OF NTFPS AND AGRICULTURAL PRODUCTS | 10,200                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | COMMUNITY SCOUTS SUPPORT                                     | 13,492                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | CYBERTRACKER SUPPORT AND TRAINING NIOKOLO KOBA NATIONAL PARK | 10,000                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | KIDEPO NATIONAL PARK OFFICE RENOVATIONS                      | 22,505                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | GRANT AWARD FOR RANDLEN WMA TRAINING                         | 16,318                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                            | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | PROCESSING OF NTFPS AND AGRICULTURAL PRODUCTS   | 19,500                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ENVIRONMENTAL EDUCATION PROJECT                 | 11,400                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | EWASO LIONS PROJECT-PREDATOR WORK SUPPORT       | 7,392                    | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | GRANT TO KWS FOR LARGE ANIMAL CENSUS IN SAMBURU | 11,268                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | ELERAI TRUST- OLTIIYANI SCOUTS SALARIES  | 19,634                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ESTABLISHMENT OF THE SEKUTE CONSERVATION AREA  | 35,732                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | LUP AND SOIL EROSION CONTROL- UPPER KITETE KARATU  | 15,328                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | HIV/AIDS EDUCATION AND AWARENESS CAMPAIGN AMONG COMMUNITIES OF GALAPO, BAGARA, MAWE MAIRO, AND MWADA | 12,534                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant                                       | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | TAWIRI ASSESSMENT OF CARNIVORE SPECIES DENSITY             | 20,781                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | SUPPORT TO TLCT FOR MANYARA RANCH                          | 136,294                  | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | UGANDA COMMUNITY TOURISM DEVELOPMENT AND CAPACITY BUILDING | 37,578                   | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | DEVELOPMENT OF MICRO LIVESTOCK ENTERPRISE IN BEFALE        | 12,000                   | WIRE/EFT                        |                                   |  |   |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region         | (d) Purpose of grant  | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--------------------|---|--------------------------|---------------------------------|-----------------------------------|--|---|
|                          |   | SUB-SAHARAN AFRICA | ZAMBIA WILDLIFE SCOUTS TRAINING FEES                            | 8,440                    | WIRE/EFT                        |                                   |  |   |
|                          |   | SUB-SAHARAN AFRICA | ECONOMIC ASSESSMENT OF LAIKIPIA NP CONSERVATION AND DEVELOPMENT | 32,607                   | WIRE/EFT                        |                                   |  |   |

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

Part I Fundraising Activities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒ Mail solicitations

e

☒ Solicitation of non-government grants

b

☒ Internet and email solicitations

f

☒ Solicitation of government grants

c

☒ Phone solicitations

g

☐ Special fundraising events

d

☒ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

| (i) Name and address of individual or entity (fundraiser)                       | (ii) Activity                     | (iii) Did fundraiser have custody or control of contributions? |    | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
|---|-----------------------------------|--|----|-----------------------------------|--|---|
|   |                                   | Yes  | No |                                   |  |   |
| SANKY COMMUNICATIONS INC<br>599 11TH AVENUE 6TH FLOOR<br><br>NEW YORK, NY 10036 | MANAGEMENT OF DIRECT MAIL PROGRAM |  | No | 1,654,640                         | 215,728  | 1,438,912   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
|   |                                   |  |    |                                   |  |   |
| Total . . . . . ▶   |                                   |  |    | 1,654,640                         | 215,728  | 1,438,912   |

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, DC

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

|                 |    | (a) Event #1   | (b) Event #2 | (c) Other events | (d) Total events<br>(add col (a) through<br>col (c)) |
|-----------------|----|--|--------------|------------------|--|
|                 |    | (event type)   | (event type) | (total number)   |  |
| Revenue         | 1  | Gross receipts . . . .   |              |                  |  |
|                 | 2  | Less Contributions . . .   |              |                  |  |
|                 | 3  | Gross income (line 1<br>minus line 2) . . . .                          |              |                  |  |
| Direct Expenses | 4  | Cash prizes . . . .  |              |                  |  |
|                 | 5  | Noncash prizes . . .   |              |                  |  |
|                 | 6  | Rent/facility costs . . .  |              |                  |  |
|                 | 7  | Food and beverages .   |              |                  |  |
|                 | 8  | Entertainment . . . .  |              |                  |  |
|                 | 9  | Other direct expenses .  |              |                  |  |
|                 | 10 | Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶ |              |                  |  |
|                 | 11 | Net income summary Combine line 3, column (d), and line 10 . . . . . ▶ |              |                  |  |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

|                 |   | (a) Bingo   | (b) Pull tabs/Instant<br>bingo/progressive bingo            | (c) Other gaming  | (d) Total gaming (add<br>col (a) through col<br>(c)) |
|-----------------|---|---|---|---|--|
|                 |   |   |   |   |  |
| Direct Expenses | 1 | Gross revenue . . . . .   |   |   |  |
|                 | 2 | Cash prizes . . . . .   |   |   |  |
|                 | 3 | Non-cash prizes . . . .   |   |   |  |
|                 | 4 | Rent/facility costs . . . .   |   |   |  |
|                 | 5 | Other direct expenses . . .   |   |   |  |
|                 | 6 | Volunteer labor . . . .   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |  |
|                 | 7 | Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶    |   |   |  |
|                 | 8 | Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶ |   |   |  |

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

|                               |     |  |
|-------------------------------|-----|--|
| a The organization's facility | 13a |  |
| b An outside facility         | 13b |  |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493045002474

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Yes

No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| (a) Name and address of organization or government  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance      |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| (1) UNIVERSITY OF MARYLAND<br>4101 CHESAPEAKE BOULEVARD<br>COLLEGE PARK, MD 20742           | 52-6002033 | 501(C)(3)                          | 78,409                   |                                   |   |  | SPATIAL MODELING FOR LANDSCAPE ZONING   |
| (2) WILDAID<br>744 MONTGOMERY STREET<br>SUITE 300<br>SAN FRANCISCO, CA 94111                | 20-3644441 | 501(C)(3)                          | 135,000                  |                                   |   |  | WILDAID RHINO HORN CAMPAIGN             |
| (3) JANE GOODALL INSTITUTE<br>1595 SPRING HILL ROAD<br>VIENNA, VA 22182                     | 94-2474731 | 501(C)(3)                          | 53,755                   |                                   |   |  | UGANDA NATIONAL PARK CAPACITY BUILDING  |
| (4) THE SCHOOL FOR FIELD STUDIES<br>100 CUMMINGS CENTER<br>SUITE 534-G<br>BEVERLY, MA 01915 | 04-2711596 | 501(C)(3)                          | 25,837                   |                                   |   |  | SFS PREDATOR ASSESSMENT-MANAGEMENT PLAN |
| (5) INTERNATIONAL ECOTOURISM SOCIETY<br>PO BOX 96503 34145<br>WASHINGTON, DC 20009          | 03-0343403 | 501(C)(3)                          | 15,000                   |                                   |   |  | ECOTOURISM STUDIES                      |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |
|   |            |                                    |                          |                                   |   |  |   |

2

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

5

3

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

0

**Part III**

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

| (a)Type of grant or assistance | (b)Number of recipients | (c)Amount of cash grant | (d)Amount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|-------------------------|-------------------------|----------------------------------|--|---------------------------------------|
|                                |                         |                         |                                  |  |                                       |
|                                |                         |                         |                                  |  |                                       |
|                                |                         |                         |                                  |  |                                       |
|                                |                         |                         |                                  |  |                                       |
|                                |                         |                         |                                  |  |                                       |
|                                |                         |                         |                                  |  |                                       |
|                                |                         |                         |                                  |  |                                       |

**Part IV**

**Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

| Identifier                                 | Return Reference | Explanation  |
|--|------------------|--|
| PROCEDURE FOR MONITORING GRANTS IN THE U S | PART I, LINE 2   | SCHEDULE I, PART I, LINE 2 AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS IN SUCH CASES, ONLY KNOWN, VETTED ORGANIZATIONS ARE CHOSEN THAT CAN DEMONSTRATE AN ABILITY TO ACCOMPLISH THE PROGRAM OBJECTIVES BOTH FINANCIAL AND PROGRAMMATIC REPORTS ARE REQUIRED TO BE SUBMITTED TO THE RELATED HL IMPLEMENTATION TEAMS (GENERALLY HL DIRECTOR) THE HEARTLAND FINANCE AND ADMINISTRATION OFFICER REVIEWS SUB-RECIPIENT FINANCIAL REPORTS AND FORWARD TO THE GRANT FINANCIAL MANAGER FOR A FURTHER QUALITY CONTROL ONLY UPON HER REVIEW ARE FURTHER PAYMENTS OR ADVANCES PROVIDED GENERALLY, LARGE SUB-RECIPIENTS ARE PAID THROUGH DC, AND THUS RECEIVE THE ADDED SCRUTINY OF THE ACCOUNTING MANAGER, DIRECTOR OF FINANCE, AND/OR CFO BEFORE DISTRIBUTION |

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

Part I

Questions Regarding Compensation

|  | Yes | No  |
|--|-----|-----|
| <div>1a</div> <div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div> <div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div> |     |     |
| <div>b</div> <div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</div>   | 1b  |     |
| <div>2</div> <div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</div>   | 2   |     |
| <div>3</div> <div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</div> <div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div>  |     |     |
| <div>4</div> <div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</div>   |     |     |
| <div>a</div> <div>Receive a severance payment or change-of-control payment?</div>  | 4a  | Yes |
| <div>b</div> <div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div>  | 4b  | No  |
| <div>c</div> <div>Participate in, or receive payment from, an equity-based compensation arrangement?</div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>   | 4c  | No  |
| <div></div> <div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div>  |     |     |
| <div>5</div> <div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div>  |     |     |
| <div>a</div> <div>The organization?</div>  | 5a  | No  |
| <div>b</div> <div>Any related organization?</div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>  | 5b  | No  |
| <div>6</div> <div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</div>  |     |     |
| <div>a</div> <div>The organization?</div>  | 6a  | No  |
| <div>b</div> <div>Any related organization?</div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>  | 6b  | No  |
| <div>7</div> <div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</div>   | 7   | No  |
| <div>8</div> <div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</div>  | 8   | No  |
| <div>9</div> <div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div>   | 9   |     |

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

| (A) Name and Title  |             | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported as deferred in prior Form 990 |
|---|-------------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
|   |             | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |  |                         |                                 |   |
| (1)PATRICK BERGIN<br>CHIEF EXECUTIVE OFFICER              | (i)<br>(ii) | 238,075<br>0                                       | 0<br>0                              | 0<br>0                              | 40,808<br>0                                    | 7,997<br>0              | 286,880<br>0                    | 0<br>0  |
| (2)HELEN GICHOHI<br>PRESIDENT (THRU 11/2012)              | (i)<br>(ii) | 142,808<br>0                                       | 0<br>0                              | 0<br>0                              | 14,281<br>0                                    | 11,359<br>0             | 168,448<br>0                    | 0<br>0  |
| (3)JOANNA ELLIOT<br>VP OF KNOWLEDGE MGMT (THRU 03/2013)   | (i)<br>(ii) | 166,492<br>0                                       | 0<br>0                              | 0<br>0                              | 16,649<br>0                                    | 19,155<br>0             | 202,296<br>0                    | 0<br>0  |
| (4)JEFF CHRISFIELD<br>CHIEF FINANCIAL OFFICER             | (i)<br>(ii) | 162,069<br>0                                       | 0<br>0                              | 0<br>0                              | 16,207<br>0                                    | 9,583<br>0              | 187,859<br>0                    | 0<br>0  |
| (5)CRAIG SHOLLEY<br>VP OF PHILANTHROPY/MARKETING          | (i)<br>(ii) | 161,641<br>0                                       | 0<br>0                              | 0<br>0                              | 16,164<br>0                                    | 5,283<br>0              | 183,088<br>0                    | 0<br>0  |
| (6)DAUDI SUMBA VP OF PROGRAM OPERATIONS                   | (i)<br>(ii) | 154,596<br>0                                       | 0<br>0                              | 0<br>0                              | 15,460<br>0                                    | 4,450<br>0              | 174,506<br>0                    | 0<br>0  |
| (7)HARRY VAN DER LINDE SNR DIR PROG DESIGN (THRU 10/2012) | (i)<br>(ii) | 111,321<br>0                                       | 0<br>0                              | 66,138<br>0                         | 11,132<br>0                                    | 2,812<br>0              | 191,403<br>0                    | 0<br>0  |

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation  |
|------------|------------------|--|
|            | PART I, LINE 4A  | HARRY VAN DER LINDE, WHO SERVED AS SENIOR DIRECTOR OF PROGRAM DESIGN, UNTIL OCTOBER 31, 2012, RECEIVED A SEVERANCE PAYMENT OF \$66,138 |

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

Part I

Types of Property

|  | (a)<br>Check<br>if<br>applicable | (b)<br>Number of contributions<br>or items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line<br>1g | (d)<br>Method of determining<br>noncash contribution amounts |
|--|----------------------------------|--|---|--|
| 1 Art—Works of art . . . . .   |                                  |  |   |  |
| 2 Art—Historical treasures . . . . .                                       |                                  |  |   |  |
| 3 Art—Fractional interests . . . . .                                       |                                  |  |   |  |
| 4 Books and publications . . . . .   |                                  |  |   |  |
| 5 Clothing and household<br>goods . . . . .                                |                                  |  |   |  |
| 6 Cars and other vehicles . . . . .  |                                  |  |   |  |
| 7 Boats and planes . . . . .   |                                  |  |   |  |
| 8 Intellectual property . . . . .  |                                  |  |   |  |
| 9 Securities—Publicly traded . . . . .                                     | X                                | 29   | 264,560   | FAIR MARKET VALUE  |
| 10 Securities—Closely held stock . . . . .                                 |                                  |  |   |  |
| 11 Securities—Partnership, LLC,<br>or trust interests . . . . .            |                                  |  |   |  |
| 12 Securities—Miscellaneous . . . . .                                      |                                  |  |   |  |
| 13 Qualified conservation<br>contribution—Historic<br>structures . . . . . |                                  |  |   |  |
| 14 Qualified conservation<br>contribution—Other . . . . .                  |                                  |  |   |  |
| 15 Real estate—Residential . . . . .                                       |                                  |  |   |  |
| 16 Real estate—Commercial . . . . .  |                                  |  |   |  |
| 17 Real estate—Other . . . . .   |                                  |  |   |  |
| 18 Collectibles . . . . .  |                                  |  |   |  |
| 19 Food inventory . . . . .  |                                  |  |   |  |
| 20 Drugs and medical supplies . . . . .                                    |                                  |  |   |  |
| 21 Taxidermy . . . . .   |                                  |  |   |  |
| 22 Historical artifacts . . . . .  |                                  |  |   |  |
| 23 Scientific specimens . . . . .  |                                  |  |   |  |
| 24 Archeological artifacts . . . . .                                       |                                  |  |   |  |
| 25 Other ► ( _____ )   |                                  |  |   |  |
| 26 Other ►( _____ )  |                                  |  |   |  |
| 27 Other ►( _____ )  |                                  |  |   |  |
| 28 Other ► ( _____ )   |                                  |  |   |  |

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|



**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

**Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.**  
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

**2012**

**Open to Public  
Inspection**

|   |  |
|---|--|
| Name of the organization<br>AFRICAN WILDLIFE FOUNDATION INC | Employer identification number<br>52-0781390 |
|---|--|

| Identifier | Return Reference                               | Explanation  |
|------------|--|--|
|            | FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 11 | DATA AND INFORMATION FOR THE FEDERAL FORM 990 ARE COMPILED BY THE FINANCE DEPARTMENT AND REVIEWED BY THE CFO. UPON RECEIPT OF THE FEDERAL FORM 990 FROM AWF TAX ACCOUNTANTS, THE COMPLETED RETURN UNDERGOES A SECOND LEVEL OF REVIEW BY THE CFO. CHANGES ARE COMMUNICATED TO THE TAX ACCOUNTANTS AS NECESSARY AND APPROPRIATE. THE FINAL DRAFT IS REVIEWED BY THE CFO AND THE CEO BEFORE BEING PRESENTED TO THE AUDIT COMMITTEE. THEREAFTER, A COPY OF THE RETURN IS PROVIDED TO THE FULL BOARD OF TRUSTEES BEFORE FILING WITH THE INTERNAL REVENUE SERVICE. |

| Identifier | Return Reference                                | Explanation   |
|------------|---|---|
|            | FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 12C | TRUSTEES AND OFFICERS RECEIVE AND SIGN A CONFLICT OF INTEREST POLICY STATEMENT UPON ELECTION TO THE BOARD OF TRUSTEES, WITH NEW FORMS COMPLETED AT LEAST ANNUALLY IF A TRUSTEE FEELS SHE/HE MAY HAVE A POTENTIAL CONFLICT OF INTEREST WITH AWF, THESE CONCERNS ARE BROUGHT TO THE ATTENTION OF THE BOARD OF TRUSTEES' CHAIR AND/OR AUDIT COMMITTEE OF THE BOARD OF TRUSTEES' FOR DELIBERATION ALL STAFF MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY UPON HIRING AND WITH EACH NEW CONTRACT AMENDMENT STAFF CONCERNS REGARDING CONFLICTS OF INTEREST ARE BROUGHT TO THE HUMAN RESOURCES DEPARTMENT FOR RESEARCH WITH REVIEW BY THE CHIEF FINANCIAL OFFICER AND OTHER MEMBERS OF EXECUTIVE MANAGEMENT AS NECESSARY WITH REGARD TO CONTRACT REVIEW, STAFF THAT REVIEW PURCHASES AND CONTRACTS ARE TRAINED TO QUESTION POTENTIAL CONFLICTS OF INTEREST LOCAL FINANCE OFFICES REVIEW TRANSACTIONS UP TO \$1,000, WITH ADDITIONAL SCRUTINY GIVEN TO LARGER CONTRACTS ANY POTENTIAL CONFLICTS OF INTEREST ARE FORWARDED TO THE CFO FOR REVIEW |

| Identifier | Return Reference                               | Explanation  |
|------------|--|--|
|            | FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 15 | A STUDY OF COMPENSATION FOR OFFICERS AND KEY EMPLOYEES IS CONDUCTED ANNUALLY FOR ALL OFFICERS AND KEY STAFF LOCATED WITHIN THE UNITED STATES, INFORMATION FROM COMPARABLE ORGANIZATIONS IS COLLECTED THROUGH PUBLICLY AVAILABLE FEDERAL 990 FORMS FOR KEY EMPLOYEES LOCATED OUTSIDE THE UNITED STATES, COMPENSATION STUDIES ARE OBTAINED AS NECESSARY TO PROVIDE COMPARABLE DATA. COMPENSATION DATA IS SUMMARIZED IN A REPORT AND APPROVED FIRST BY THE BOARD COMPENSATION COMMITTEE, AND THEN BY THE FULL BOARD OF TRUSTEES EACH JANUARY. THE BOARD OF TRUSTEES SETS THE COMPENSATION FOR AWF'S CHIEF EXECUTIVE OFFICER, AND PROVIDES GUIDELINES FOR THE CEO TO SET OTHER EXECUTIVE SALARIES. |

| Identifier | Return Reference                         | Explanation   |
|------------|--|---|
|            | FORM 990, PART VI,<br>SECTION C, LINE 19 | AWF'S GOVERNING DOCUMENTS, POLICIES, FINANCIAL STATEMENTS AND FEDERAL FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST. ADDITIONALLY, COPIES OF THE FEDERAL FORM 990 AND ANNUAL REPORTS ARE MAINTAINED ON THE WEBSITE. |

| Identifier | Return Reference | Explanation  |
|------------|------------------|--|
|            |                  | <p>FORM 990, PART III, LINE 4A AWF CONTINUES TO PIONEER THE USE OF COMMUNITY CONSERVATION ENTERPRISES, PROVIDE CRITICAL ASSISTANCE TO NATIONAL PARKS AND RESERVES, AND PROMOTE INTERNATIONAL COOPERATION TO PROTECT IMPORTANT SITES AND POPULATIONS THAT STRETCH ACROSS NATIONAL BOUNDARIES-DEMONSTRATING THAT WILDLIFE AND PEOPLE CAN THRIVE SIDE BY SIDE AWF'S WORK CAN BE CATEGORIZED INTO FOUR CORE AREAS LAND AND HABITAT CONSERVATION, WILDLIFE PROTECTION, CONSERVATION ENTERPRISE, EDUCATION AND TRAINING AWF IS ALSO ACTIVE IN CLIMATE CHANGE ACTIVITIES AND IN POLICY DISCUSSIONS BELOW IS A BRIEF DESCRIPTION OF AWF'S PERSPECTIVE ON EACH CATEGORY AND KEY ACHIEVEMENTS WITHIN THE LAST FISCAL YEAR</p> <p>A LAND AND HABITAT CONSERVATION AWF'S UNIQUE LARGE-LANDSCAPE APPROACH TO CONSERVATION FOCUSES ON IDENTIFYING AFRICA'S GREAT WILD SPACES, PIECING TOGETHER PARKS, PRIVATE LANDS, AND COMMUNITY LANDS, WHICH CAN BE SECURED AS A HOME FOR WILDLIFE HISTORICALLY, AWF WORKED TO ESTABLISH NATIONAL PARKS AND WILDLIFE RESERVES, AND TO HELP LOCAL PEOPLE ESTABLISH COMMUNITY CONSERVANCIES AWF IS NOW SUPPORTING THE MANAGEMENT OF PARKS AND EXPLORING NEW PRIVATE LAND CONSERVATION APPROACHES, INCLUDING LIMITED LAND ACQUISITION AND NEW TYPES OF CONSERVATION LEASES, TO PROTECT CRITICAL WILDLIFE HABITAT I AWF BEGAN WORKING WITH WILDLIFE AND PROTECTED AREA AUTHORITIES IN UGANDA UNDER A NEW GRANT, USAID/UGANDA TOURISM FOR BIODIVERSITY PROGRAM PART OF THIS WORK INVOLVES CAPACITY BUILDING OF AUTHORITIES TO BOOST UGANDA'S WILDLIFE TOURISM PRODUCT, BUT A BIG PORTION OF THIS WORK INVOLVES ENSURING ONGOING CONSERVATION AND PROTECTION OF UGANDA'S NATIONAL PARKS AND PROTECTED AREAS AWF HAS BEGUN MEETING WITH LANDOWNERS IN SOME OF THE AREAS IMMEDIATELY SURROUNDING NATIONAL PARKS ON THE IDEA OF COMMUNITY CONSERVANCIES, WHERE PRIVATELY OWNED LAND IS PROTECTED FOR WILDLIFE BUT LANDOWNERS GET ECONOMIC BENEFITS FROM THESE CHOICES WHILE AWF IS ASSISTING IN THE DISCUSSIONS AND THE PROCESS OF EXPLORING THE POTENTIAL FOR A COMMUNITY CONSERVANCY, THIS WILL BE A PROCESS VERY MUCH DRIVEN BY THE LOCAL LANDOWNERS, ENSURING THAT THIS LAND CONSERVATION EFFORT IS EMBRACED AT THE LOCAL LEVEL</p> <p>B WILDLIFE PROTECTION EVEN WHERE LAND AND HABITAT HAVE BEEN SECURED, CERTAIN SPECIES FACE UNIQUE THREATS AND REQUIRE A TARGETED CONSERVATION APPROACH POPULATIONS OF RARE AND ENDANGERED SPECIES, SUCH AS THE RHINOCEROS, GORILLA, AND ALL OF THE GREAT CATS, HAVE BEEN DIMINISHED DUE TO POACHING, DISEASE, AND CONFLICT WITH HUMANS AWF USES A NUMBER OF METHODS TO MONITOR AND PROTECT KEY POPULATIONS AND ENSURE THESE SPECIES SURVIVE AND THRIVE IN THEIR NATIVE HABITAT ONE OF THESE TACTICS IS TO PROVIDE FUNDING TO PARTNERS ON THE GROUND THROUGH THE NEWLY LAUNCHED SPECIES PROTECTION GRANTS PROGRAM THE GRANTS PROGRAM FUNDS PROJECTS IN SIX THEMATIC AREAS ELEPHANTS, RHINOS, CARNIVORES, GREAT APES, LAW ENFORCEMENT, AND AWARENESS I IN SOUTHERN AFRICA, AWF HAS PROVIDED FUNDING FOR THE PROTECTION OF RHINOS SAVE VALLEY CONSERVANCY HAS A CRITICAL POOPULATION OF BLACK RHINOS, BUT THE CONSERVANCY IS UNDER SEVERE ECONOMIC PRESSURE DUE TO LOSS OF TOURISM INCOME AWF IS PROVIDING SUPPORT FOR THE CONSERVANCY TO APPROPRIATELY MANAGE AND PROTECT THESE RHINOS IN SOUTH AFRICA, AWF'S SUPPORT OF GREAT FISH RIVER NATURE RESERVE HAS ALLOWED THE RESERVE TO INSTALL NEW "SA FETY" DOORS ON ITS RHINO ENCLOSURES, BUILD AN AIRPLANE HANGAR FOR AERIAL SURVEILLANCE EFFORTS AND PURCHASE FOUR NEW MOTORBIKES FOR PATROLS OF THE RESERVE II IN EAST AFRICA, AWF IS HELPING TO TIGHTEN SECURITY IN CRITICAL AREAS AND PROVIDE PROTECTION OF ELEPHANTS UNDER THE NEW GRANTS PROGRAM, AWF HAS ENSURED THAT MANYARA RANCH CONSERVANCY, WHICH CONNECTS BOTH TARANGIRE NATIONAL PARK AND LAKE MANYARA NATIONAL PARK, IS UNDER TIGHTER SECURITY, WITH SPECIALIZED TRAINING FOR SCOUTS ON THE CONSERVANCY, AND THE PURCHASE OF NEW VEHICLES TO BETTER MONITOR THE PROTECTED AREA AWF HAS ALSO COORDINATED AN ANTIPOACHING TASK FORCE WITH LOCAL PROTECTED AREA AUTHORITIES, THE REGIONAL CRIME OFFICE, AND THE STATE'S ATTORNEY'S OFFICE IN ARUSHA, AN EFFORT THAT HAS RESULTED IN THE APPREHENSION OF SEVERAL POACHERS SINCE THE BEGINNING OF THE 2013 CALENDAR YEAR III IN CENTRAL AND WEST AFRICA, AWF LAUNCHED THE AFRICAN APES INITIATIVE TO HELP ENSURE THAT GREAT APES IN AFRICA'S LAST REMAINING FORESTED HABITATS GET SUPPORT AND PROTECTION GREAT APES IN AFRICA ARE AT RISK FROM HABITAT FRAGMENTATION AND DESTRUCTION, THE PET TRADE, TRANSFER OF HUMAN DISEASE, AND MORE UNDER THE AFRICAN APES INITIATIVE, AWF IS APPLYING ITS DECADES OF GREAT APE PROTECTION EXPERIENCE WITH BONOBOS AND MOUNTAIN GORILLAS TO THE OTHER GREAT APE SPECIES ON THE CONTINENT THE INITIATIVE HAS ALREADY ALLOWED FOR AWF TO BEGIN TRAINING RANGERS IN NIOKOLO-KOBA NATIONAL PARK IN SENEGAL, DJA BIOSPHERE RESERVE IN CAMEROON AND BILIUELE ON ECOLOGICAL MONITORING AND THE USER OF THE CYBERTRACKER/TRIMBLE ECOLOGICAL MONITORING TECHNOLOGY</p> <p>C CONSERVATION ENTERPRISE AWF BELIEVES THAT AFRICA'S WILDLIFE AND WI</p> |

| Identifier | Return Reference | Explanation  |
|------------|------------------|--|
|            |                  | <p>LD LANDS CAN ONLY BE TRULY SECURE WHEN CONSERVATION OPERATIONS HAVE A SOUND FINANCIAL BASIS, AND WHEN ECONOMIC INCENTIVES EXIST FOR LOCAL PEOPLE TO HELP CONSERVE NATURAL SYSTEMS. OVER THE PAST SEVERAL YEARS, AWF HAS WORKED WITH PRIVATE SECTOR PARTNERS TO CREATE CUTTING-EDGE EXAMPLES OF CONSERVATION TOURISM PRODUCTS THAT INCLUDE EQUITY HOLDINGS AND OTHER INCENTIVES FOR LOCAL PEOPLE TO CONSERVE WILDLIFE AND ITS HABITAT. AWF IS CURRENTLY EXPANDING ITS EMPHASIS ON AGRICULTURE, LIVESTOCK, AND FISHERIES AS SMALL BUSINESSES THAT SUPPORT HUMAN NEEDS WHILE REDUCING RELIANCE ON THE EXPLOITATION OF WILDLIFE RESOURCES. I. AWF OPENED A NEW COMMUNITY-OWNED CONSERVATION LODGE IN ZAMBIA. THE AREA WHERE ZAMBIA, BOTSWANA, NAMIBIA AND ZIMBABWE MEET IS A HEAVY TOURIST ATTRACTION, IN PARTICULAR BECAUSE OF THE LARGE ELEPHANT POPULATION THAT MAKES ITS HOME THERE. INCREASED DEVELOPMENT HAS INCREASED HUMAN-WILDLIFE CONFLICT, HOWEVER, AND NEITHER LOCAL RESIDENTS NOR ELEPHANTS HAVE BENEFITED SIGNIFICANTLY FROM AREA TOURISM. AWF BROKERED AN AGREEMENT WITH THE LOCAL COMMUNITY AND A PRIVATE SECTOR PARTNER WHEREIN THE COMMUNITY OWNS THE NEW MACHENJE FISHING LODGE AND THE PARTNER OPERATES IT. REVENUES ARE SPLIT BETWEEN THE COMMUNITY AND THE PRIVATE OPERATOR, WITH COMMUNITY REVENUES TO BE PUT TOWARD COMMUNITY DEVELOPMENT PROJECTS THAT WILL PROVIDE A BETTER LIFE FOR THE RESIDENTS AND INCENTIVIZE THEM INTO PROTECTING THE AREA ELEPHANTS. II. AWF CONTINUES TO PROVIDE SUPPORT TO A FINANCIAL SERVICES ORGANIZATION IN KENYA. IN AN AREA WHERE WOMEN HAVE FEW OPPORTUNITIES AND WEALTH HAS TRADITIONALLY BEEN MEASURED BY THE SIZE OF ONE'S LIVESTOCK HERD, AWF HAS PROVIDED ONGOING SUPPORT TO A FINANCIAL SERVICES ORGANIZATION, NASARUNI, THAT IN THE PAST THREE YEARS HAS GROWN FROM A MERE 141 MEMBERS AND ABOUT US\$250 IN ASSETS TO MORE THAN 1,100 MEMBERS AND AN ASSET BASE OF US\$102,000. A MAJORITY OF THE MEMBERS ARE WOMEN, AND THE HEAD OF THE NASARUNI BOARD IS A WOMAN. THE REPAYMENT RATE IS NEAR 90 PERCENT, AND THE BANK HAS ALLOWED WOMEN THROUGHOUT THE COMMUNITY TO ESTABLISH NEW BUSINESSES AND BUILD HOUSING FOR THEIR FAMILIES. MEANWHILE, KNOWLEDGE OF CONSERVATION ISSUES HAS INCREASED AMONG THE MEMBERSHIP. D. EDUCATION AND TRAINING. AWF WAS FOUNDED ON THE BELIEF THAT CONSERVATION EFFORTS MUST ULTIMATELY REST IN THE HANDS OF THE PEOPLE OF AFRICA WHO, WITH EDUCATIONAL SUPPORT, WILL CONSTRUCT A VIABLE PLATFORM TO CONSERVE THE CONTINENT'S WILDLIFE HERITAGE. OVER THE PAST DECADES, AWF HAS SPONSORED HUNDREDS OF YOUNG AFRICAN CONSERVATIONISTS TO STUDY WILDLIFE MANAGEMENT AND TO ACQUIRE HIGHER DEGREES IN CONSERVATION-RELATED FIELDS. BEYOND FORMAL EDUCATION, AWF WORKS TO TRAIN LOCAL PEOPLE AND BUILD THE CAPACITY OF AFRICAN INSTITUTIONS TO PROTECT AND MANAGE WILDLIFE. I. AWF CONTINUED ITS CONSERVATION MANAGEMENT TRAINING PROGRAM. AWF IMPLEMENTED AND BEGAN TRAINING ITS FIRST CLASS OF CONSERVATION MANAGEMENT TRAINEES, A NEW HIGH-LEVEL MANAGEMENT AND MENTORING PROGRAM FOR MASTER'S GRADUATES WHO HAVE AN INTEREST IN DEVELOPING THEIR PRACTICAL CONSERVATION KNOWLEDGE. TWO CANDIDATES, ONE FROM KENYA AND ONE FROM THE DEMOCRATIC REPUBLIC OF CONGO, BEGAN WITH THE PROGRAM IN AUGUST OF 2012 AND WERE IMMERSSED IN AWF'S PROGRAMS, POLICIES AND PROJECT WORK, FIRST AT AWF HEADQUARTERS IN NAIROBI, KENYA, AND LATER IN OUR LANDSCAPES. ONE OF OUR TRAINEES WAS STATIONED IN THE MAU FORESTS OF KENYA AND RECENTLY WAS HIRED AS A FULL-TIME PROJECT MANAGER IN THAT LANDSCAPE. THE OTHER TRAINEE WAS STATIONED IN KENYA'S SAMBURU LANDSCAPE FOR 9 MONTHS AND IS NOW UNDERGOING A SECOND PERIOD OF IMMERSION IN UGANDA, AS PART OF OUR USA ID/UGANDA TOURISM FOR BIODIVERSITY PROGRAM.</p> |

| Identifier | Return Reference | Explanation   |
|------------|------------------|---|
|            |                  | <p>II AWF LAUNCHED ITS AWF CONSERVATION SCHOOLS INITIATIVE, A GROUNDBREAKING PROGRAM THAT AIMS TO BUILD AND SUPPORT PRIMARY SCHOOLS IN RURAL AREAS, IN EXCHANGE FOR THOSE RURAL COMMUNITIES MAKING CERTAIN CONSERVATION CONCESSIONS. BUILDING UPON ITS ONGOING SUPPORT OF MANAYRA RANCH SCHOOL IN TANZANIA AND LUPANI PRIMARY SCHOOL IN ZAMBIA, AWF WILL, THROUGH THE CONSERVATION SCHOOLS INITIATIVE, BUILD ECOLOGICALLY FRIENDLY BUILDINGS AND TEACHER HOUSING, PROVIDE ACCESS TO TECHNOLOGY, PROVIDE TEACHER INCENTIVES AND ONGOING TEACHER TRAINING, AND INCORPORATE CONSERVATION CURRICULA INTO THE EDUCATIONAL SPHERE IN RURAL AREAS. AWF HAS PARTNERED WITH AN ARCHITECTURAL FIRM, MASS DESIGN GROUP, TO BEGIN DESIGNS ON A NEW SCHOOL IN ILIMA, DEMOCRATIC REPUBLIC OF CONGO, AND HAS BEGUN ASSESSING THE POTENTIAL FOR SIMILAR SCHOOLS IN ETHIOPIA AND RWANDA.</p> <p>III AWF HAS PROVIDED A SPECIAL TECHNICAL ADVISOR IN JUBA, SOUTH SUDAN, AT THE REQUEST OF THE SOUTH SUDANESE GOVERNMENT. PLACED WITHIN THE MINISTER OF WILDLIFE CONSERVATION AND TOURISM, THE ADVISOR--A FORMER DIRECTOR OF AWF'S MAASAI STEPPE LANDSCAPE--IS HELPING THE GOVERNMENT TO CREATE NEW WILDLIFE POLICIES, PROVIDING GUIDANCE ON RANGER TRAINING, OFFERING AWF'S VAST EXPERTISE IN CONSERVATION METHODOLOGIES AND LAND USE POLITICS, AND ESTABLISHING AN OVERALL A CULTURE OF CONSERVATION WITHIN A COUNTRY PREVIOUSLY RAVAGED BY DECADES OF WAR. E CLIMATE CHANGE AND POLICY WORK. AWF AND ITS PARTNERS ACROSS AFRICA'S LANDSCAPES CAN BE SUCCESSFUL ONLY IF RELEVANT POLICIES, LAWS, REGULATIONS, AND FINANCING MECHANISMS ARE SUPPORTIVE OF CONSERVATION AND RELATED ACHIEVEMENTS. AWF WORKS WITH INDIVIDUAL AFRICAN GOVERNMENTS, PARK AGENCIES, REGIONAL BODIES, AND INTERNATIONAL FUNDING AGENCIES TO HELP DEVELOP AND PROMOTE POLICIES THAT CREATE A ROBUST ENVIRONMENT FOR CONSERVATION AND SUSTAINABLE MODELS OF ECONOMIC DEVELOPMENT. AWF HAS ARTICULATED A SPECIFIC AGENDA, WHICH IS REVISITED EACH YEAR, OF THE MOST ESSENTIAL POLICY POSITIONS THAT WE URGE GOVERNMENTS TO ADOPT TO ENSURE THAT WILDLIFE SURVIVES WHILE CONTRIBUTING TO A PROSPEROUS FUTURE FOR AFRICA.</p> <p>I AWF CONTINUED ITS REDD PROJECTS IN TANZANIA, KENYA, AND THE DEMOCRATIC REPUBLIC OF CONGO. AWF RECENTLY EMBARKED ON A PROJECT TO INCORPORATE THE ENTIRETY OF THE CHYULU HILLS ECOSYSTEM IN SOUTHERN KENYA INTO A REDD+ PROJECT.</p> <p>II AWF PARTICIPATED IN LOCAL, NATIONAL, REGIONAL AND INTERNATIONAL CONFERENCES. AWF CONTINUED TO MAINTAIN ITS PRESENCE ON THE WORLD STAGE, ATTENDING A NUMBER OF KEY INTERNATIONAL CONFERENCES AND PARTICIPATING IN SEVERAL LOCAL, NATIONAL AND REGIONAL WORKSHOPS AND SEMINARS AS WELL. FOR EXAMPLE, AWF WAS A VISIBLE PRESENCE CITES CONFERENCE OF THE PARTIES IN THAILAND IN MARCH. FURTHER, AWF INVOLVED IN DISCUSSIONS WITH THE STATE DEPARTMENT AND OTHER NGOS THAT LED TO THE NOVEMBER 2012 ANNOUNCEMENT BY THEN-SECRETARY OF STATE HILLARY CLINTON TO ADD ILLEGAL WILDLIFE TRAFFICKING TO THE STATE DEPARTMENT'S FOREIGN POLICY AGENDA. AWF CEO PATRICK BERGIN HAS SUBSEQUENTLY PARTICIPATED IN HIGH-LEVEL, CLOSED-DOOR DISCUSSIONS WITH OTHER CONSERVATION GROUPS AND FORMER SECRETARY CLINTON ON THE TOPIC OF ILLEGAL WILDLIFE TRAFFICKING.</p> |

| Identifier | Return Reference | Explanation   |
|------------|------------------|---|
|            |                  | <p>FORM 990, PART III, LINE 4B A AWF INTENSIFIED ITS SAFARI PROGRAM OFFERINGS TO MEMBERS AND OTHER SUPPORTERS DURING ONE OF SEVERAL AWF PLANNED SAFARIS OVER THE PAST YEAR, AWF LED A GROUP OF MEMBERS ON A 13-DAY SAFARI TO TANZANIA THE TRIP WAS DESIGNED TO BUILD KNOWLEDGE ABOUT EAST AFRICA'S MAGNIFICENT WILDLIFE WHILE SPOTLIGHTING CONSERVATION PROJECTS THAT LINK WILDLIFE PROTECTION WITH IMPROVED HUMAN WELL-BEING THIS SAFARI WAS PARTICULARLY SPECIAL THIS YEAR BECAUSE IT INCLUDED THE WINNER OF AWF'S SAFARI SWEEPSTAKES COMPETITION B AWF CONTINUED ITS PARTNERSHIP WITH NATURE'S BEST PHOTOGRAPHY TO BUILD AWARENESS ABOUT WILDLIFE CONSERVATION AWF SPONSORED AN AFRICAN WILDLIFE CATEGORY IN THE PRESTIGIOUS NATURE'S BEST PHOTOGRAPHY WINDLAND SMITH RICE INTERNATIONAL AWARDS EVERY YEAR THE COMPETITION CELEBRATES THE BEAUTY AND DIVERSITY OF NATURE THROUGH THE ART OF PHOTOGRAPHY WINNERS ARE FEATURED IN A SEVERAL-MONTH-LONG PRINT EXHIBITION AT THE SMITHSONIAN'S NATIONAL MUSEUM OF NATURAL HISTORY FOR THOUSANDS OF VISITORS TO ENJOY AND LEARN FROM C AWF CONTINUED ITS PUBLIC AWARENESS CAMPAIGN IN CHINA ON RHINO POACHING, AND EXTENDED THAT CAMPAIGN TO ALSO EDUCATE ASIAN CONSUMERS ON ELEPHANT POACHING BECAUSE POACHING OF ELEPHANTS AND RHINOS IN AFRICA IS BEING CAUSED BY DEMAND IN ASIA FOR IVORY AND RHINO HORN, AWF HAS CONTINUED ITS UNIQUE CAMPAIGN WITH FELLOW NGO WILDAID, USING THE POWER OF ASIAN CELEBRITIES TO EDUCATE CONSUMERS AND WOULD-BE CONSUMERS OF THESE WILDLIFE PRODUCTS THAT THEIR DEMAND IS RESULTING IN THE BRUTAL KILLINGS OF AFRICA'S ICONIC WILDLIFE THUS FAR, PUBLIC SERVICE ANNOUNCEMENTS HAVE BEEN FILMED WITH FORMER NBA STAR YAO MING, MOVIE ACTION STAR JACKIE CHAN, VIETNAMESE-AMERICAN TV ACTRESS MAGGIE Q, AND OTHER CELEBRITIES WELL KNOWN IN ASIA SOME OF THESE PSAS AND BILLBOARDS HAVE BEEN DISTRIBUTED ALREADY IN CHINA</p> |



SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
AFRICAN WILDLIFE FOUNDATION INC

Employer identification number  
52-0781390

| Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) |                         |  |                     |                           |                                  |
|--|-------------------------|--|---------------------|---------------------------|----------------------------------|
| (a)<br>Name, address, and EIN (if applicable) of disregarded entity  | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|  |                         |  |                     |                           |                                  |
|  |                         |  |                     |                           |                                  |
|  |                         |  |                     |                           |                                  |
|  |                         |  |                     |                           |                                  |
|  |                         |  |                     |                           |                                  |
|  |                         |  |                     |                           |                                  |
|  |                         |  |                     |                           |                                  |

| Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) |                         |  |                            |   |                                  |  |    |
|---|-------------------------|--|----------------------------|---|----------------------------------|--|----|
| (a)<br>Name, address, and EIN of related organization   | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Section 512(b)(13) controlled entity? |    |
|   |                         |  |                            |   |                                  | Yes  | No |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |

Part III

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

| (a)<br>Name, address, and EIN of<br>related organization | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct<br>controlling<br>entity | (e)<br>Predominant<br>income(related,<br>unrelated,<br>excluded from<br>tax under<br>sections 512-<br>514) | (f)<br>Share of<br>total income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Dispropportionate<br>allocations? |    | (i)<br>Code V—UBI<br>amount in box<br>20 of<br>Schedule K-1<br>(Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>ownership |
|--|-------------------------|--|--|--|---------------------------------|--|--|----|--|---|----|--------------------------------|
|  |                         |  |  |  |                                 |  | Yes                                      | No |  | Yes                                       | No |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |
|  |                         |  |  |  |                                 |  |  |    |  |   |    |                                |

Part IV

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

| (a)<br>Name, address, and EIN of<br>related organization   | (b)<br>Primary activity                                 | (c)<br>Legal<br>domicile<br>(state or foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Type of entity<br>(C corp, S corp,<br>or trust) | (f)<br>Share of total<br>income | (g)<br>Share of end-of-<br>year<br>assets | (h)<br>Percentage<br>ownership | (i)<br>Section 512<br>(b)(13)<br>controlled<br>entity? |    |
|--|---|---|-------------------------------------|--|---------------------------------|---|--------------------------------|--|----|
|  |   |   |                                     |  |                                 |   |                                | Yes  | No |
| (1) AWC LIMITED<br><br>C/O AXIS FIDUCIARY 18N<br>FRERE FELIX<br>PORT LOUIS, PORT LOUIS<br>MP     | PROVISION OF CAPITAL FOR<br>CONSERVATION<br>ENTERPRISES | MP  | AFRICAN WILDLIFE<br>FOUNDATION      | C  | 29,109                          | 57,715                                    | 100 000 %                      | Yes  |    |
| (2) AWC CB1 LIMITED<br><br>C/O AXIS FIDUCIARY 18N<br>FRERE FELIX<br>PORT LOUIS, PORT LOUIS<br>MP | PROVISION OF CAPITAL FOR<br>CONSERVATION<br>ENTERPRISES | MP  | AWC LIMITED                         | C  | 108,416                         | 2,609,475                                 | 100 000 %                      | Yes  |    |
| (3) AWC CB2 LIMITED<br><br>C/O AXIS FIDUCIARY 18N<br>FRERE FELIX<br>PORT LOUIS, PORT LOUIS<br>MP | PROVISION OF CAPITAL FOR<br>CONSERVATION<br>ENTERPRISES | MP  | AWC LIMITED                         | C  |                                 | 2,678                                     | 100 000 %                      | Yes  |    |
|  |   |   |                                     |  |                                 |   |                                |  |    |
|  |   |   |                                     |  |                                 |   |                                |  |    |
|  |   |   |                                     |  |                                 |   |                                |  |    |
|  |   |   |                                     |  |                                 |   |                                |  |    |

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b No

1c No

1d Yes

1e No

1f No

1g No

1h No

1i No

1j No

1k No

1l No

1m No

1n No

1o No

1p No

1q No

1r Yes

1s No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| (a)<br>Name of other organization | (b)<br>Transaction<br>type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-----------------------------------|----------------------------------|------------------------|--|
| (1) AWC CB1 LIMITED               | A                                | 8,458                  | FMV  |
| (2) AWC CB1 LIMITED               | D                                | 500,000                | FMV  |
| (3) AWC LIMITED                   | R                                | 240,903                | FMV  |
|                                   |                                  |                        |  |
|                                   |                                  |                        |  |
|                                   |                                  |                        |  |

Schedule R (Form 990) 2012

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

[illegible]

**Software ID:**  
**Software Version:**  
**EIN:** 52-0781390  
**Name:** AFRICAN WILDLIFE FOUNDATION INC

**Part VII** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

| Identifier | Return Reference | Explanation |  |
|------------|------------------|-------------|--|
|------------|------------------|-------------|--|

-->

TY 2012 Investment in Subsidiaries Statement

**Name:** AFRICAN WILDLIFE FOUNDATION INC

**EIN:** 52-0781390

| Description                | Beginning Amount | Ending Amount |
|----------------------------|------------------|---------------|
| INVESTMENT IN SUBSIDIARIES | -108,871         | -522,788      |

TY 2012 Itemized Other Current Liabilities Schedule

**Name:** AFRICAN WILDLIFE FOUNDATION INC

**EIN:** 52-0781390

| Corporation Name | Corporation EIN | Description    | Beginning Amount | Ending Amount |
|------------------|-----------------|----------------|------------------|---------------|
| AWC CB1 LIMITED  |                 | OTHER PAYABLES | 40,842           | 3,000,000     |

**TY 2012 Itemized Other Current Assets Schedule****Name:** AFRICAN WILDLIFE FOUNDATION INC**EIN:** 52-0781390

| Corporation Name | Corporation EIN | Other Current Assets Description | Beginning Amount | Ending Amount |
|------------------|-----------------|----------------------------------|------------------|---------------|
| AWC LIMITED      |                 | AMOUNT DUE FROM RELATED PARTY    | 19,201           | 0             |
|                  |                 | PREPAID EXPENSES                 | 345              | 4,525         |



## TY 2012 Itemized Other Current Assets Schedule

**Name:** AFRICAN WILDLIFE FOUNDATION INC

**EIN:** 52-0781390

| Corporation Name | Corporation EIN | Other Current Assets Description | Beginning Amount | Ending Amount |
|------------------|-----------------|----------------------------------|------------------|---------------|
| AWC CB1 LIMITED  |                 | PREPAID EXPENSES                 | 346              | 4,526         |
|                  |                 | OTHER RECEIVABLES                | 19,156           | 2,107,676     |

TY 2012 Itemized Other Current Assets Schedule

**Name:** AFRICAN WILDLIFE FOUNDATION INC

**EIN:** 52-0781390

| Corporation Name | Corporation EIN | Other Current Assets Description | Beginning Amount | Ending Amount |
|------------------|-----------------|----------------------------------|------------------|---------------|
| AWC CB2 LIMITED  |                 | PREPAID EXPENSES                 |                  | 2,678         |

**TY 2012 Other Deductions Schedule****Name:** AFRICAN WILDLIFE FOUNDATION INC**EIN:** 52-0781390

| Description         | Foreign Amount<br>(should only be used<br>when attached to<br>5471 Schedule C<br>Line 16) | Amount |
|---------------------|---|--------|
| MANAGEMENT FEES     | 2,780,629   | 92,700 |
| ADMINISTRATION FEES | 263,665   | 8,790  |
| OTHER FEES          | 310,789   | 10,361 |
| TRAVEL              | 316,008   | 10,535 |
| SUPPLIES            | 1,050   | 35     |
| PRINTING            | 177,756   | 5,926  |
| POSTAGE & DELIVERY  | 19,857  | 662    |
| COMMUNICATIONS      | 360   | 12     |
| ADVERTISING         | 8,609   | 287    |
| LEGAL FEES          | 71,810  | 2,394  |
| PROFESSIONAL FEES   | 6,299   | 210    |

**TY 2012 Other Deductions Schedule****Name:** AFRICAN WILDLIFE FOUNDATION INC**EIN:** 52-0781390

| Description                       | Foreign Amount<br>(should only be used<br>when attached to<br>5471 Schedule C<br>Line 16) | Amount  |
|-----------------------------------|---|---------|
| LOSS ON AMORTIZATION OF LOAN REC. | 7,953,109   | 265,139 |
| PROFESSIONAL FEES                 | 1,414,671   | 47,162  |
| ADMINISTRATION FEES               | 3,629,907   | 121,014 |
| EXCHANGE RATE FLUCTUATIONS        | 1,399,163   | 46,645  |

## TY 2012 Other Deductions Schedule

**Name:** AFRICAN WILDLIFE FOUNDATION INC

**EIN:** 52-0781390

| Description         | Foreign Amount<br>(should only be used<br>when attached to<br>5471 Schedule C<br>Line 16) | Amount |
|---------------------|---|--------|
| PROFESSIONAL FEES   | 294,231   | 9,809  |
| ADMINISTRATION FEES | 209,492   | 6,984  |

TY 2012 Itemized Other Liabilities Schedule

**Name:** AFRICAN WILDLIFE FOUNDATION INC

**EIN:** 52-0781390

| Corporation Name | Corporation EIN | Other Liabilities Description | Beginning Amount | Ending Amount |
|------------------|-----------------|-------------------------------|------------------|---------------|
| AWC CB1 LIMITED  |                 | NOTES PAYABLE                 | 950,000          | 0             |

**TY 2012 Other Income Statement****Name:** AFRICAN WILDLIFE FOUNDATION INC**EIN:** 52-0781390

| Description          | Foreign Amount | Amount   |
|----------------------|----------------|----------|
| MANAGEMENT FEES      | 873,154        | 29,109   |
| EQUITY IN SUBSIDIARY | -15,681,609    | -522,790 |