Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

DLN: 93493036012105

2013

Open to Public Inspection

A F	or the 2	2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30	-2014		_		
B Cł	eck if ap	oplicable C Name of organization AFRICAN WILDLIFE FOUNDATION INC		D Emplo	yer ide	ntification number	
☐ Ad	dress cha	ange		52-07	78139	0	
☐ Na	me char	Doing Business As nge					
	tial retur rminated	1400 16TH CTDEET NW NO 120	e	E Telepho	one num	ber	
				(202)	939-3	3333	
_	nended r	WASHINGTON, DC 200362249					
A p	plication	pending		G Gross r	eceipts	\$ 42,796,449	
		F Name and address of principal officer		Is this a group			
		PATRICK BERGIN 1400 16TH STREET NW NO 120		subordinates?		┌ Yes ┌ No	
		WASHINGTON, DC 200362249	H(b)	Are all subord	nates	┌ Yes ┌ No	
	ax-exem	pt status		included? If "No." attach	ı a lıst	(see instructions)	
	/ a bait a	: ► WWW AWF ORG					
			H(c)	Group exempt	ion nui	mber F -	
		anization 🔽 Corporation 🗆 Trust 🗀 Association 🗀 Other ►	L Yea	er of formation 19	61 M	State of legal domicile DC	
Pa	rt I	Summary					
		Briefly describe the organization's mission or most significant activities	ENDII				
a 1	=	WF WORKS TO ENSURE THE WILDLIFE AND WILD LANDS OF AFRICA WILL	ENDU	REFUREVER			
ဋ	_						
Ē	-						
Governance	2 0	Check this box 🔭 if the organization discontinued its operations or disposed of	more t	han 25% of its	net as	ssets	
	3 1	lumber of voting members of the governing body (Part VI, line 1a)			з] 34	
20 ග්	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	33		
Æ	1	otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	48		
Activities &	1	otal number of volunteers (estimate if necessary)			6	33	
∢	1	otal unrelated business revenue from Part VIII, column (C), line 12			7a	0	
		let unrelated business taxable income from Form 990-T, line 34			7b	0	
				Prior Year		Current Year	
	8	Contributions and grants (Part VIII, line 1h)		21,999,	183	26,722,612	
Ē	9	Program service revenue (Part VIII, line 2g)		152,	091	609,718	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,592,	665	1,188,759	
Щ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		231,	462	236,557	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		23,975,		28,757,646 3,673,984	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		2,7 (3,	0	0	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines					
Expenses		5-10)		8,180,		9,292,323	
ই	16a	Professional fundraising fees (Part IX, column (A), line 11e)	-	215,	/28	362,082	
五	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,184,178	-				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,425,		10,212,844	
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	-	20,565,		23,541,233	
ص _	19	Revenue less expenses Subtract line 18 from line 12	Bor.	3,410, inning of Curre		5,216,413	
Net Assets or Fund Balances			Beg	Year		End of Year	
38. 18.	20	Total assets (Part X, line 16)		36,706,	549	44,743,327	
A E	21	Total liabilities (Part X, line 26)		4,413,	465	5,748,747	
žĒ	22	Net assets or fund balances Subtract line 21 from line 20		32,293,	084	38,994,580	

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 prepar preparer has any knowledge

Sign
Here
Here

Signature of officer

JEFF CHRISFIELD CHIEF OPERATING OFFICER Type or print name and title

Paid Preparer **Use Only**

Print/Type preparer's name FRANK H SMITH Preparer's signature Firm's name F RAFFA PC Firm's address \blacktriangleright 1899 L STREET NW SUITE 900 WASHINGTON, DC 20036

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

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)? <i>If "Yes," complete Schedule A</i>	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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		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 1	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 2	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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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 $\chi^{f G}$	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		Νo
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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		Νο
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
	·		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 18			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	_	,,	
2a	gaming (gambling) winnings to prize winners?	1c	Yes	
	Tax Statements, filed for the calendar year ending with or within the year covered by this return	3	Ti.	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country FTZ, SF, CG, ZA, UK, MZ, MP, KE, UV, UG 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? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
		5c		
	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?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
b	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		No
f	contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			110
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
0	Form 1098-C?	7h		
8	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.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. 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			
c	Enter the amount of reserves on hand	1		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Vec " has it filed a Form 7.20 to report these naumented If "No " provide an explanation in Schodule O	1 44		

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 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 34 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 Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . Nο Nο Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . . . Yes Each committee with authority to act on behalf of the governing body? Yes 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 Νo

Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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?			
а	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
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			

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
- 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 own website. Another's website. Upon request. Other (explain in Schedule O)

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?

- 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 200362249 (202)939-3333

Form 990 ((2013	
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Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ♦ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	Average	Posi		(C)				(D)	(E)	(F)
	d Title A verage hours per week (list any hours					heck unless officer stee)		Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Tıtle	A verage hours per more than one box, unless compensation week (list person is both an officer any hours and a director/trustee) reportable compensation from the any hours and a director/trustee) organization (W- organizations)								Reportable compensation from related organizations (W	,_	(F) Estima amount of compens from t	ted fother ation he	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	MISC)	2/1099-MISC)		rganizati relate organiza	ed
												-		
												-		
												-		
1b	Sub-Total			•				 -						
c	Total from continuation sheet	s to Part VII, S	ection A	١.			•	F						
d	Total (add lines 1b and 1c) .						•	•		1,471,638		0		346,706
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received	d more th	an			
													Yes	No
3	Did the organization list any fo					key	emplo	yee,	, or highest	compen	sated employee			
	on line 1a? If "Yes," complete S					•	• •	•		• •		3		N o
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1	a receive or acc	crue cor	npen	satio	on fr	om any	y unr	related orga	anızatıon	or individual for			
	services rendered to the organ	iization? <i>If "Yes</i>	," compl	ete S	ched	ule J	for su	ch pe	erson .			5		No
Se	ection B. Independent Co													
1	Complete this table for your five compensation from the organization												tay vear	
		(A)	-	4 (1011	101		. a re i i u	ai ye	.ar chang v		(B)	10113	(C)
DDOD	N NUCTION SOLUTIONS INC 1953 GALLOW	ame and business		32							cription of services AND MAILSHOP	-	Comper	
	Y COMMUNICATIONS INC 1953 GALLOW				0036						NDRAISING	\dashv		341,033

(A) Name and business address	(B) Description of services	(C) Compensation
PRODUCTION SOLUTIONS INC 1953 GALLOWS ROAD 600 VIENNA VA 22182	PRINTING AND MAILSHOP	459,737
SANKY COMMUNICATIONS INC 599 11TH AVENUE 6TH FLOOR NEW YORK NY 10036	ONLINE FUNDRAISING	341,033
CONSERVATION CAPITAL CONSULTING NEW CAVENDISH STREETLONDONUK	DEVELOPMENT & STRATEGIC MGMT	200,282
MASS DESIGN GROUP 334 BOYLSTON STREET SUITE 400 BOSTON MA 02116	DESIGN/CONSTRUCTION SERVICES	198,826
ABCO CONSTRUCTION LIMITED PO BOX 1039-00502NAIROBIKE	DESIGN/CONSTRUCTION SERVICES	173,586

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

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f
Program Serwice Revenue	22 b c c d e f f 3 3 4 5 5
svenue	3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Other Re	b c 9a b
	b c 11a b c d

7111	Statement o Check if Schedi	of Revenue ule O contains a respoi	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
ь	Membership du	es 1b					
С	Fundraising eve	ents 1c					
d		zations 1d					
e	Government grants		11,339,854				
f	_	ons, gifts, grants, and 1f	15,382,758				
g		ons included in lines	1,564,449				
h	Total. Add lines	s 1a-1f		26,722,612			
			Business Code				
2a	SAFARI INCOME		900099	475,611	475,611		
ь	PROGRAM INCOME		900099	134,107	134,107		
С							
d							
e		-					
f	All other progra	am service revenue					
g	Total. Add lines	s 2a – 2f	▶	609,718			
3		ome (including dividen		·			
	and other simila	aramounts)	•	703,401	13,601		689,800
4		stment of tax-exempt bond		193,474			193,474
5	Royalties	() D I		193,474			193,474
6a	Gross rents	(ı) Real	(II) Personal				
ь	Less rental						
	expenses Rental income						
	or (loss)						
a	Net rental incol	me or (loss) (i) Securities	► (II) O ther				
7a	Gross amount from sales of	14,524,161	(II) Other				
b	assets other than inventory Less cost or	14.020.002					
	other basis and sales expenses	14,038,803					
C	Gain or (loss)	485,358		405.350			405.050
d		ss)		485,358			485,358
8a	Gross income f events (not inc						
	of contributions See Part IV, lin						
ь	less direction	penses b					
C		penses b (loss) from fundraising	events 🛌				
9a		rom gamıng actıvıtıes	-				
L	less duri	a					
		penses b (loss) from gaming acti	vities				
	Gross sales of returns and allo	inventory, less					
		a					
		oods sold b	nto w.				
С	Net income or ((loss) from sales of inve s Revenue	entory				
11a	MAILING LIST		900099	22,284			22,284
b	INSURANCE S	_	900009	13,960			13,960
c	OTHER INCOM		900099	4,129			4,129
d		ue		2,710			2,710
e	Total. Add lines		🕨	42.000			
12	Total revenue.	See Instructions .	▶	43,083	605 515		
1			- 1	28,757,646	623,319	(1,411,715

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 or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 1,127,467 1,127,467 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 2,546,517 2,546,517 Benefits paid to or for members Compensation of current officers, directors, trustees, and 1,120,640 919,390 119,292 81,958 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 5,264,310 4,134,478 361,314 768,518 Pension plan accruals and contributions (include section 401(k) 575,125 448,104 41,792 and 403(b) employer contributions) 85,229 2,065,010 1,636,801 150,865 Other employee benefits . 277,344 10 267,238 211,198 19,989 36,051 11 Fees for services (non-employees) Management 71,784 10,708 Legal 54,488 6,588 118,389 21,882 96,507 Lobbying 362,082 Professional fundraising services See Part IV, line 17 362,082 Investment management fees 241,390 241,390 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 1,645,898 1,626,788 19,110 Schedule O) Advertising and promotion . 29,955 17,446 12 12,509 13 Office expenses . . . 1,049,703 860,720 124,697 64,286 285,483 89,721 14 Information technology . . 444,833 69,629 15 Royalties . 597,412 325,795 271,617 16 Occupancy **17** 1,341,829 1,194,369 17,311 130,149 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 1,531,957 1,456,330 75,627 20 Interest 30,907 11,225 13,366 6,316 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 419,615 283,398 134,213 2,004 23 18,092 7,401 10,091 600 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 805,852 429,493 376,146 213 FIELD EQUIPMENT 790,682 790,672 0 10 **VEHICLE OPERATIONS** 406,834 406,289 545 CONSTRUCTION 336,855 336,855 330,857 909,975 -354,903 e All other expenses -224,215 Total functional expenses. Add lines 1 through 24e 25 23,541,233 19,989,217 1,367,838 2,184,178 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► 🔽 if following SOP 98-2 (ASC 958-720) 1,021,005 405.769 615,236

Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 2,794,946 2,633,387 1 1 4.206.694 1.360.847 2 2 5,372,938 8,408,982 3 3 4 159,425 4 457.012 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 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 Assets 6 741,548 7 856,294 8 8 250.382 354,257 9 9 542,621 10a Land, buildings, and equipment cost or other basis Complete 6.006.590 10a Part VI of Schedule D 1,848,051 h Less accumulated depreciation 10b 4,389,190 10c 4,158,539 26,429,801 18,595,768 11 11 12 -710,379 12 -1,056,029 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 802,162 701,491 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 36,706,549 16 44,743,327 1,762,532 1,470,599 **17 17** 18 18 19 1,910,151 19 2,786,095 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . 596,961 23 766,000 24 24 Unsecured notes and loans payable to unrelated third parties 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 435,754 25 434,120 26 **Total liabilities.** Add lines 17 through 25 4,413,465 26 5,748,747 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 23,895,112 27 26,435,761 9,446,504 28 6,125,657 28 2,272,315 3,112,315 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds š 32,293,084 33 33 38,994,580

Total liabilities and net assets/fund balances

44,743,327

36.706.549

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		28,7	757,646
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			216,413
5	Net unrealized gains (losses) on investments	5			293,084 185,083
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		38,9	94,580
Par	t XII Financial Statements and Reporting				•
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of tl	he 2c	Yes	*
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ie	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	

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

Form 990, Part VII - Compens Compensated Employees, and				IIu	SIE	CS, F	(e y			
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			related organizations
MR DAVID E THOMSON	4 00	х		х				0	0	0
CHAIR HE BENJAMIN W MKAPA	2 00			X				0	0	0
VICE- CHAIR DR MYMA BELO-OSAGIE	2.00	×						0	0	0
SECRETARY	2 00	х		Х				0	o	О
MS MARLEEN GROEN	3 00	х		х				0	0	0
TREASURER MR ROBIN BERKELEY OBE	1 00	×						0	0	0
TRUSTEE MR PAYSON COLEMAN	3 00							0	0	0
TRUSTEE	3 00	х						0	0	0
MS LYNN DOLNICK TRUSTEE	3 00	×						0	0	0
MS LISA FIRESTONE	1 00	×						0	0	0
TRUSTEE DR HELEN GICHOHI	1 00									
TRUSTEE		×						0	0	0
MR LARRY GREEN TRUSTEE	2 00	×						0	0	О
MS HEATHER STURT HAAGA TRUSTEE	3 00	х						0	0	0
MS MONA HAMILTON TRUSTEE	1 00	х						0	0	0
MS CHRISTINE F HEMRICK	4 00	х						0	0	0
TRUSTEE MR WILLIAM E JAMES	1 00	×						0	0	0
TRUSTEE MS ADRIAN M JAY	2 00									
TRUSTEE		Х						0	0	0
HON KRISTINA M JOHNSON PHD TRUSTEE	1 00	×						0	0	0
DR STEPHEN JUELSGAARD	2 00	х						0	0	0
TRUSTEE MR RAHIM A KHAN	1 00	X						0	0	0
TRUSTEE MR ROBERT E KING	3 00									
TRUSTEE MS DENISE KOOPMANS	1.00	×						0	0	0
TRUSTEE	1 00	х						0	0	0
MS KRISTA KRIEGER TRUSTEE	2 00	х						0	0	0
MS SHANA LAURSEN	2 00	х						0	0	0
TRUSTEE MR CHRISTOPHER LEE	3 00	Х						0	0	0
TRUSTEE MS VICTORIA LESLIE	1 00	x						0	0	0
TRUSTEE HE FESTUS G MOGAE	2 00									
TRUSTEE		Х						0	0	0

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

(A) Name and Title	(B)	Posit		(C)	a+ ah	بامم		(D) Reportable	(E)	(F) Estimated amount
Name and Title	Average hours per week (list any hours	more the perso	nan o n ıs b	ne bo	ox, u an of	ınless fficer		compensation from the organization (W-	Reportable compensation from related organizations (W-	of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
HE RAZAN K AL MUBARAK	1 00	x						0	0	0
TRUSTEE		_ ^						0	0	0
MR WILFRED MURUNGI	1 00	l x						0	0	0
TRUSTEE										
MS KRISTINA PERSSON	1 00	×						0	0	0
TRUSTEE (UNTIL 10/2013) MR STUART SCOTT	3 00									
TRUSTEE	3 00	×						0	0	0
MS AGGIE SKIRBALL	1 00									
TRUSTEE		×						0	0	0
MS VERONICA VAREKOVA	1 00									
TRUSTEE		X						0	0	0
MR WARREN WALKER	2 00	V						0	0	0
TRUSTEE		Х						U	U	0
MR CHARLES R WALL TRUSTEE	2 00	×						0	0	0
MS MARIA WILHELM	3 00									
TRUSTEE		X						0	0	0
PATRICK BERGIN	40 00	х		х				240 E26	0	61.440
CHIEF EXECUTIVE OFFICER		_ ^		^				249,536	0	61,449
JEFF CHRISFIELD CHIEF OPERATING OFFICER	40 00			х				178,954	0	31,479
CRAIG SHOLLEY	40 00									
VP OF PHILANTHROPY/MARKETING				Х				170,568	0	27,996
DAUDI SUMBA	40 00			х				167,190	0	21,687
VP OF PROGRAM DESIGN AND GOVERNMENT RELATIONS KATHLEEN FITZGERALD	40 00									
	10 00			Х				138,448	0	44,541
VP OF CONSERVATION STRATEGY KADDU SEBUNYA	40 00									
CHIEF OF PARTY-USAID UGANDA PROGRAM						X		135,396	0	58,392
TYRENE HARALSON	40 00									
DIRECTOR OF FINANCE						X		113,500	0	26,264
JOHN BUTLER	40 00					х		106,764	0	21,815
DIRECTOR OF MARKETING & MEMBERSHIP								100,704	0	21,013
BRIAN MCBREARITY	40 00					x		106,150	0	25,114
DIRECTOR OF ENTERPRISE										
KURT REDENBO	40 00					x		105,132	0	27,969
DIRECTOR OF FOUNDATION & CORPORATION	J									

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As Filed Data -

DLN: 93493036012105

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name	of	the	orgai	nizati	on	
AFRICA	Nν	VILDL	IFE FC	UNDA	TION	INC

Employer identification number

		n described	in (i) or (ii) a ed organizat the on in ted in rning		zation f your	(vi) Is organizat col (i) org in the U	11g 11g((i) (ii)							
Provide the following the of (ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	n described the supporte (iv) Is t organizati col (i) list your gove	in (i) or (ii) a ed organizat the on in ted in rning	(v) Did you the organiz	zation f your	organızat col (i) org	11g 11g((i) (ii) (iii) (vii) A mount of monetary							
Provide the following	led entity of a perso	n described	ın (ı) or (ıı) a				11g 11g((i) (ii) (iii)							
	led entity of a perso	n described	ın (ı) or (ıı) a				11g	(i) (ii)							
(iii) A 35% controlled entity of a person described in (i) or (ii) above?							11g	(i) (ii)							
	(ii) A family member of a person described in (i) above?							(i)							
				and (III) below, the governing body of the supported organization? 11g(i)											
	rectly or indirectly c	ontrols, eith	er alone or t	ogether with	persons des	scribed in (ii)		following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No							
	006, has the organi	zation accep	ted any gift	or contributi	on from any	of the									
check this box							III Supporti								
section 509(a)(2)															
By checking this be	ox, I certify that the	organization	ıs not contr	olled directly	or indirectl	y by one or n	nore disqual	ıfıed persons							
one or more public the box that descri	y supported organizations the type of supp	ations descri orting organi	ibed in secti ization and d	ion 509(a)(1) complete line) or section s 11e throu	509(a)(2) S gh 11h	ee section 5	09(a)(3). Check							
-	•	-		•				.h							
					•		tax) from bu	isinesses							
						utions, mem	bership fees	, and gross							
				nplete Part II)										
				support from	a governme	ntal unit or f	rom the gene	eral public							
			al unit desc	rıbed ın secti	on 170(b)(1	.)(A)(v).									
				.,	p =	. 90.0									
An organization operated for the benefit of a college or university owned or operated by a governmental unit described in															
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the															
A hospital or a coo	perative hospital sei	rvice organiz	atıon descri	bed in sectio	n 170(b)(1)	(A)(iii).									
A school described	ın section 170(b)(1)(A)(ii). (At	tach Schedı	ıle E)											
							isti actions	·							
Reason for Pu	hlic Charity Stat														
	A church, conventing A school described A hospital or a cool A medical research hospital's name, critical An organization operation of the following acquired by the organization organization organization that receipts from activits support from gracial and organization of organization organization of organization of organization o	A church, convention of churches, or as A school described in section 170(b)(1) A hospital or a cooperative hospital set A medical research organization operation hospital's name, city, and state An organization operated for the benefit section 170(b)(1)(A)(iv). (Complete P A federal, state, or local government or An organization that normally receives described in section 170(b)(1)(A)(vi). A community trust described in section An organization that normally receives receipts from activities related to its exits support from gross investment incolacquired by the organization after June An organization organized and operated and operated one or more publicly supported organization or more publicly supported organization organized and operated one or more publicly supported organization box that describes the type of support a Type I b Type II c By checking this box, I certify that the other than foundation managers and oth section 509(a)(2) If the organization received a written decheck this box	A church, convention of churches, or association of A school described in section 170(b)(1)(A)(ii). (At A hospital or a cooperative hospital service organized A medical research organization operated in conjunt hospital's name, city, and state An organization operated for the benefit of a college section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or government An organization that normally receives a substantial described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A) An organization that normally receives (1) more the receipts from activities related to its exempt function its support from gross investment income and unreleacquired by the organization after June 30, 1975. Sono organization organized and operated exclusively one or more publicly supported organizations described box that describes the type of supporting organ a Type I b Type II c Type II. By checking this box, I certify that the organization other than foundation managers and other than one section 509(a)(2). If the organization received a written determination check this box	A church, convention of churches, or association of churches of A school described in section 170(b)(1)(A)(ii). (Attach Schedu A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). (Attach Schedu A hospital or a cooperative hospital service organization described in search organization operated in conjunction with a hospital's name, city, and state An organization operated for the benefit of a college or university section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) A community trust described in section 1	A church, convention of churches, or association of churches described in set A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section A medical research organization operated in conjunction with a hospital described hospital's name, city, and state An organization operated for the benefit of a college or university owned or o section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section and organization that normally receives a substantial part of its support from described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support receipts from activities related to its exempt functions—subject to certain exits support from gross investment income and unrelated business taxable in acquired by the organization after June 30, 1975 See section 509(a)(2). (C An organization organized and operated exclusively to test for public safety An organization organized and operated exclusively for the benefit of, to perfone or more publicly supported organizations described in section 509(a)(1) the box that describes the type of supporting organization and complete line a Type I b Type II c Type III - Functionally integrate By checking this box, I certify that the organization is not controlled directly other than foundation managers and other than one or more publicly supported section 509(a)(2) If the organization received a written determination from the IRS that it is a check this box	A church, convention of churches, or association of churches described in section 170(b) (1) (A) (ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b) (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	Reason for Public Charity Status (All organizations must complete this part.) See in ration is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a government section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or fit described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, mem receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more its support from gross investment income and unrelated business taxable income (less section 511 acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). Sthe 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 - No other than foundation managers and other than one or more publicly supported organizations describ section 509(a)(2). If the organization received a written determination from the IRS tha	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(iii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3 its support from gross investment income and unrelated business taxable income (less section 511 tax) from but acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(2) See section 509(a)(3) is a fixed by the organization of the supporting organization and complete lines 11e through 11h a Type I b Type III c Type III - Functionally integrated d Type III - Non-functionally other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2) If the organization rec							

instructions

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 (a) 2009 **(b)** 2010 (d) 2012 (c) 2011 (e) 2013 (f) Total in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do 20,418,220 24,614,325 19,132,189 21,999,183 26,722,612 112,886,529 not include any "unusual grants ") 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 20,418,220 24,614,325 19,132,189 21,999,183 26,722,612 112,886,529 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 6,766,956 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 106,119,573 from line 4 Section B. Total Support Calendar year (or fiscal year (d) 2012 (a) 2009 **(b)** 2010 (c) 2011 (e) 2013 (f) Total beginning in) 🟲 20,418,220 24,614,325 19,132,189 21,999,183 26,722,612 112,886,529 Amounts from line 4 Gross income from interest, dividends, payments received on 504,472 1,039,029 865,510 851,922 919,159 4,180,092 securities loans, rents, royalties and income from similar sources 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 5,577 10,190 11,618 20,675 20,799 68,859 capital assets (Explain in Part IV) 11 Total support (Add lines 7 117,135,480 through 10) Gross receipts from related activities, etc (see instructions) 12 12 1,901,724 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 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 14 90 600 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 94 290 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. 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 - 2013. 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 - 2012. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part 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

Cale	ndar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	in) ►		<u> </u>	, ,	<u> </u>	. ,	
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						
7	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)				1		
	ndar year (or fiscal year beginning	I				I	
Care	in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	1017 E-						
9	A mounts from line 6						
9 10a	,						
	Amounts from line 6						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after						
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included						
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	or the organization	on's first, second	, third, fourth, or f	fifth tax year as a	1 501(c)(3) organ	
10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fe check this box and stop here		·	, thırd, fourth, or f	fifth tax year as a	1 501(c)(3) organ	nization, ▶
10a b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe	ercentage		fifth tax year as a		
10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (ercentage f) divided by line		fifth tax year as a	15	
10a b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe (line 8, column (ercentage f) divided by line		fifth tax year as a		
10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (2 Schedule A, Pa	ercentage f) divided by line art III, line 15	13, column (f))	fifth tax year as a	15	
10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ection C. Computation of Pub Public support percentage from 201	ic Support Pe (line 8, column (2 Schedule A, Pa estment Inco	ercentage f) divided by line art III, line 15 me Percenta	13, column (f))		15	
10a b c 11 12 13 14 Se 15 16 Se 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Public support percentage for 2013 Public support percentage from 201 ction D. Computation of Inventional section of Invention of Invention in the section of Inventional se	ic Support Pe (line 8, column (2 Schedule A, Pa estment Inco 2013 (line 10c, co	ercentage f) divided by line art III, line 15 me Percentage blumn (f) divided	13, column (f)) ge by line 13, colum		15 16	
10a b c 11 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the sale of the computation of Public support percentage for 2013 Public support percentage from 201 ection D. Computation of Inventor	ic Support Per (line 8, column (2 Schedule A, Parestment Inco 2013 (line 10 c, con 2012 Schedule A	ercentage f) divided by line art III, line 15 me Percentag blumn (f) divided A, Part III, line 1	13, column (f)) ge by line 13, colum 7	n (f))	15 16 17 18	▶

33 1/3% support tests—2012. 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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Supplemental Information. 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					
Return Reference	Explanation				
EXPLANATION OF OTHER	OTHER INCOME - 2009 AMOUNT \$ 5,577 2010 AMOUNT \$ 10,190 2011 AMOUNT \$ 11,618 2012 AMOUNT \$ 0 2013 AMOUNT \$ 4,129 AFRICA REV HOLDINGS - 2012 AMOUNT \$ 1,675 2013 AMOUNT \$ 0 MERCHANDISE SALES - 2012 AMOUNT \$ 19,000 2013 AMOUNT \$ 2,710 INSURANCE SETTLEMENT CLAIM - 2013 AMOUNT \$ 13,960				

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493036012105

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Int

Supplemental Financial Statements

► 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. ► Information about Schedule D (Form 990)

Open to Public

and its instructions is at <u>www.rrs.gov/rorm990</u> .	Inspection
me of the organization RICAN WILDLIFE FOUNDATION INC	Employer identification number
	52-0781390
Organizations Maintaining Donor Advised Funds or Other Similar F	unds 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
Aggregate contributions to (during year)	
Aggregate grants from (during year)	
Aggregate value at end of year 1,137,33	3
Did the organization inform all donors and donor advisors in writing that the assets held in don funds are the organization's property, subject to the organization's exclusive legal control?	nor advised
Did the organization inform all grantees, donors, and donor advisors in writing that grant funds used only for charitable purposes and not for the benefit of the donor or donor advisor, or for a conferring impermissible private benefit?	
rt II Conservation Easements. Complete if the organization answered "Yes" t	to Form 990. Part IV. line 7.
	n historically important land area certified historic structure the form of a conservation
easement on the last day of the tax year	
	Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d
Number of conservation easements modified, transferred, released, extinguished, or terminate the tax year -	ed by the organization during
Number of states where property subject to conservation easement is located ▶	<u></u>
Does the organization have a written policy regarding the periodic monitoring, inspection, have enforcement of the conservation easements it holds?	ndling of violations, and
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easer	ments during the year
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements \$\blue{\text{F}} \ldots \	ts during the year
Does each conservation easement reported on line 2(d) above satisfy the requirements of secand section $170(h)(4)(B)(II)$?	ction 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports conservation easements in its revenue and balance sheet, and include, if applicable, the text of the footnote to the organization's financial the organization's accounting for conservation easements	
**Complete If the organization answered "Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revelowers of art, historical treasures, or other similar assets held for public exhibition, education, service, provide, in Part XIII, the text of the footnote to its financial statements that describe	or research in furtherance of public
If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue works of art, historical treasures, or other similar assets held for public exhibition, education, service, provide the following amounts relating to these items	statement and balance sheet
(i) Revenues included in Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$
If the organization received or held works of art, historical treasures, or other similar assets following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	for financial gain, provide the
Revenues included in Form 990, Part VIII, line 1	► \$

Par	Organizations Maintaining Co	llections of Art	, Hist	orical 1	reasu	res, or Ot	<u>her Similar A</u>	ssets (continu	ıed)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, che	eck any of	f the foll	owing that ar	e a significant us	e of its	
а	Public exhibition		d	☐ Loai	n or exc	hange progra	ms		
b	Scholarly research		e	┌ Oth	er				
c	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and expla	ın how	they furth	ner the c	organization's	s exempt purpose	: In	
5	During the year, did the organization solicit								
Dat	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrang		-					Yes N	10
FG	Part IV, line 9, or reported an ar					i aliswereu	res to roilii		
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	ediary f	or contrib	outions	or other asse	ts not	┌ Yes ┌ N	10
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ng table					
						_		mount	
с	Beginning balance					-	lc		—
d	Additions during the year					F	ld		
e •	Distributions during the year					-	le		—
f	Ending balance	000 5	24-			L ³	Lf		
2a	Did the organization include an amount on F							「Yes 「N	- -
ь	If "Yes," explain the arrangement in Part XI							<u> </u>	
Pa	rt V Endowment Funds. Complete	if the organizatior (a)Current year		<u>vered "Y</u> nor year			Part IV, line 10 (d)Three years back		ack
1a	Beginning of year balance	22,168,845	(5)	19,788,81		15,239,993	12,423,622		
b	Contributions	2,818,826		1,382,88	4	4,569,518	1,641,519	859,	,647
c	Net investment earnings, gains, and losses	2,754,271		1,179,05	3	424,401	1,571,398	188,	,197
d	Grants or scholarships								
е	Other expenditures for facilities and programs	1,127,830		181,90	4	445,100	396,546	;	
f	Administrative expenses	26 644 442		22.160.04	-	10.700.012	15 220 002	12.422	
g	End of year balance	26,614,112		22,168,84		19,788,812	15,239,993	12,423,	,622
2	Provide the estimated percentage of the cur	•	e (line	1g, colu	mn (a)) l	held as			
а	Board designated or quasi-endowment	87 270 %							
b	Permanent endowment ► 11 690 %								
C	Temporarily restricted endowment > 10 The percentages in lines 2a, 2b, and 2c sho	040 % uld equal 100%							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation th	nat are he	ld and a	dministered	for the		_
	organization by						_	Yes No	_
	(i) unrelated organizations							a(i) No n(ii) No	_
b	(ii) related organizations				?			3b 1	_
4	Describe in Part XIII the intended uses of t							<u>,, </u>	-
Pai	t VI Land, Buildings, and Equipme		he or	ganızatı	on ansv	wered 'Yes'	to Form 990, P	art IV, line	
	11a. See Form 990, Part X, line Description of property	10.		(a) Cost		(b)Cost or otl			lue
				,		·			
	Land		•			961,9		961,	
	Buildings		•			2,229,7			
	Leasehold improvements		•			1 126 9	<u> </u>	- 	
	Equipment		•			1,126,8 1,239,	· ·		
	I. Add lines 1a through 1e (Column (d) must a	egual Form 990. Part)	·	nn (B) Iin	e 10(c))			4,158,	
			., 50/4//	(5), 1111	(-/-/			D (Form 990) 2	

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. Complete if the organization (a) Desc		O, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line . Part X Other Liabilities. Complete if the org		
Form 990, Part X, line 25.	anization answered tes t	.o FORM 990, Part IV, line The Or Thi. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	107.131	
DEFERRED RENT AND LEASE INCENTIVES ANNUITIES PAYABLE	187,421 84,431	
DEFINED COMPENSATION LIABILITY	162,268	
	1	
Total. (Column (b) must equal Form 990, Part X. col (B) line 25)	434 120	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	434,120	

Part		evenue per Audited Financial Statements With Revenue pe vered 'Yes' to Form 990, Part IV, line 12a.	r Re	eturn Complete if
1		r support per audited financial statements	1	
2	A mounts included on line 1 bu	it not on Form 990, Part VIII, line 12		
a	Net unrealized gains on invest	ments 2a		
b	Donated services and use of f	acılıtıes		
c	Recoveries of prior year grant	s 2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d .		2e	
3	Subtract line $\bf 2e$ from line $\bf 1$.		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5		d 4c. (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expenses p swered 'Yes' to Form 990, Part IV, line 12a.	oer	Return. Complete
1		r audited financial statements	1	
2		t not on Form 990, Part IX, line 25		
а		acilities		
b				
С	· · · · ·			
d				
e			2e	
3			3	
4		0, Part IX, line 25, but not on line 1:		
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4 c	
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental Int	ormation		
Part \		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to p	rovid	le any additional
	Return Reference	Explanation		
	X, LINE 2	THE BOARD OF TRUSTEES HAS ADOPTED A SPENDING POLICY TO USE PERCENT OF THE BEGINNING INVESTED MARKET VALUE OF THE BOARD OWMENT IN CURRENT YEAR OPERATIONS, OR A LOWER AMOUNT AWF'S ANNUAL BUDGETING PROCESS THIS SPENDING POLICY TAKE BOARD OF TRUSTEE'S POLICY TO ADD UNRESTRICTED LEGACY GIFT DESIGNATED ENDOWMENT AWF GENERALLY EXPECTS UNRESTRICTED MEET OR EXCEED THE REQUIRED ANNUAL SPENDING PAYOUT FROM RESTRICTED ENDOWMENT, RESULTING IN NET POSITIVE CASH FLOW ANNUAL BASIS COUPLED WITH AWF'S STATED RETURN OBJECTIVE, DESIGNATED ENDOWMENT FUND IS EXPECTED TO ACHIEVE REAL GINFLATION OVER THE LONG-RUN	ARD- FASINGS TO EDL THE WST THE ROW	-DESIGNATED AGREED THROUGH NTO ACCOUNT THE D THE BOARD- EGACY GIFTS TO E BOARD- TO THE FUND ON AN E BOARD- TH NET OF
	··,·· -	JUNE 30, 2014 AND DETERMINED THAT THERE WERE NO MATTERS TO RECOGNITION OR DISCLOSURE IN THESE CONSOLIDATED FINANCI WHICH MAY HAVE AN EFFECT ON THE TAX-EXEMPT STATUS OF AWE	HAT ALS	WOULD REQUIRE STATEMENTS OR

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493036012105

OMB No 1545-0047

2013

20

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.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	e of the organization				Employer idei	ntification number					
	can wildlife foundation i rt I General Informatio		os Outsido t	ha United States C	52-0781390						
Ра	"Yes" to Form 990, Pa			ne omteu states. C	omplete il the organ	ization answered					
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?										
2	For grantmakers. Describe in assistance outside the United		rganızatıon's p	procedures for monitor	ing the use of its gra	nts and other					
3	Activites per Region (The follow	ving Part I, line	3 table can be o	luplicated if additional sp	ace 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 program service, describe specific type of service(s) in region						
(1)	SUB-SAHARAN AFRICA	0	139	EMPLOYEES		5,869,250					
(2)	SUB-SAHARAN AFRICA	0	0	GRANTMAKING		2,546,517					
(3)	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CONSERVATION PROGRAMS, EDUCATION & OUTREACH	10,929,427					
(4)	SUB-SAHARAN AFRICA	17	0	MAINTAINING OFFICES		451,724					
(5)	EUROPE (INCLUDING ICELAND & GREENLAND)	1	2	EMPLOYEES		286,701					
За	Sub-total	18	141			20,083,619					
	Total from continuation sheets to Part I	0				0					
c	Totals (add lines 3a and 3b)	18	141			20,083,619					

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
			I.	l	I		l .	

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country,	recognized a
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.	

85

3 Enter total number of other organizations or entities

-

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.											
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
(1) EDUCATION EASEMENTS	SUB-SAHARAN AFRICA	76		EFT/CHECK							
(2) COURSE ON CLIMATE CHANGE	SUB-SAHARAN AFRICA	3	5,956	EFT/CHECK							
(3) RESEARCH GRANT	SUB-SAHARAN AFRICA	1	10,364	EFT/CHECK							
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											
(15)											
(16)											
(17)											
(18)											

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)	Г	Yes	굣	Νo
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)	Γ	Yes	্ব	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)	<u> </u>	Yes	Г	Νo
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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	্য	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)	Г	Yes	F	Νo
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).	Г	Yes	ঘ	No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS IN SUCH CASES, ONLY KNOWN, VETTED ORGANIZATION S ARE CHOSEN THAT CAN DEMONSTRATE AN ABILITY TO ACCOMPLISH THE PROGRAM OBJECTIVES SUB-REC IPIENTS ARE OFTEN INCLUDED BY NAME IN GRANT PROPOSALS SUB-RECIPIENTS ARE GENERALLY PROVID ED WITH ADVANCES, AND REQUIRED TO REPORT QUARTERLY BOTH FINANCIAL AND PROGRAMMATIC REPORT S ARE REQUIRED TO BE SUBMITTED TO THE RELATED HL IMPLEMENTATION TEAMS (GENERALLY HL DIRECT OR) 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 THE GRANTS FINANCIAL MANAGER'S 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 COO PRIOR TO DISTRIBUTION

Additional Data

Software ID: Software Version:

EIN: 52-0781390

Name: AFRICAN WILDLIFE FOUNDATION INC

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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount 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	12,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	DEVELOPMENT OF PARTICIPATORY AGROFORESTRY FOR SUSTAINABLE LAND USE	12,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	HABITAT LOSS- LIVELIHOODS- AGROFORESTRY	12,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	DEVELOPMENT OF VULNERABILITY & ADAPTATION FRAMEWORK FOR DRY LAND/SAVANNA ECOSYSTEM PROCESSES AND SERVICES	10,700	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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		SUB-SAHARAN AFRICA	REPAIR AND REHABILITATION OF BOREHOLE AND WATER PUMPS	,	WIRE/EFT						
		SUB-SAHARAN AFRICA	ANTI POACHING SUPPORT	5,246	WIRE/EFT						
		SUB-SAHARAN AFRICA	DEVELOPMENT OF A STRATEGIC ENVIRONMENTAL ASSESSMENT (SEA) FOR AMBOSELI ECOSYSTEM	,	WIRE/EFT						
		SUB-SAHARAN AFRICA	DEVELOPMENT SUPPORT OF FISH PONDS	7,000	WIRE/EFT						

Form 990 Sched	orm 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		SUB-SAHARAN AFRICA	WILDLIFE MONITORING OPERATIONS, CONFLICT MEDIATION & ENTERPRISE DEVELOPMENT IN THE BURUNGE WILDLIFE MANAGEMENT AREA	27,447	WIRE/EFT					
		SUB-SAHARAN AFRICA	WILDLIFE MONITORING, ANTI-POACHING OPERATIONS AND SECURE HUNTING CONCESSION IN THE MAKAME WILDLIFE MANAGEMENT AREA(MWMA)	18,561	WIRE/EFT					
		SUB-SAHARAN AFRICA	ENHANCING WILDLIFE MONITORING AND ANTI-POACHING OPERATIONS IN THE AMBOSELI ECOSYSTEM	202,960	WIRE/EFT					
		SUB-SAHARAN AFRICA	DEVELOPMENT OF AGRI-BUSINESS	15,000	WIRE/EFT					

Form 990 Sched	ule F Part II	Grants or Enti	ities Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	DISSEMINATION OF BROODSTOCK, EDUCATION AND TRAINING IN FARMING TECHNIQUES AND ANIMAL HEALTH IN DJOLU	12,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	CONDUCT SOCIO- ECONOMIC SURVEY IN KILIMANJARO & SAMBURU TO GENERATE MONITORING INDICATORS FOR THESE LANDSCAPES	·	WIRE/EFT			
		SUB-SAHARAN AFRICA	ENHANCING LIVELIHOOD THROUGH MOBILIZATION, FORMATION AND TRAINING OF VILLAGE COMMUNITY BANKS (VICOBA)	11,296	WIRE/EFT			
		SUB-SAHARAN AFRICA	ELEPHANT ANTI- POACHING OPERATIONS AND SUPPORT	22,667	WIRE/EFT			

Form 990 Schedu	ale F Part II	Grants or Entit	ties Outside The Unit	Ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	DEVELOPMENT OF FISH PONDS	7,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	ENGINEERING DESIGN FOR INFRASTRUCTURE AND CARRYING CAPACITY	18,842	WIRE/EFT			
		SUB-SAHARAN AFRICA	COUNTER- POACHING WORK OF WILDLIFE RESERVE RANGERS IN FARO NP	9,533	WIRE/EFT			
		SUB-SAHARAN AFRICA	COMMUNITY BASED TOURISM ENTERPRISE SUPPORT	14,666	WIRE/EFT			

Form 990 Schedi	∡le F Part II	, - Grants or Entit [®]	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	COMMUNITY HEALTH CENTER CONSTRUCTION	22,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	ANTI-POACHING AWARENESS FOR RHINO HORN IN ASIA (SINGAPORE)	40,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	FISHERIES DEVELOPMENT IN THE LANDSCAPE MLW	24,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	MANYARA RANCH ANTI-POACHING AND SECURITY	124,242	WIRE/EFT			

Form 990 Sched	Jule F Part I7	1 - Grants or Enti	ities Outside The United	d States		_		· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	PROTECTING MOUNTAIN GORILLAS AND THEIR HABITAT THROUGH CONSTRUCTION OF 20 HOUSEHOLD RAINWATER HARVESTING TANKS IN NYABIHU DISTRICT/RWANDA		WIRE/EFT			
		SUB-SAHARAN AFRICA	AGRICULTURAL IMPROVEMENT IN CONGO	49,684	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUPPORT KOLO HILLS FOREST PATROLS PLAN AND OPERATIONALIZATION	·	WIRE/EFT			
		SUB-SAHARAN AFRICA	ASSIST MERU DISTRICT PLANNING OFFICE DEVELOP LAND USE PLANS FOR NEIGHBOURING VILLAGES	5,196	WIRE/EFT			

Form 990 Schec	Jule F Part IJ	Grants or Ent'	tities Outside The Unite	.ed States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ENVIRONMENTAL LAW SUPPORT	75,122	WIRE/EFT			
		SUB-SAHARAN AFRICA	MULTIDISCIPLINARY APPROACH TO PROTECT ELEPHANTS IN THE MAKGADIGADI REGION OF BOTSWANA	52,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUPPORTING THE DEVELOPMENT AND USE OF PROPERTY RIGHTS-BASED MECHANISMS SUCH AS CONSERVATION LEASES, ENVIRONMENTAL EASEMENTS, CONSERVANCIES	9,816	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUPPORT TO LOITOKTOK LIVESTOCK AND AGRIBIZ TRADE FAIR	6,928	WIRE/EFT			

Form 990 Schedu	ale F Part II	- Grants or Entit	ties Outside The Unit	ted States				, , , , , , , , , , , , , , , , , , ,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	DEVELOPMENT OF A STRATEGIC FOCUS FOR THE SUPPORT OF THE CONSERVANCY MOVEMENT IN KENYA	24,706	WIRE/EFT			
		SUB-SAHARAN AFRICA	PROTECTED AREA INFRASTRUCTURE, CAPACITY BUILDING AND CONSERVATION LAND GRANT	125,289	WIRE/EFT			
		SUB-SAHARAN AFRICA	MARA REGIONAL LION RESEARCH CONSERVATION PROJECT	25,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	RHINO CONSERVATION SUPPORT - KZN	26,065	WIRE/EFT			

Form 990 Schedi	ıle F Part II	- Grants or Entit	ties Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	IMPROVE WATER SPRINGS AND WATER HARVEST ACTIVITIES	15,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	SAVE VALLEY CONSERVANCY RHINO ANTI- POACHING SUPPORT	52,250	WIRE/EFT			
		SUB-SAHARAN AFRICA	RAISING AWARENESS AND EDUCATION ON HIV/AIDS/STDS	6,120	WIRE/EFT			
		SUB-SAHARAN AFRICA	ENHANCE RADIO COMMUNICATION NETWORK TO SUPPORT PATROLS AND FACILITATE AN OUTREACH PROGRAM AMONG KEY GROUPS IN KUKU & ROMBO GROUP RANCHES UNDER THE REDD+ PROJECT	15,156	WIRE/EFT			

Form 990 Schedi	ule F Part II	Grants or Enti†	ties Outside The Unit	ted States				, , , , , , , , , , , , , , , , , , ,
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	BUILDING VIABLE NATURAL RESOURCE CONSERVATION THROUGH STRONG COMMUNITY LEADERSHIP AND GOVERNANCE	64,613	WIRE/EFT			
		SUB-SAHARAN AFRICA	COMMUNITY SUPPORT TOWARDS CONSERVATION OF WILD DOGS AND OTHER SPECIES IN KIRIMUN GROUP RANCH	13,962	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUPPORT FOR NYANGAMBE WILDLIFE PROJECT CONSERVATION OPERATIONS	9,850	WIRE/EFT			
		SUB-SAHARAN AFRICA	IMPLEMENT MARINGA LAPORI WAMBA GIS	12,335	WIRE/EFT			

Form 990 Sched	ule F Part II	- Grants or Enti	ities Outside The Unit	ited States				
(a) Name of organization	• •	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	SUPPORT TO NIOKOLO-KOBA FOR CONSERVATION OF CHIMPS AND ELEPHANTS	10,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	WILDLIFE MONITORING, ANTI-POACHING OPERATIONS IN THE RANDILEN WILDLIFE MANAGEMENT AREA (RWMA)	30,725	WIRE/EFT			
		SUB-SAHARAN AFRICA	IMPLEMENTING SUSTAINABLE NATURAL RESOURCES THROUGH AFRICAN WOMEN INVOLVEMENT	33,306	WIRE/EFT			
		SUB-SAHARAN AFRICA	PROCESSING OF NTFPS AND AGRICULTURAL PRODUCTS	13,000	WIRE/EFT			

Form 990 Schedi	ıle F Part II	Grants or Entit	ties Outside The Unit	ited States				, , , , , , , , , , , , , , , , , , ,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	BUILDING VIABLE NATURAL RESOURCE CONSERVATION THROUGH STRONG COMMUNITY LEADERSHIP AND GOVERNANCE	5,623	WIRE/EFT			
		SUB-SAHARAN AFRICA	MAKERE UNIVERSITY STUDENTS SUPPORT	9,300	WIRE/EFT			
		SUB-SAHARAN AFRICA	ENVIRONMENTAL EDUCATION PROJECT	7,600	WIRE/EFT			
		SUB-SAHARAN AFRICA	WILDLIFE MONITORING AND ANTI-POACHING OPERATIONS AT OLTIYANI CONSERVANCY	15,855	WIRE/EFT			

Form 990 Sched	ule F Part II	Grants or Enti'	ities Outside The Unit	ced States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	SUPPORTING THE WORK OF SAVE THE RHINO TRUST'S SOUTHERN TEAM IN PROTECTING NAMIBIA'S BLACK RHINO (DICEROS BICORNIS BICORNIS)	21,080	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUSTAINABLE CONSERVATION APPROACHES IN PRIORITY ECOSYSTEMS	27,793	WIRE/EFT			
		SUB-SAHARAN AFRICA	TRAINING, DEVELOPMENT AND IMPLEMENTATION OF CYBERTRACKER DRIVEN ECOLOGICAL MONITORING ANTI-POACHING	42,424	WIRE/EFT			
		SUB-SAHARAN AFRICA	WILDLIFE SCOUTS SUPPORT	9,584	WIRE/EFT			

Form 990 Sched	lule F Part II	- Grants or Enti	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GRANT TO EWASO LIONS PROJECT- PREDATOR	7,392	WIRE/EFT			
		SUB-SAHARAN AFRICA	SOIL CONSERVATION AND LAND USE PLANNING ACTIVITIES- KARATU DISTRICT	6,886	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUPPORT LIVELIHOOD GROUPS DEVELOP CONSTITUTION, LEADERS CAPACITY BUILDING, REVISE BUSINESS PLAN AND REGISTRATION	15,545	WIRE/EFT			
		SUB-SAHARAN AFRICA	DEVELOPMENT OF MICRO LIVESTOCK ENTERPRISE IN	6,120	WIRE/EFT			

BEFALE

Form 990 Schedv	ale F Part II	Grants or Entiti	ies Outside The Uni	ited States				,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	ZAMBIA WILDLIFE SCOUTS TRAINING FEES	•	WIRE/EFT			
		SUB-SAHARAN AFRICA	ECONOMIC ASSESSMENT OF LAIKIPIA NP CONSERVATION AND DEVELOPMENT	8,000	WIRE/EFT			
		SUB-SAHARAN AFRICA	CARRY OUT BIOLOGICAL ASSESSMENT IN MAKAME WMA	7,205	WIRE/EFT			
		SUB-SAHARAN AFRICA	PROMOTE TOURISM FOR COMMUNITY BENEFITS	21,019	WIRE/EFT			

Form 990 Schedi	ule F Part II	Grants or Enti'	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SUB-SAHARAN AFRICA	DEVELOPMENT OF MICRO LIVESTOCK ENTERPRISE IN BEFALE	•	WIRE/EFT			
		SUB-SAHARAN AFRICA	SUPPORT DEVELOPMENT OF STRATEGIC PLAN FOR WILDLIFE CLUBS OF KENYA 2013-2018	8,513	WIRE/EFT			
		SUB-SAHARAN AFRICA	PRODUCTION OF LEGAL MANUAL FOR WILDLIFE CRIME INTRODUCTION	5,811	WIRE/EFT			
		SUB-SAHARAN AFRICA	LEGAL AND ECONOMIC ASSESSMENT OF LAIKIPIA NP CONSERVATION AND DEVELOPMENT	46,683	WIRE/EFT			

Form 990 Schedu	orm 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)		
		AFRICA	COMMUNITY TOURISM INCOME DISTRIBUTION	'	WIRE/EFT					
			COMMUNITY GUIDES TRAINING	10,412	WIRE/EFT					
		SUB-SAHARAN AFRICA	PARTNER SUPPORT	76,177	WIRE/EFT					
			COMMUNITY FISH FARM SUPPORT	13,201	WIRE/EFT					

, Form 990 Schedu	le F Part II	- Grants or Entitie	as Outside The Un	ited States	_		_	· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		AFRICA	MANYARA RANCH SUPPORT- VEHICLES	8,855	WIRE/EFT			
		AFRICA	MANYARA RANCH SUPPORT - BUILDINGS	14,327	WIRE/EFT			
			MANYARA RANCH SUPPORT -ICT	15,437	WIRE/EFT			
		SUB-SAHARAN AFRICA	COMMUNITY LAND LEASES	69,873	WIRE/EFT			

, Form 990 Schedu	orm 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		SUB-SAHARAN AFRICA	COMMUNITY LAND LEASES	24,539	WIRE/EFT					
		SUB-SAHARAN AFRICA	COMMUNITY LAND LEASES	22,967	WIRE/EFT					
		AFRICA	MANYARA RANCH SUPPORT - SALARIES	5,785	WIRE/EFT					
		SUB-SAHARAN AFRICA	COMMUNITY LAND LEASES	16,716	WIRE/EFT					

, Form 990 Schedu	le F Part II	- Grants or Entiti	es Outside The Un	ited States	_	_	_	· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	COMMUNITY LAND LEASES	30,097	WIRE/EFT			
		SUB-SAHARAN AFRICA	MANYARA RANCH SUPPORT -INCOME DISTRIBUTION	1	WIRE/EFT			
		SUB-SAHARAN AFRICA	COMMUNITY LAND LEASES	17,090	WIRE/EFT			
		AFRICA	PARTNER SUPPORT- KIDEPO NATIONAL PARK	9,645	WIRE/EFT			

Form 990 Schedu	ale F Part II	Grants or Entiti	ies Outside The Uni	lited States				·
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			TRAINING OF EMWA SCOUTS ON ANTIPOACHING	6,922	WIRE/EFT			
		AFRICA	MANYARA RANCH SUPPORT -FUEL SUPPLIES	6,881	WIRE/EFT			
		AFRICA	COMMUNITY SCOUTS ANTIPOACHING SUPPORT	9,749	WIRE/EFT			
		AFRICA	MANYARA RANCH SUPPORT - SALARIES	22,181	WIRE/EFT			

Form 990 Schedu	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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)	
		SUB-SAHARAN AFRICA	MANYARA RANCH SUPPORT - SALARIES	8,668	WIRE/EFT				
		SUB-SAHARAN AFRICA	WILDLIFE CLUBS SPONSORSHIP	7,500	WIRE/EFT				
		SUB-SAHARAN AFRICA	COMMUNITY CARBON REVENUE TRIAL PAYMENTS TO JUHI	62,304	WIRE/EFT				
		SUB-SAHARAN AFRICA	PARTNER SUPPORT	7,922	WIRE/EFT				

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DLN: 93493036012105

OMB No 1545-0047

Inspection

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. Attach to Form 990 or Form 990-EZ. See separate instructions.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization AFRICAN WILDLIFE FOUNDATION INC

▼ Phone solicitations

Employer identification number

52-0781390

Pa	Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.							
1	Indicate whether the organization raised funds through any of the following activities Check all that apply							
а	Mail solicitations	е	굣	Solicitation of non-government grants				
b	✓ Internet and email solicitations	f	~	Solicitation of government grants				

g | Special fundraising events

▼ In-person solicitations

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?

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 ındıvıdual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
1	MANAGEMENT OF	Yes	No										
	DIRECT MAIL		No	1,842,214	362,082	1,480,132							
NEW YORK, NY 10036													
2													
3													
4													
5													
6													
7													
8													
9													
10													
Total		1,842,214	362,082	1,480,132									

List all states in which the organization is registered or licensed to solicit contributions 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

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu						
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))			
als.			(event type)	(event type)	(total number)				
Revenue	1	Gross receipts							
έVe	2	Less Contributions							
<u>~</u>	3	Gross income (line 1 minus line 2)							
	4	Cash prizes							
m	5	Noncash prizes							
Expenses	6	Rent/facility costs							
ă	7	Food and beverages .							
Dreat -	8	Entertainment							
출	9	Other direct expenses .							
	10	Direct expense summary Add line	es 4 through 9 ın colum	n (d)		()			
	11	Net income summary Subtract lir	ne 10 from line 3, colum	n (d)					
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than			
Φ		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add			
Revenue				bingo/progressive bingo		col (a) through col (c))			
<u>~</u>	1	Gross revenue							
Ses	2	Cash prizes							
Expenses	3	Non-cash prizes							
	4	Rent/facility costs							
Direct	5	Other direct expenses							
	6	Volunteer labor	☐ Yes % ☐ No		┌ Yes				
	7	Direct expense summary Add lines	3 2 through 5 in column	(d)					
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)					
9	Ent	er the state(s) in which the organiza	ition operates gaming a	ctivities					
a Is the organization licensed to operate gaming activities in each of these states?									
b	If"	No," explain							
10a b		re any of the organization's gaming l Yes," explain				· · 「Yes 「No			

Does	s the organization operate gaming activiti	ues with nonmembers?		┏.	. F.,
12	Is the organization a grantor, beneficiar				es i no
	formed to administer charitable gaming			•	Г., Г.,
13	Indicate the percentage of gaming activ				I Yes I No
a	The organization's facility			13a	%
a b	An outside facility				
14	Enter the name and address of the pers				
	Enter the name and address of the pers	on mio prepares the o	rgamzation o gammig, opecial circuito i	Jooks and records	
	Name 🟲				
	Address 🏲				
15a	Does the organization have a contract v			=	
	revenue?				l Yes I No
Ь	If "Yes," enter the amount of gaming re			and the	
	amount of gaming revenue retained by t				
С	If "Yes," enter name and address of the	third party			
	Name 🟲				
	Address ▶				
16	Gaming manager information				
	Name ▶				
	Gaming manager compensation 🟲 \$				
	Description of services provided 🕨				
		– Employee	_		
17	Mandatory distributions	⊏mpioyee	Independent contracto	Γ	
17 a	Is the organization required under state	law to make charitah	le distributions from the gaming proce	eds to	
u	retain the state gaming license?				Γ _{Yes} Γ _{No}
ь	Enter the amount of distributions requir				I Yes I No
	in the organization's own exempt activit		·	3 or spene	
Pa	rt IV Supplemental Informatio	n. Provide the expl b, 15c, 16, and 17b	lanations required by Part I, line , as applicable. Also complete th		
	Return Reference		Explanation		
			· · · · · · · · · · · · · · · · · · ·		

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

AFRICAN WILDLIFE FOUNDATION INC

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

DLN: 93493036012105

Open to Public
Inspection

Employer identification number

52-0781390

Part I General Inform	nation on Grants	and Assistance				'	
 Does the organization ma the selection criteria used Describe in Part IV the or 	d to award the grants (orassistance [?]			=	· · · · · · · · · · · · · · · · · · ·	∀ Yes ⊢
		Governments and recipient that receive					l "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount 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 4101 CHESAPEAKE BOULEVARD COLLEGE PARK, MD 20742	52-6002033	501(C)(3)	69,378				SPATIAL MODELING FOR LANDSCAPE ZONING
(2) WILDAID 744 MONTGOMERY STREET SUITE 300 SAN FRANCISCO, CA 94111	20-3644441	501(C)(3)	443,283				WILDAID RHINO HORN CAMPAIGN
(3) JANE GOODALL INSTITUTE 1595 SPRING HILL ROAD VIENNA, VA 22182	94-2474731	501(C)(3)	439,678				UGANDA NATIONAL PARK CAPACITY BUILDING
(4) WILDLIFE WORKS CARBON LLC 242 REDWOOD HIGHWAY - FRONTAGE ROAD MILL VALLEY,CA 94941	26-4138826	N/A	175,128				WILDAID RHINO HORN CAMPAIGN
2 Enter total number of sec	tion 501(c)(3) and go	vernment organizations l	isted in the line 1 table	·			3

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

Schedule I	(Form 990) 2013	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, lin	ie 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Informa	tion Provide the inf	ormation required in Pa	rt I line 2 Part III col	umn (h) and any other a	dditional information

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

Return Reference	Explanation
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 LANDSCAPE IMPLEMENTATION TEAMS (GENERALLY LANDSCAPE DIRECTOR) THE FIELD
	FINANCE AND ADMINISTRATION OFFICER REVIEWS SUB-RECIPIENT FINANCIAL REPORTS AND FORWARDS THEM TO THE GRANT
	FINANCIAL MANAGER FOR A FURTHER QUALITY CONTROL ONLY UPON THE GRANTS FINANCIAL MANAGER'S 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 COO BEFORE DISTRIBUTION

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OMB No 1545-0047

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, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization AFRICAN WILDLIFE FOUNDATION INC **Employer identification number**

52-0781390

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	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			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
b	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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
		<u> </u>		
3	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			
	▼ Compensation committee			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	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	ו		
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	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			
а	The organization?	5a		No
ь	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	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			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	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	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	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	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
			(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
(1)PATRICK BERGIN CHIEF EXECUTIVE OFFICER	(i) (ii)	249,536 0	0	0	42,454	18,995	310,985	0
(2)JEFF CHRISFIELD CHIEF OPERATING OFFICER	(i) (ii)	178,954 0	0	0	17,895	13,584	210,433	0
(3)CRAIG SHOLLEY VP OF PHILANTHROPY/MARKETING	(i) (ii)	170,568	0	0	17,057	10,939	198,564	0 0
(4)DAUDI SUMBA VP OF PROGRAM DESIGN AND GOVERNMENT	(i) (ii)	167,190 0	0	0	16,719	4,968	188,877	0
(5)KATHLEEN FITZGERALD VP OF CONSERVATION STRATEGY	(i) (ii)	138,448 0	0	0	13,845	30,696	182,989	0
(6)KADDU SEBUNYA CHIEF OF PARTY- USAID UGANDA PROGRAM	(i) (ii)	135,396 0	0	0	13,540	44,852	193,788	0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2013

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DLN: 93493036012105

OMB No 1545-0047

SCHEDULE M

Noncash Contributions

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

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

AFRICAN WILDLIFE FOUNDATION INC. 52-0781390 Part I Types of Property (b) (d) (a) (c) Noncash contribution Check Number of contributions Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII. line 1 g 1 Art—Works of art . . . 2 Art—Historical treasures **3** Art—Fractional interests . 4 Books and publications Clothing and household Cars and other vehicles . . Х 18,708 FAIR MARKET VALUE Boats and planes Intellectual property . . . 9 Securities—Publicly traded . Χ 1,484,096 FAIR MARKET VALUE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . . 13 Oualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . . 15 Real estate—Residential . 16 Real estate—Commercial . . 17 Real estate—Other . . . 18 Collectibles **19** Food inventory . . . Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts 23 Scientific specimens . . 24 Archeological artifacts . . . 25 Other ▶ (Χ 61,645 FAIR MARKET VALUE SOFTWARE) **26** Other ►(Other►(_ 27 **28** Other ► (Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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 Νo **b** If "Yes," describe the arrangement in Part II 3<u>1</u>_ Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Νo 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

Part II Supplem

Supplemental Information. 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.

Return Reference

Explanation

Schedule M (Form 990) (2013)

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(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493036012105

OMB No 1545-0047

2013

Open to Public Inspection

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization AFRICAN WILDLIFE FOUNDATION INC 52-0781390

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	DATA AND INFORMATION FOR THE FEDERAL FORM 990 ARE COMPILED BY THE FINANCE DEPARTMENT AND REVIEWED BY THE DIRECTOR OF FINANCE UPON RECEIPT OF THE FEDERAL FORM 990 FROM AWF TAX ACCOUNTANTS, THE COMPLETED RETURN UNDERGOES A SECOND LEVEL OF REVIEW BY THE COO CHANGES ARE COMMUNICATED TO THE TAX ACCOUNTANTS AS NECESSARY AND APPROPRIATE THE FINAL DRAFT IS REVIEWED BY THE COO 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.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, 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 OPERATING OFFICER OR DIRECTOR OF FINANCE 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 COO FOR REVIEW.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, 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 AWE'S CHIEF EXECUTIVE OFFICER, AND PROVIDES GUIDELINES FOR THE CEO TO SET OTHER EXECUTIVE SALARIES

Return Reference	Explanation
	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

Return	Explanation	
Reference	FORMACC	AVAIL CONTINUITO TO PIONITED THE HOE OF CONTINUES CONTINUES TO THE PROPERTY OF
	FORM 990, PART III, LINE 4A	AWF CONTINUES TO PIONEER THE USE OF COMMUNITY CONSERVATION ENTERFRISS. PROVIDE CRITICAL A SSSTANCE TO NATIONAL PARKS AND RESERVES, AND PROMOTE INTERNATIONAL COOPERATION TO PROTECT IMPORTANT SITES AND POPILATIONS THAT STRETCH ACROSS NATIONAL BOUNDARIES. DEMONSTRATING THAT WILDLER AND PEOPILATIONS THAT STRETCH ACROSS NATIONAL BOUNDARIES. CATEGORIZED NTO FOUR CO RE AREAS LAND AND HABITAT CONSERVATION, WILDLIFE PROTECTION, PEOPLE BYTEPPRASE PEOPLE EDUCATION AWF IS ALSO ACTIVE IN CLIMATE CHANGE ACTIVITIES AND IN POLICY DISCUSSIONS BELO WIS A BRED DESCRETION OF A WFS PERSHEDTIVE ON EACH CATEGORY AND KEY ACHEVEBRITS WITHIN THE LAST FISCAL YEAR A LAND AND HABITAT CONSERVATION AWFS UNQUE LARGE-LANDSCAPE APPROACH TO CONSERVATION FOUR STATEMENT ON PROVIDER AND AND HABITAT CONSERVATION AWFS UNQUE LARGE-LANDSCAPE APPROACH TO CALL YEAR A LAND AND HABITAT CONSERVATION AWFS UNQUE LARGE LANDSCAPE APPROACH TO CONSERVATION FOUR STATEMENT ON PROVIDER AND AND HABITAT CONSERVANCIES OF THE WILDLER HIS TORICALLY, AWF WORKED TO ESTABLISH COMMUNITY LANDS. WHICH CAN BE SECURED AS A HOME FOR TWILDLER HIS TORICALLY, AWF WORKED TO ESTABLISH COMMUNITY CONSERVANCIES AWF IS NOW SUPPORTING THE MANAGEMENT OF PARKS AND EXCLUSIVE STABLISH COMMUNITY CONSERVANCIES AWF IS NOW SUPPORTING THE MANAGEMENT OF PARKS AND DESCRIPTION AND THE PROTECT CHICALLY WILDLER HIS TORICAL WILDLER HABITAT I LAW TOOK OVER MANAGEMENT OF ITS ELACS-BYTATION LEASES, TO PROTECT CHICALL WILDLER HABITAT I LAW TOOK OVER MANAGEMENT OF ITS ELACS-BYTATION LEASES, TO PROTECT CHICALL WILDLER HABITAT I LAW TOOK OVER MANAGEMENT OF ITS ELACS-BYTATION LEASES, TO PROTECT CHICALL WILDLER HABITAT I LAW TOOK OVER MANAGEMENT OF ITS ELACS-BYTATION LEASES, TO PROTECT CHICAL WILDLER HABITAT I AWF TOOK OVER MANAGEMENT OF ITS HARDS HAMPAGE MANAGE PROTECT OF ITS ELACS-BYTATION LEASES, TO PROTECT CHICAL WILDLER HABITAT I AWF TOOK OVER MANAGEMENT OF ITS HARDS HAMPAGE MANAGE PROTECT ON THE ACREEMENT OF THE ACREEMENT OF THE PARKS HAMPAGE AND THE ACREEMENT OF THE ACREEMENT OF THE ACREEMENT OF THE ACRE

Return Reference	Explanation	
	FORM 990, PART III, LINE 4A	OPLE TO HELP CONSERVE NATURAL SYSTEMS OVER THE PAST SEVERAL YEARS, AWF HAS WORKED WITH PR IVATE SECTOR PARTINERS TO CREATE CUTTING-EDGE EXAMPLES OF CONSERVATION TOURISM PRODUCTS THA TINCLUDE GOUITY HOLDINGS AND OTHER INCENTIVES FOR LOCAL FEORE 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 IN THE CONSOL LANDSCARE, AWFS CONGO SHIPPING PROJECT HAS BEEN MAKING BARGE TRIPS BETWEEN THE DISTANT EQUATEUR PROVINCE AND KINSHASA, DEMOCRATIC REPUBLIC OF CONGO FARMERS PAY A NOMINAL FEET OSHIP THEIR CROPS AND CHIER GOODS VIA THE BARGE TO URBAN MARKETS, WHERE PRICES AND SALES OPPORTUNITIES ARE GREATER THE LATEST TRIP, WHICH JUST CONCLUDED, TRANSPORTED 650 TONS OF CROPS FROM THE REMOTE PROVINCE INTO KINSHASA II AF TER SEVERAL YEARS OF OFFERATING AN ENTERPRISE PROGRAM AS PART OF OUR CONSERVATION EFFORTS, AWF A FEW MONTHS AGO BEGAN WORKING WITH A CONSULTANT TO DETERMINE WHAT THE CONSERVATION AND SOCIOECONOMIC IMPACTS HAVE BEEN OF THESE ENTERPRISES AND TO ENSURE THAT OUR CONSERVATION EFFORTS HAVE BEEN OF THESE ENTERPRISES AND TO ENSURE THAT OUR CONSERVATION EFFORTS HAVE BEEN OF THESE ENTERPRISES AND TO ENSURE THAT OUR CONSERVATION EFFORTS HAVE BEEN OF THE SE ENTERPRISES AND TO ENSURE THAT OUR CONSERVATION EFFORTS HAVE BEEN OF THE SE ENTERPRISES AND TO ENSURE THAT OUR CONSERVATION EFFORTS HAVE BEEN OF THE SE ENTERPRISES AND TO ENSURE THAT OUR CONSERVATION EFFORTS WAS FOUNDED ON THE BELIEF THAT CONSERVATION EFFORTS MUST ULTIMATELY REST IN THE HANDS OF THE PEOPLE BOT SHOWN AND SABYINYO SILVERBACK LODGE IN RWANDA D PEOPLE EDUCATION AWF WAS FOUNDED ON THE BELIEF THAT CONSERVATIONAL DEFORTS MUST ULTIMATELY REST IN THE HANDS OF THE PEOPLE OF A FRICA WHO, WITH EDUCATIONAL SUPPORT, WILL CONSTRUCT A VIABLE PLATFORM TO CONSERVE THE CONTINUENTS WILLDIFF HERITAGE OVER THE PAST DECADES, AWF HAS SPONSORED HUNDREDS OF YOUNG AFRICAN CONSERVATION AND FOUNDED TO ADMI

Return Reference	Explanation
FORM 990, PART III, LINE 4A	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 I AWF CONDUCTED A BIODIVERSITY ASSESSMENT OF ITS REDD PROJECT IN TANZANIA. THE 10-DAY ASSESSMENT, WHICH INCLUDED PARTICIPATION FROM LOCAL FOREST SCOUTS, IS PART OF AWF'S EFFORTS TO OBTAIN REDD+VALIDATION OF THE KOLO HILLS FORESTS IN TANZANIA, WHICH WOULD THEN ALLOW COMMUNITIES TO MAKE AN INCOME FROM CARBON SALES AWF IS ALSO WORKING ON REDD PROJECTS IN KENYA AND THE DEMOCRATIC REPUBLIC OF CONGO, AND HAS DONE SOME CLIMATE CHANGE RELATED ASSESSMENTS OF HERBIVORE MOVEMENT IN NORTHERN TANZANIA 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 IN PARTICULAR, AWF CEO PATRICK BERGIN IN 2013 WAS APPOINTED BY THE U S DEPARTMENT OF THE INTERIOR TO THE ADVISORY COUNCIL FOR WILDLIFE TRAFFICKING, WHICH MET A NUMBER OF TIMES THIS PAST YEAR AND PROPOSED WAYS TO IMPLEMENT THE UNITED STATES' NATIONAL STRATEGY FOR COMBATING WILDLIFE TRAFFICKING III AWF IS WORKING WITH THE ASPEN INSTITUTE TO CONDUCT A SERIES OF WORKSHOPS AMONGST TRACK II AFRICAN AND CHINESE BUSINESS EXECUTIVES THE CHINA-AFRICA DIALOG WILL CULMINATE IN A JOINT WORKSHOP NEXT YEAR AMONGST BOTH THE AFRICAN AND CHINESE PARTICIPANTS TO EXCHANGE IDEAS OF HOW

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(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

AFRICAN WILDLIFE FOUNDATION INC

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493036012105OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

52-0781390

		1.054						
Part I Identification of Disregarded Entities Complete			n Form 990, Pa					
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Dii	(f) rect controlling entity		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ntions Complete If tax year.	the organization ai	nswered "Yes"	on Form 990, P	art IV, l	ıne 34 because ı	t had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	ction (e) Public charity (if section 501	status (c)(3))	(f) Direct controlling entity	Section (13) co	g) n 512(lontrolle tity?
							Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	1	Cat No 501	35Y			Schedule R (For	m 990) 2	013

enedate it (1 omi 330 / 2013														raye	
Part III Identification of Related Or because it had one or more rel							ation a	nswered "Ye	es" on	Form	990, Part	IV, lı	ne 34	4	
(a) Name, address, and EIN o related organization	f	(b) (c) (d) Primary activity Legal domicile controlling (state or foreign country)		Predom income(i unrela excluded tax ui sections	(e) (f) Predominant income(related, excluded from tax under sections 512-			(h) Disproprtional allocations?		(i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	x managing partner?		ı ownershi		
					514	1)			Yes	No	1	Yes	No		
												<u> </u>	\sqcup		
					-				-	-		+	\vdash		
					-							+			
												 			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domici (state or fo country	e oreign		(d) controlling entity	Type of (C corp	e) of entity , S corp, rust)	(f) Share of total Income	Share	(g) of end-o year assets	of- Percer owner	ntage		(i) Section (b)(1 control entity Yes	512 3) lled /?
1) AWC LIMITED	PROVISION OF CAPITAL	MP		AFRICA	N WILDLIFE	С		80,000		472,1	51 100 00	00 %		Yes	No
./O AXIS FIDUCIARY 18N RERE FELIX ORT LOUIS, PORT LOUIS IP	FOR CONSERVATION ENTERPRISES			FOUND	ATION			·		ŕ					
2) AWC CB1 LIMITED	PROVISION OF CAPITAL	MP		AWC L	IMITED	С		380,730		2,887,6	78 100 00	00 %	١,	Yes	
C/O AXIS FIDUCIARY 18N FRERE FELIX FORT LOUIS, PORT LOUIS MP	FOR CONSERVATION ENTERPRISES														
3) AWC CB2 LIMITED	PROVISION OF CAPITAL	MP		AWC L	MITED	С		75,397		1,955,1	20 100 00	00 %	,	Yes	
C/O AXIS FIDUCIARY 18N PRERE FELIX PORT LOUIS, PORT LOUIS PP	FOR CONSERVATION ENTERPRISES														
													_		

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				[Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations l	sted in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes	
b Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1 d	Yes	
e Loans or loan guarantees by related organization(s)				1e	Yes	
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
• Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1p		No
q Reimbursement paid by related organization(s) for expenses				1q		No
r Other transfer of cash or property to related organization(s)				1r	Yes	
s Other transfer of cash or property from related organization(s)				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 c	overed relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	unt ın	volved	
ee Additional Data Table						

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
									_		1	1	
			I		1				_	1			

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 52-0781390

Name: AFRICAN WILDLIFE FOUNDATION INC

Form 990, Schedule R, Part V - Transactions With Related Organizations

Form 990, Schedule R, Part V - Transactions with Related Organizations					
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved		
AWC LIMITED	А	128,309	FMV		
AWC CB1 LIMITED	А	227,125	FMV		
AWC CB1 LIMITED	D	2,990,840	FMV		
AWC CB1 LIMITED	E	3,000,000	FMV		
AWC CB2 LIMITED	А	75,397	FMV		
AWC CB2 LIMITED	D	2,000,000	FMV		
AWC CB2 LIMITED	Е	2,325,000	FMV		

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TY 2013 Investment in Subsidiaries Statement

Name: AFRICAN WILDLIFE FOUNDATION INC

Description	Beginning Amount	Ending Amount
INVESTMENT IN SUBSIDIARIES	-522,788	-785,260

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TY 2013 Itemized Other Current Liabilities Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Corporation Name	Corporation EIN	Description	Beginning Amount	Ending Amount
AWC CB1 LIMITED	000000000	OTHER PAYABLES	3,000,000	3,000,000

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TY 2013 Itemized Other Current Liabilities Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Corporation Name	Corporation EIN	Description	Beginning Amount	Ending Amount	
AWC CB2 LIMITED	000000000	OTHER PAYABLES		2,325,000	

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TY 2013 Itemized Other Current Assets Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
AWC CB2 LIMITED	00000000	PREPAID EXPENSES	2,678	150
AWC CB2 LIMITED	000000000	OTHER RECEIVABLES	0	1,544,857

TY 2013 Itemized Other Current Assets Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
AWC LIMITED	00000000	PREPAID EXPENSES	4,525	4,525

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TY 2013 Itemized Other Current Assets Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
AWC CB1 LIMITED	00000000	PREPAID EXPENSES	4,526	21,899
AWC CB1 LIMITED	000000000	OTHER RECEIVABLES	2,107,676	2,617,851

TY 2013 Other Deductions Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
MANAGEMENT FEES	3,430,854	117,495
ADMINISTRATION FEES	369,614	12,658
OTHER FEES	257,976	8,835
TRAVEL	484,631	16,597
SUPPLIES	0	0
PRINTING	5,287	181
POSTAGE & DELIVERY	0	0
COMMUNICATIONS	98,556	3,375
ADVERTISING	0	0
LEGAL FEES	39,887	1,366
PROFESSIONAL FEES	19,315	661
AUDIT EXPENSE	58,765	2,013

TY 2013 Other Deductions Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
LOSS ON AMORTIZATION OF LOAN REC.	2,208,600	75,637
PROFESSIONAL FEES	1,884,656	64,543
ADMINISTRATION FEES	1,461,081	50,037
EXCHANGE RATE FLUCTUATIONS	-2,654,806	-90,918

TY 2013 Other Deductions Schedule

Name: AFRICAN WILDLIFE FOUNDATION INC

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
LEGAL FEES	241,776	8,280
AUDIT FEES	33,580	1,150
PROFESSIONAL FEES	584,000	20,000
ADMINISTRATION FEES	3,265,084	111,820

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TY 2013 Other Income Statement

Name: AFRICAN WILDLIFE FOUNDATION INC

Description	Foreign Amount	Amount
MANAGEMENT FEES	2,336,000	80,000
EQUITY IN SUBSIDIARY	-22,929,592	-785,260