Form	9	9	0
Departm	nent o	fthe	Treasury

## **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.

OMB No. 1545-0047 6 Q Open to Public

Inter	nal Reve	enue Service	Э	Information about Form 990 and its instructions is at www.ir.	s.gov/fo	rm990.		Ir	nspect	ion
AF	or th	e 2019	caler	ndar year, or tax year beginning 07/01, 2019, and ending	g		06	5/30 <b>,2</b>	<b>0</b> 20	
		6	Nam	e of organization		Employer id	entifi	cation nun	nber	
Bo	Check if ap	oplicable:	WOI	RLD WILDLIFE FUND INC						
	Addre		Doind	g Business As		52-1693	338	7		
		change		ber and street (or P.O. box if mail is not delivered to street address) Room/suite	E	Telephone n				
	-	return	125	50 24TH ST, NW		(202) 29	3-4	4800		
	Termi			or town, state or province, country, and ZIP or foreign postal code		( - , -				
	Amen	ded		SHINGTON, DC 20037		Gross receip	ots \$	367	.538	,024.
		cation F		e and address of principal officer: CARTER ROBERTS		I(a) Is this a gro			Yes	XN
	pendi	ng		50 24TH ST, NW, WASHINGTON, DC 20037		subordinates	s?		Yes	
-	Tax-ov	empt stati		X $501(c)(3)$ $501(c)()$ $4947(a)(1)$ or $527$		. ,		st. (see instru	-	
<u>-</u>				WORLDWILDLIFE.ORG					000110)	
J V						<b>I(c)</b> Group exem n: 1960 <b>M</b>				: DE
					formation	n: 1900   M	State	of legal do	micile:	
P	art I	Sum			~					
		Briefly of	lescri	be the organization's mission or most significant activities: <u>SEE</u> SCHEDULE (						
S										
Activities & Governance										
ver	2	Check t		· · · · ·			s.			
õ	3	Number	of vo	oting members of the governing body (Part VI, line 1a)			3	ļ		23.
ა ა	4	Number	of in	dependent voting members of the governing body (Part VI, line 1b)			4			22.
itie	5	Total nu	Imber	of individuals employed in calendar year 2019 (Part V, line 2a)			5			677.
Ę	6			of volunteers (estimate if necessary)			6			184.
Ă	7a	Total ur	relate	ed business revenue from Part VIII, column (C), line 12			7a		222	2,591
				business taxable income from Form 990-T, line 34			7b		262	2,503
						Prior Year		Cur	rent Y	′ear
	8	Contrib	utions	and grants (Part VIII, line 1h)	23	0,298,72	27.	271	,33	7,477
nue	9	Program	n serv	vice revenue (Part VIII, line 2g)		794,05				1,358
Revenue	10	Investm	ent in	rice revenue (Part VIII, line 2g) acome (Part VIII, column (A), lines 3, 4, and 7d)	1	2,546,98		8		, 7,113
Å	11			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,293,74				4,140
	12			e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,933,50				0,088
	13			imilar amounts paid (Part IX, column (A), lines 1-3)		1,513,09				1,332
					1	1,010,01	0.		1 - 2 -	0
	14			to or for members (Part IX, column (A), line 4)	0	6,628,84	•••	102	01(	9,253
Expenses	15			er compensation, employee benefits (Part IX, column (A), lines 5-10)		2,340,75				6,216
en:	16a	Profess	ional	fundraising fees (Part IX, column (A), line 11e)		2,340,7			,000	5,210
ă	b			sing expenses (Part IX, column (D), line 25) ▶40, 014, 884.	0			01	07	1 200
	17	Other e	xpens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,765,98				4,392
		Total ex	pense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,248,67				1,193
	19	Revenu	e less	s expenses. Subtract line 18 from line 12		3,684,82			-	8,895
s ol	20 21 22				•	ng of Current			d of Yea	
set	20		```	Part X, line 16)		8,462,15				D <b>,</b> 384
t As d B	21	Total lia	bilitie	s (Part X, line 26)		3,425,48				5,113
S <sup>n</sup>	22	Net ass	ets or	fund balances. Subtract line 21 from line 20.	37	5,036,67	15.	386	,025	5,271
Pa	art II	Sigr	atur	e Block						
Un	der per	nalties of	perjury	y, I declare that I have examined this return, including accompanying schedules and statem	nents, and	d to the best o	fmy	knowledge	and b	elief, it is
tru	e, corre	ect, and co	omplet	e. Declaration of preparer (other than officer) is based on all information of which preparer has	s any kno	wledge.				
Sig		🕨 si	gnatu	re of officer		Date				
He	re	M	IKE	PEJCIC _CFO						
		I <b>D</b> -		print name and title						
				eparer's name Preparer's signature Date			<b></b> T	PTIN		
Pai	d	MARC	• •		1	Check self-employ	J ''	P0187	1563	2
Pre	parer									,
Use	only	Firm's n		BDO USA, LLP				-53815		
	-	Firm's a	ddress	▶ 8401 GREENSBORO DRIVE, #800 MCLEAN, VA 22102	F	hone no.	/03	3-893-0	1000	

May the IRS discuss this return with the preparer shown above? (see instructions)	Х	Yes		No
For Paperwork Reduction Act Notice, see the separate instructions.	I	Form <b>990</b>	) (20	019)

WORLD	WILDLIFE	FUND	INC

-	m 990 (2019)	Page <b>2</b>
Pa	art III Statement of Program Service Accomplishments	V
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	X
'	SEE SCHEDULE O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
2	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program	m
5	services?	
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program serv	
	expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and the total expenses, and revenue, if any, for each program service reported.	allocations to others,
	the total expenses, and revenue, if any, for each program service reported.	
42	(Code: ) (Expenses \$ 48,075,712. including grants of \$ 33,558,482. ) (Revenue \$	0.)
4a	INTERNATIONAL COUNTRY PROGRAMS - SEE SCHEDULE O	0.)
4b	(Code: )(Expenses \$ 21,634,613. including grants of \$ 3,041,188. )(Revenue \$	o. )
	GLOBAL CONSERVATION - SEE SCHEDULE O	/
4c	(Code: )(Expenses \$ 37,131,363. including grants of \$ 9,838,442. )(Revenue \$	0.)
	PUBLIC EDUCATION - SEE SCHEDULE O	,
4d	Other program services (Describe on Schedule O.) ATTACHMENT 1	
	(Expenses \$ 99,070,269. including grants of \$ 23,683,220. ) (Revenue \$ 0. )	
4e	Total program service expenses ► 205, 911, 957.	
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Par	t IV Checklist of Required Schedules		Yes	N
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	
•	complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Σ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I.	6		Σ
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	ļ	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		Σ
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			2
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	├	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
	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,"			
u	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	114		
~	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	Х	
с	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		2
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		2
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	ļ	2
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	Σ
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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		v	
45	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X	-
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45	X	
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		-
16	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		-
.,	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		Σ
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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? If "Yes," complete Schedule J.	23	Х	
24 a	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		X
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			3.7
	If "Yes," complete Schedule L, Part I	25b		Χ
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			37
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		Х
20	persons? If "Yes," complete Schedule L, Part III	27		
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):			
-	Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a	"Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
U	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•••	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
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? If "Yes," complete Schedule R, Part I	33	Х	
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part				17
	Check if Schedule O contains a response or note to any line in this Part V	• • •	<b>V</b> -	X
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
JSA				(2019)
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Form 990 (2019)

Part V       Statements Regarding Other IRS Filings and Tax Compliance (continued)       vs       Note         2a Ener the number of employees reported on Form W-3, Transmittal of Wage and Tax       a       677         b if a teast one is reported on line 2a, did the organization file all required fedral employment tax returns?       2a       X         b if the signalization have unclaided business gross income of \$1,000 or more during the year?.       3a       X       X         b if 7ves, "nast filed a form 990-T6 the year? (7 No't file 3b, provide an explanation or Schedule O.       3b       X         b if 7ves, "nast filed a form 990-T6 the year? (7 No't file 3b, provide an explanation or schedule O.       3b       X         b if 7ves, "nast filed a form 990-T6 the year? (7 No't file 3b, provide an explanation or schedule O.       3b       X         b if 7ves, "nast filed a form 990-T6 the year? (7 No't file 3b, provide an explanation or schedule O.       3c       X         b if 7ves, "nast filed o the organization that it was or is a party to a prohibited tax schedule Transaction?       5a       X         b if 7ves," did the organization include with every solicitation and explane during the schedule O.       7c       X         c if Yes'' did the organization include with every solicitation and explane during the schedule O.       7c       X         c if Yes'' did the organization that if the schedule Transaction and explane or othexplane tachedule D.       7c	Form	990 (2019)		F	Page 5
2a       Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.       2a       67.7         bif at least one is reported on line 2a, differed the organization file all required to File (see instructions).       3a       X         bif at least one is reported on line 2a, differed form 300-T for this year?       3b       X         at At any time unrelated business gross income of \$1.000 or more signature or other subnity over, a financial account in a foreign country (such as a bark account, securities account, or other financial account)?       3b       X         bif Yess, "neit the name of the foreign outry is be around by our politice to a sheet the state of the foreign outry is be around by the organization have annual gross receipts that are normally greater than \$100,000, and did the organization naive annual gross receipts that are normally greater than \$100,000, and did the organization naive annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions and executive for which it was required to file form 88867.       6b         bif TYes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 770(c).       7d       7d         bif TYes," did the organization and years of the wase of the goods or services provided?       7d       7d         bif TYes," did the organization make a south and were of the value	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Statements, field for the calendar year ending with or within the year covered by this return. <b>(2a) (2a) (2a)</b>				Yes	No
b if at least one is reported on line 2a, did the organization file all required to <i>e-fle</i> (see instructions)       2b         X       3b       X         3b       X       3b         X       Yes, "has if field a form 990-T for this year" <i>II" No'</i> to <i>line 3b, provide an explanation on Schedule O</i> .       3b         X       X       3b       X         3b       X       3b       X         3c       X at momental during the calrend regination have an animetest in or signature or other authority over, animancia accounty over, animancia laccounty to a prohibited tax shelter transaction at any time during the tax year?       5c       X         5a       Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       5c       X         5b       D the organization norty nee and the don's of \$15 made party as a contribution and party for groots and services provided To the payo?       5c       C         7b       D d the organization acture ax-hange, or otherwis	2a				
a tracks one supported on the set of the dama 2 bit years in body and support on the dama of the part of the set		Statements, filed for the calendar year ending with or within the year covered by this return 2a 677			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b If "Yes," has it field a Form 990-T for this year? If "No" to fine 3b, provide an explanation on Schedule 0       3b       ×         4 A Lary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a other during the calendar year, did the organization have an bank account, securits account, or other financial accounts (FBAR).       4a       ×         4 A Lary time during the calendar year, did the organization have an or is a party to a prohibited tax sheller transaction at any time during the tax sheller transaction?       5b       ×         5 B Vess the organization aparty to a prohibited tax sheller transaction at any time during the tax sheller transaction?       5c       5c       5c         6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with even to tax deductible contributions or gifts were not tax deductible?       6b       ×         7 Organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7d       7d       ×         7 If "Yes," did the organization neceve a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7d       ×       7d       ×         7 If "Yes," did the organization neceve a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7d       ×       7d       ×         9 If the organization receive a paymen		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
b       1 b       1b       1b <t< th=""><td>3a</td><td>Did the organization have unrelated business gross income of \$1,000 or more during the year?</td><td>3a</td><td>Х</td><td></td></t<>	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
a financial accountly in a foreign country (such as a bank account, securities account, or other financial account);       4a       X         b If "Yes," enter the name of the foreign country b       5a       Xa       Xa         See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5b       X         5b Core the organization file Form 8886-17       6c       5c       5c         6a Does the organization include with every solicitation an express statement that such contributions?       6b       C         6f Thes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       7b       X         7 Organization stat may receive deductible contributions under section 170(c).       7b       X       7b       X         9 If "Yes," idid the organization necleve a payment in excess of 375 made party as a contribution and party for goods and services provided to the payor?       7b       X       7b       X         10 the organization service as payment in excess of 375 made party is as a contribution of enter state and the organization file form 8282?       7c       X       7c       X         10 the organization service as payment in excess of 375 made party is as a contribution of enter state aso the any is aso any istat	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		Χ
b If "Yes," enter the name of the foreign country >     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions for tilling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),     See instructions to the approx or the value of the as a party to a prohibited tax shelter transaction at any time during the tax year?	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
See instructions for Illing requirements for FICEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).       Sa       X         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.       Sa       X         5b Did any taxable party notify the organization file form 8886-17.       Sa       Sa       Sb         6a Does the organization include with every solicitation an express statement that such contributions?       Ga         7b If Yes," to line Ga or 5b, did the organization include with every solicitation an express statement that such contributions of gifts were not tax deductible?       Ga         7b Diffs were not tax deductible?       To ganization notify the donor of the value of the goods or services provided?       To X         7b Diff Yes," indicate the number of Forms 8282 field during the year.       To       X         7c Did the organization neceive any payment in excess of \$75 made partly as a contribution on partly for goods and services provided to the payor?       To       X         7b Diff Yes," indicate the number of Forms 8282 field during the year.       To       X       Ya       X         7f Diffs were organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Th       X         7f Diffs were organization neeweres bray taxes, or ther values, diffs were organization file a form 1086?       Sp       Sp         8 Diff the organization receive any funds, directly or		a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
5       Was the organization a party to a prohibited tax shelter transaction at any time during the taxy shelter transaction?       5a       ×         b       Did any taxable party notify the organization file form 886-17       5c       5c         6       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 deductibles acharitable contributions or glifts were not tax deductible?       6a       ×         7       Organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7b       ×         7       Did the organization necelve a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7d       ×         7       Did the organization necelve any under the donor of the value of the goods or services provided?       7d       ×         7       Ty'ss," indicate the number of Forms 8282 filed during the year       7d       ×       7d         7       Did the organization active any time, directly or indirectly, to pay premiums on a personal benefit contract?       7d       ×         7       Td       If the organization matching donor advised funds.       Did the organization favore any taxibile parts and the organization favore any taxibile fits builtons of a contrabution of cars, bast, airplanes, or other vehicles, dd the organization favore any taxibile fits builtons andre section 4966?	b	If "Yes," enter the name of the foreign country ►			
b Did any taxable party notify the organization that it was or is a party to a prohibite tax shelter transaction?       5b       X         b Did any taxable party notify the organization that it was or is a party to a prohibite tax shelter transaction?       5c       Sc         b Bot energinization sell exchanges       Sc       Sc       Sc       Sc       Sc         b If "Yes" to line 5a or 5b, did the organization that were not tax deductible contributions?       Sc       Sc       Sc         b If "Yes", did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Sc       Sc         7 Organizations that may receive deductible contributions under section 170(c).       Bit Horganization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       Ta       X         b If "Yes," indicate the number of Forms 8282 filed during the year.       7d       Td       Zd         c If the organization receive a apmeming door advised funds.       and score apmeming organization free/m 8283 as required?       Td         f If the organization receive a contribution of qualified indilectual property, did the organization file Form 8089 as required?       Td       Zd       Zd         f If the organization neceive a contribution of qualified indilectual property, did the organization file Form 8089 as required?       Td       Zd       Zd       Zd       Zd       Zd <td></td> <td>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</td> <td></td> <td></td> <td></td>		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
b Dr any lease party now year.       12         c If "Vest line 5a or 5b, did the organization file Form 8886-17.       5c         6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible a charitable contributions or gifts were not tax deductible?       6a         7 Organization shut any receive deductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided to the payor?       7a       X         b If "Yes," indicate the number of Forms 8282 filed during the year.       7d       7d       7a         c Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7e       X         f If "Yes," indicate the number of Forms 8282 filed during the year.       7d       7d       7d         b Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7f       X         f If the organization materia matalning donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.       10a       8         g If the organization make any taxable distributions under section 4966?       9a       9b       10b         S					
Ga       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 or gifts were not tax deductible?       6a       ×         b If "vse," did the organization includes with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       6b         7 Organizations that may receive deductible contributions under section 170(c).       Did the organization networks of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7b       ×         0 If "vse," idicate the number of Forms 8282 filed during the year       7d       7c       ×         0 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       ×         1 Did the organization (ming the year, pay premiums, directly or indirectly, to pay premiums on Berom 108-67.       7h       ×         2 Did the organization number of Forms 8282 filed during the year.       7d       7d       7d         2 Sonsoring organization maintaining door advised funds. Bit every on a personal benefit contract?       7t       ×         3 Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9a         3 Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9a       0a       0a					X
organization solicit any contributions that were not tax deductible as charitable contributions?       6a       ×         b If "Yes," did the organization include with every solicitation an express statement that such contributions of gits were not tax deductible?       6b       6b         7 Organizations that may receive adductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       ×         b If "Yes," did the organization, eceive an payment in excess of stagible personal property for which it was required to file form 82827, end, end, end, end, end, end, end, end		-	5c		
bit "%es," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? <b>7</b> Organizations that may receive deductible contributions under section 170(c). a Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? <b>7</b> Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? <b>7</b> Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <b>7</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <b>7</b> Did the organization received a contribution of qualified intellectual property, did the organization file form 1088-02. <b>7</b> Tid X <b>7</b> Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form 1088-02. <b>7</b> Tid X <b>7</b> Did the organizations maintaining <b>4 0 or 4 0 1 0 1 0 1 1 1 1 1 1 1 1 1 1</b>	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
gifts were not tax deductible?       6b         7       Organization stat may receive adputtible contributions under section 170(c).       6c         a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7c         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7d         c Did the organization receive apyment in excess of \$75 made personal property for which it was required to file Form 8282?       7d         c Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7d         f Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8282?       7g         f If the organization receive a contribution of qualified intellectual property, did the organization file Form 8280 as required?       7f         g If the organization meaked a contribution of qualified healthy laws good advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       8a         9 Sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organization make any taxable distributions under section 4966?       9a         10 Section 501(c)(7) organizations. Encled on Part VIII, line 12.       10a         11 Section 501(c)(7) organizations. Encled on Part VIII, line 12.       10b         12 Section 501(c)(7) or			6a		X
7       Organizations that may receive deductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c Did the organization set, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year.       7d       X         e Did the organization receive any funds, directly or indirectly, no a personal benefit contract?       7f       X         f If the organization received a contribution of cars, beats, airplanes, or other valueds, dif the organization face beats airplanes or other valueds, dif the organization face beats airplanes or other valueds, dif the organization maintained by the sponsoring organization make any taxable distributions under section 4966?       7n         8       Sponsoring organization make any taxable distributions under section 4966?       9a         9       Did the sponsoring organization make any taxable distribution to a donor, donor advised runds.       10a         1       10b       11a       10a         1       10c       11a       12a         1       10c       11a       12a         1       10c       11a	b				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         e Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       X         e Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7d       X         f Did the organization received a contribution of qualified Intellectual property, did the organization file Form 8898 as required?       7f       X         g If the organization received a contribution of qualified Intellectual property, did the organization file Form 8080 as required?       7n       X         g Sponsoring organizations maintaining donor advised funds.       a Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a         b Did the sponsoring organizations. Enter:       a initiation fees and capital contributions included on Part VIII, line 12.       10b       11a         11       Section 501(c)(12) organizations. Enter:       11a       10b       12a         12       Section 501(c)(12) organizations. Enter: <t< th=""><td></td><td></td><td>6b</td><td></td><td></td></t<>			6b		
and services provided to the payor?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       X         c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       X       Tc       X         f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 0890 as require?       7h       X         8 Sponsoring organization make excess business holdings at any time during the year?       8       8       9         9 Did the sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b       9b         10 Section 501(c)(7) organizations. Enter:       10a       10a       10b       11b       12a         11 Section 501(c)(12) organizations. Enter:       11a       10b       11b       12a       12a         12 Section 501(c)(12) organizations. Enter:       10b       11b       12a <t< th=""><td></td><td></td><td></td><td></td><td></td></t<>					
b If "Yes," did the organization point. b If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?. f The organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?. f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?. f The organization received a contribution of are, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?. f Did the sponsoring organization maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b Cross receipts, included on Form 990, Part VIII, line 12. f Oross income from members or shareholders. a Gross income from members or shareholders. b Gross income from mother sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 212a Section 501(c)(23) qualified nonprofit health insurance issuers. a Is the organization lice used to issue qualified health plans in more than one state? b Did the organization is locensed to issue qualified health plans in more than one state? c Enter the amount of reserves the organization the organization must report on Schedule O. b Enter the amount of reserves on hand. c Enter the amount of reserves on	а		_	v	
b       in test, under organization reality expansion of the value of the globe of tangible personal property for which it was required to file Form 8282?       if "Yes," indicate the number of Forms 8282 filed during the year       if "Yes," which it was required to file Form 8282?       if "Yes," indicate the number of Forms 8282 filed during the year       if "Yes," which it was required to file form 8282?       if "Yes," indicate the number of Forms 8282 filed during the year       if "Yes," and the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       if "Kes," and the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       if "Kes," and the organization receive any funds, directly or indirectly, on a personal benefit contract?       if "Kes," and the organization receive any funds, directly or indirectly, on a personal benefit contract?       if "Kes," and the organization receive any funds, directly or indirectly, on a personal benefit contract?       if "Kes," and the organization and the set excess business holdings at any time during the year?       if "Mesoring organization make any taxable distributions under section 4966?       if "Section 501(c)(7) organizations. Enter:       inditation fees and capital contributions included on Part VIII, line 12       if "Da       if "Da       if "Da         11       Section 501(c)(12) organizations. Enter:       if "Da       if "Da       if "Da       if "Da         12       Section 501(c)(12) organizations. Enter:       if "Da       if "Da       if "Da       if "Da         13       Section					
required to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year, pay premiums on a personal benefit contract?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization file a Form 8899 as required?       7g       7d       X         g If the organization received a contribution of axs, bach, airplanes, or other vehicles, did the organization file a Form 108e-C?       7h       X         8 Sponsoring organizations maintaining donor advised funds.       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b       9b         10 the sponsoring organizations maintaining donor advised funds.       10a       10a       10a       10b         11 Section 501(c)(7) organizations. Enter:       10a       10b       10b       10b       10a         12 Section 501(c)(12) organizations. Enter:       11b       10b       11b       12a         13 Section 501(c)(12) organizations. Enter:       11b       11b       11c       12a         14 Section 501(c)(12) organizations included on Part VIIII			() ()	~	
If Yes," indicate the number of Forms 8282 filed during the year	С		7.0		v
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7.       7h       X         7g       7n       X       7g       7n       X         7g       7h       X       7g       7h       X         8 Sponsoring organizations maintaining donor advised funds.       Did a donor advised funds.       7h       8         9 Sponsoring organizations maintaining donor advised funds.       9a       9a       9a       9b       9c       9c			70		
a bit the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?       77         g if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7.       79         a Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       71         b Did the sponsoring organization make any taxable distributions under section 4966?       9a         9 Sponsoring organizations. Enter:       10a         a Initiation fees and capital contributions. Enter:       10a         a Gross income from members or shareholders.       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).       11a         12a       11b         13a       13a         14a       13b         15 Section 501(c)(2) gualified nonprofit health insurance issuers.       13b         a Is the organization licensed to issue qualified health plans in more than one state?       13a         14a       13a         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       14a         15 Is the organization subject to the s			70		x
In the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7g         If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7n         If the organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       8         If the sponsoring organizations maintaining donor advised funds.       10a       9a         If the sponsoring organizations maintaining donor advised funds.       10a       9a         If the sponsoring organization make any taxable distributions under section 4966?       9a       9a         If the sponsoring organizations. Enter:       10a       10b       10b         If Section 501(c)(12) organizations. Enter:       10a       10b       11a         If Section 501(c)(12) organizations. Enter:       11b       10b       12a         If Section 501(c)(12) organization the transponders.       11b       12a       12a         If Yes," enter the amount of tax-exempt interest received or accrued during the year					
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088-C?.       7h         8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8         9 Sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organization make any taxable distributions under section 4966?       9a         9 Did the sponsoring organizations. Enter:       10a         10 Section 501(c)(7) organizations. Enter:       10a         a Gross income from members or shareholders.       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       12a         12 Section 501(c)(2) organizations interest received or accrued during the year       12b         13 Section 501(c)(2) qualified nonprofit health insurance issuers.       11a         14 Did the organization licensed to issue qualified health plans in more than one state?       13a         13 Section 501(c)(2) organization is required to maintain by the states in which the organization subcerves on hand.       13b         13a       13a       14a         14a Did the organization subcet or these payments? If "No," provide an explanation on Schedule O.       14a         15 Is the organization subject to the section 4960 tax on paymen					
8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9         a Did the sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10b         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       11a         b Gross income from members or shareholders.       11b       12a         b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12 Section 501(c)(29 qualified nonprofit health insurance issuers.       13a       13a         13 Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note: See the instructions for additional information the organization must report on Schedule O.       14a       X         b Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the axyear?<	-				
sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.         a Did the sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organizations make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         12       Section 501(c)(12) qualified nonprofit health insurance issuers.       11a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       12a         13       Section 501(c)(29) qualified health plans in more than one state?       13a         14       12a       13a         15       Is the organization receive any payments for indoor tanning services during the tax year?       14a       X         14       Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       14a       X         14       Did the organization subject to the section 4968 excise tax on net investment income?       15       X	-		/ 11		
9       Sponsoring organizations maintaining door advised funds.         a       Did the sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         11       Section 501(c)(12) organizations. Enter:       10a         a       Gross income from members or shareholders.       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       12a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a       13a         13a       Note: See the instructions for additional information the organization must report on Schedule O.       13a       14a       X         14       Did the organization serves on hand       13c       14a       X         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         14	0		8		
a Did the sponsoring organization make any taxable distributions under section 4966?       9a         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10b         11 Section 501(c)(12) organizations. Enter:       10a         a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter:       11a         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 501(c)(29) qualified nonprofit health insurance issuers.       11b       12a         13 Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a         b Enter the amount of reserves on hand       13b       14a         x       13c       14a         b Id the organization is licensed to issue qualified health plans       13c       14a         x       14a       14a       14b       15         b If "Yes," has it filed a	٩		-		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10a         11 Section 501(c)(12) organizations. Enter:       10a         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 501(c)(29) qualified nonprofit health insurance issuers.       11b         a Is the organization licensed to issue qualified health plans in more than one state?       12a         13a       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13b         b If "Yes," hai t filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14a         x       16 "Yes," see instructions and file Form 4720, Schedule N.         15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       15			9a		
10       Section 501(c)(7) organizations. Enter:       a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       a Gross income from members or shareholders       11a       11b       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources)       11b       12a       12b       12a         2       Section 501(c)(29) qualified nonprofit health insurance issuers.       a Is the organization licensed to issue qualified health plans in more than one state?       12b       13a         3       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a       14a         b       Frees," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14a       X         b       If "Yes," see instructions and file Form 4720, Schedule N.       15       15       15       X					
a Initiation fees and capital contributions included on Part VIII, line 12					
b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b       10b         11       Section 501(c)(12) organizations. Enter:       a         a       Gross income from members or shareholders					
11       Section 501(c)(12) organizations. Enter:         a Gross income from members or shareholders.       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         14a       Note: See the instructions for additional information the organization must report on Schedule O.       13b         14a       Did the organization is licensed to issue qualified health plans       13b         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         15       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16					
a Gross income from members or shareholders       11a       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         13 section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a         c Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         14 Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         16       X		• •			
against amounts due or received from them.)       11b       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13b       13a         c Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year?       14a       14a         14a Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       14b       15         15       X         16       X	а				
against amounts due or received from them.)       11b       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13 Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13b       13a         c Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year?       14a       14a         14a Did the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       14b       15         15       X         16       X	b	Gross income from other sources (Do not net amounts due or paid to other sources			
b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13b         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a         b       If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16					
13       Section 501(c)(29) qualified nonprofit health insurance issuers.         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         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       13b         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a         X       b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16	12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a         b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c Enter the amount of reserves on hand       13c         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a         b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
Note: See the instructions for additional information the organization must report on Schedule O.       Image: the instructions for additional information the organization must report on Schedule O.         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	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c Enter the amount of reserves on hand       13c       14a       X         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b       14b         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X       16       X	а		13a		
the organization is licensed to issue qualified health plans       13b       13b         c Enter the amount of reserves on hand       13c       13c         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b       14b         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X					
c Enter the amount of reserves on hand       13c       14a         14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       14b         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X	b				
14a Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       14b         15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see instructions and file Form 4720, Schedule N.       16       X					
<ul> <li>b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i></li></ul>			4.4.5		v
<ul> <li>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?.</li> <li>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?</li> </ul>					
excess parachute payment(s) during the year?15XIf "Yes," see instructions and file Form 4720, Schedule N.161616X			140		
If "Yes," see instructions and file Form 4720, Schedule N.         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	15		1 5		x
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X			13		21
is the organization an educational institution subject to the section 4500 excise tax on net investment income:	16		16		Х
	10	-	10		

Form **990** (2019)

Form §	990 (201	9) WORLD WILDLIFE FUND INC	52-1693	387	I	Page <b>6</b>
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through the second	ugh 7b below,	and	for a	"No"
		response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes o				tions.
		Check if Schedule O contains a response or note to any line in this Part VI				Х
Sect	ion A	. Governing Body and Management				
					Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	<b>1a</b> 23			
Ia		re 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				
	comn	nittee, explain on Schedule O.	<b>1b</b> 22			
b		the number of voting members included on line 1a, above, who are independent				
2		ny officer, director, trustee, or key employee have a family relationship or a business rela	-	2		X
	-	ther officer, director, trustee, or key employee?		2		
3		ne organization delegate control over management duties customarily performed by or uno				V
	super	vision of officers, directors, trustees, or key employees to a management company or other pe	erson?	3	3.7	X
4		e organization make any significant changes to its governing documents since the prior Form 990 was file		4	Х	
5	Did th	ne organization become aware during the year of a significant diversion of the organization's a	ssets?	5		X
6	Did th	ne organization have members or stockholders?		6		Х
7a	Did t	ne organization have members, stockholders, or other persons who had the power to ele	ct or appoint			
	one o	r more members of the governing body?		7a		Х
b	Are	any governance decisions of the organization reserved to (or subject to approval b	y) members,			
		holders, or persons other than the governing body?		7b		Х
8		he organization contemporaneously document the meetings held or written actions unde				
		ear by the following:				
а	-	overning body?		8a	Х	
b	Fach	committee with authority to act on behalf of the governing body?		8b	Х	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot b				
3		rganization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X
Sect		Policies (This Section B requests information about policies not required by the Inter			.)	
					Yes	No
10 2	Did th	ne organization have local chapters, branches, or affiliates?		10a		Х
		s," did the organization have written policies and procedures governing the activities of s				
U			-	10b		
44-		tes, and branches to ensure their operations are consistent with the organization's exempt put		11a	Х	
		e organization provided a complete copy of this Form 990 to all members of its governing body before fili	ng the form?	114		
		ribe in Schedule O the process, if any, used by the organization to review this Form 990.		12a	Х	
12a		ne organization have a written conflict of interest policy? If "No," go to line 13		12a	21	
b		officers, directors, or trustees, and key employees required to disclose annually interests the	-	4.0 %	Х	
		o conflicts?		12b	Λ	
С		he organization regularly and consistently monitor and enforce compliance with the po	-		v	
		ibe in Schedule O how this was done		12c	X	
13		ne organization have a written whistleblower policy?		13	X	
14	Did th	ne organization have a written document retention and destruction policy?		14	Х	<u> </u>
15	Did t	he process for determining compensation of the following persons include a review and	approval by			
	indep	endent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			
а	The c	rganization's CEO, Executive Director, or top management official		15a	Х	<u> </u>
b	Other	officers or key employees of the organization		15b	Х	
	lf "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did t	he organization invest in, contribute assets to, or participate in a joint venture or similar	arrangement			
	with a	a taxable entity during the year?		16a		Х
b		s," did the organization follow a written policy or procedure requiring the organization to				
		ipation in joint venture arrangements under applicable federal tax law, and take steps to				
		ization's exempt status with respect to such arrangements?		16b		
Sect		Disclosure				-
17		ne states with which a copy of this Form 990 is required to be filed ▶				
18		on 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable),		(Sec	tion 5	
10		nly) available for public inspection. Indicate how you made these available. Check all that app		(060		.51(0)
		Own website Another's website X Upon request Other ( <i>explain on Sch</i>	-			
10				finte	roct -	adiav
19		ribe on Schedule O whether (and if so, how) the organization made its governing docume	ents, connict o	i intel	est	JOIICY,
	anu fi	nancial statements available to the public during the tax year.				

20 State the name, address, and telephone number of the person who possesses the organization's books and records ► MIKE PEJCIC 1250 24TH ST, NW WASHINGTON, DC 20037 202-293-4800

Page 7

Part VII	Compensation o	of Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Cont	tractors								

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(**C**)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	Pos heck ss pe	erson	e than c is both or/trust employee	an 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 related organizations
			ee			sated				
ALCARMED DODERMO	40.00									
(1) CARTER ROBERTS	40.00			Х				1 000 165	0.	84,184.
PRESIDENT & CEO (2)MARGARET ACKERLEY	40.00	X		Λ				1,009,165.	0.	04,104.
SVP & GENERAL COUNSEL	40.00	-		Х				453,654.	0.	78 <b>,</b> 928.
(3) NIKHIL SEKHRAN	40.00			Λ				433,034.	0.	70,920.
CHIEF CONVERVATION OFFICER	40.00	-			Х			413,455.	0.	33,533.
(4) JASON CLAY	40.00				Δ			413,433.	0.	
SVP MARKETS & FOOD	0.	-				x		387,835.	0.	58,985.
(5) JULIE MILLER	40.00									
SVP DEVELOPMENT	0.	1		х				360,610.	0.	56 <b>,</b> 789.
(6) GINETTE HEMLEY	40.00									
SVP WILDLIFE CONSERVATION	0.	1				X		356,518.	0.	48,155.
(7) TERENCE MACKO	40.00							,		
SVP MARKETING AND COMM.	0.	1			Х			362,930.	0.	37,881.
(8) SHEILA BONINI	40.00									
SVP PRIVATE SECTOR ENGAGEMENT	0.	1				X		334,972.	0.	50,800.
(9) MARTHA PIPER	40.00									
CHIEF OPR OFCR PART YEAR	0.	1		Х				338,333.	0.	15 <b>,</b> 362.
(10)MIKE PEJCIC	40.00									
CHIEF FINANCIAL OFFICER	0.	1		Х				311,639.	0.	41,636.
(11) AMY GOLDEN	40.00									
VP STRATEGIC SERVICES	0.	1				Х		278,788.	0.	58,996.
(12) DAVID MCCAULEY	40.00									
SVP POLICY & GOVT AFFAIRS	0.					Х		285,622.	0.	27,559.
(13) MARCIA MARSH	40.00									
CHIEF OPR OFCR PART YEAR	0.			Х				274,169.	0.	19,614.
(14) LEROY WADE	40.00									
CONTROLLER	0.			Х				200,698.	0.	45,020.

JSA

Form 990 (2019)

(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles er and	ss pe d a d	ition more rson irect	e than c is both or/trust o エ	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
15) PAMELA MATSON	0.									
CHAIRMAN	0.	Х						0.	0.	(
16) TAMMY CROWN	0.									
VICE CHAIRMAN	0.	Х						0.	0.	(
17) ROBERT LITTERMAN	0.									
VICE CHAIRMAN	0.	Х						0.	0.	(
18) JOHN SALL	0.									
VICE CHAIRMAN	0.	X						0.	0.	
19) ROGER W. SANT	0.									
VICE CHAIRMAN	0.	X						0.	0.	(
20) ELIZABETH L. LITTLEFIELD	0.									
TREASURER	0.	X						0.	0.	(
21) NEVILLE ISDELL	0.									
SECRETARY	0.	X						0.	0.	(
22) VIRGINIA BUSCH	0.									
DIRECTOR	0.	X						0.	0.	(
23) BRENDA DAVIS	0.									
DIRECTOR	0.	X						0.	0.	(
24) RUTH DEFRIES	0.									
DIRECTOR	0.	X						0.	0.	(
25) JARED M. DIAMOND	0.									
DIRECTOR	0.	X						0.	0.	1
1b Sub-total								5,368,388.	0.	657,442
c Total from continuation sheets to Part VII, S	Section A	• • •	• •		• •			0.	0.	0
d Total (add lines 1b and 1c)	-							5,368,388.	0.	657,442
2 Total number of individuals (including but not reportable compensation from the organization	limited to t		liste	d at	ove	e) who	o re	ceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										Yes No 3 X

for services rendered to the organization? *If "Yes," complete Schedule J for such person* 

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

individual.....

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
ATTACHMENT 2		
2 Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► 29	e listed above) who received	

4

5

Х

Х

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not che unless er and	persor	e than c is both tor/trust employee	an	(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 related organizations
		ŏ	stee		nsated				
26) CHRISTOPHER B. FIELD	0.	.,							0
DIRECTOR 27) MATTHEW HARRIS	0.	X					0.	0.	0
DIRECTOR	+ <u>0.</u>	x					0.	0.	0
28) URS HOELZLE	0.						0.	0.	0
DIRECTOR	+ <u>0.</u>	x					0.	0.	0
29) YOLANDA KAKABADSE	0.	- 23					0.		0
DIRECTOR	+ <u>0.</u>	x					0.	0.	0
30) SHELLY LAZARUS	0.								
DIRECTOR	······	X					0.	0.	C
31) LAWRENCE H. LINDEN DIRECTOR	0.	x					0.	0.	O
32) STEVE LUCZO DIRECTOR	0.	x					0.	0.	C
33) SANJEEV MEHRA	0.						0.		
DIRECTOR	+ <u>0</u> .	x					0.	0.	0
34) VINCENT PEREZ DIRECTOR	0.	X					0	0.	0
35) WANG SHI	0.						0.		0
DIRECTOR	<u>0</u> .	x					0.	0.	0
36) SHARON YOUNGBLOOD	0.								
DIRECTOR	······	X					0.	0.	C
1b Sub-total	I	1			1		0.	0.	0.
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)		•••	· · ·	· · · ·	•••				
2 Total number of individuals (including but not reportable compensation from the organization	limited to t			abov	e) who	o re	ceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched									Yes No 3 X
4 For any individual listed on line 1a, is the organization and related organizations gr individual	eater than	\$15	0,00	0? I	f "Yes	s,"			<b>4</b> X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
2 Total number of independent contractors (including but not limited to thos	e listed above) who received	

more than \$100,000 in compensation from the organization **>** 

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	yee	es,	and H	lig	hest Compensat	ed Employ	ees (co	ontinue	ed)	
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average hours per week (list any hours for	box,	unles	heck ss pe	erson	e than o is both or/trust	an	Reportable compensation from	Reportab compensation related	n from	an	timated ount of other pensation	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N		fro orga and	om the anizatio d related anizatior	n J
37) LEONARDO DICAPRIO	0.	_											
NON-VOTING BOARD MEMBER	0.	X						0		0.			(
38) JETSUN PEMA WANGCHUCK NON-VOTING BOARD MEMBER	0.	X						0		0.			(
	+												
		-											
	+												
	+												
	+												
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A							0.		0.			0
2 Total number of individuals (including but not reportable compensation from the organizatio	limited to t		liste				o re	eceived more than	\$100,000 o	f			
3 Did the organization list any former offic		or. or	- tru	uste	e.	kev e	emp	lovee. or highes	t compensa	ted		Yes	No
employee on line 1a? <i>If "Yes," complete Sched</i> 4 For any individual listed on line 1a, is the	ule J for su	ch ind	lividi	ual	••					••	3		Х
organization and related organizations gr individual	eater than	\$15	50,0 • •	00?	• If	"Yes	," •	complete Schedu	le J for s	uch	4	Х	
for services rendered to the organization? If "Y						ual	5		Х				
<ol> <li>Section B. Independent Contractors</li> <li>Complete this table for your five highest com compensation from the organization. Report of year.</li> </ol>													
(A) Name and business add	dress							<b>(B)</b> Description of se	ervices	C	(C) ompens	sation	

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

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		Check if Schedule O	contains a respor	ise or note to ar	ny line in this Part V	/		
			·		(A) Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns	1a	208,965.				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues						
٥Ğ	с	Fundraising events		284,804.				
ifts Ir A	d	Related organizations						
nila,	е	Government grants (contr		45,092,285.				
Sin	f	All other contributions, gif	· · ·					
er		and similar amounts not inclu	-	225,751,423.				
ţ	g	Noncash contributions inc						
di ti	3	lines 1a-1f		4,512,559.				
an	h	Total. Add lines 1a-1f			271,337,477.			
				Business Code				
8	20	TRAVEL PROGRAMS		561520	648,458.		648,458.	
Program Service Revenue	2a	PARTNER MARKETING UBI		900099	2,900.		2,900.	
Se	b				_,			
Me S	C							
P B B B B B B B B B B B B B B B B B B B	a							
20	e							
-	t	All other program service <b>Total.</b> Add lines 2a-2f		└─── <b>─</b>	651,358.			
	g				001,000.			
	3	Investment income (inc	-		4,216,485.			4,216,485.
		other similar amounts).			-,210,403.			4,210,403.
	4 5	Income from investment	•	•	6,500,213.			6,500,213.
	5	Royalties	(i) Real	(ii) Personal	0,300,213.			0,300,213.
	•							
	6a	Gross rents 66						
	b	Less: rental expenses 61						
	C	Rental income or (loss) 6		L	100 7.7		400.363	-
	d	Net rental income or (loss)			-428,767.		-428,767.	
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets						
		other than inventory 7	<b>a</b> 78,546,715.					
Revenue	b	Less: cost or other basis						
ven		and sales expenses 71						
Re	С	Gain or (loss)	<b>c</b> 4,000,628.					
er	d	Net gain or (loss)	· · · · · · · · · · · · · · ·	<u></u> ▶	4,000,628.			4,000,628.
Other	8a	Gross income from	fundraising					
0		events (not including \$	284,804.					
		of contributions reported	ed on line					
		1c). See Part IV, line 18	<u>8a</u>	40,211.				
	b	Less: direct expenses	8b	126,207.				
	С	Net income or (loss) from	fundraising events.	<u></u> ▶	-85,996.			-85,996.
	9a	Gross income from	n gaming					
		activities. See Part IV, line	19 9a	0.				
	b	Less: direct expenses	9b	0.				
	С	Net income or (loss) from	n gaming activities .	<u></u>	0.			
	10a	Gross sales of inve	entory, less					
		returns and allowances	10a	0.				
	b	Less: cost of goods sold .	10b	0.				
	С	Net income or (loss) from	sales of inventory	<u></u>	Ο.			L
S				Business Code				
eor	11a	LIST RENTAL		900099	96,160.			96,160.
an	b	MISCELLANEOUS		900099	62,530.			62,530.
Sell	с							
Miscellaneous Revenue	d	All other revenue						
2	е	Total. Add lines 11a-11d	<u></u>	<u></u> . ►	158,690.			
	12	Total revenue. See instruc	ctions		286,350,088.		222,591.	14,790,020.

#### 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 (C) Management and (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 3,302,098. 3,302,098. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 203,764. 203,764 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 66,615,470. 66,615,470. 0 4 Benefits paid to or for members 5 Compensation of current officers, directors, 3,996,677. 1,521,455. 1,934,489. 540,733. trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 53,292,236. 71,445,725 7,909,236 10,244,253. 7 Other salaries and wages 8 Pension plan accruals and contributions (include 4,715,109. 3,270,973. 633,278 810,858. section 401(k) and 403(b) employer contributions) 2,136,599. 172,559 17,406,095. 15,096,937. 9 Other employee benefits 3,090,979. 598,430. 766,238. 4,455,647. Payroll taxes 10 11 Fees for services (nonemployees): 111,900. 111,900 a Management 1,774,103. 29,547. 1,744,556 b Legal 437,542. 37,780 399,762. c Accounting 208,100. 208,100. d Lobbying 2,866,216. 2,866,216. e Professional fundraising services. See Part IV, line 17. 2,052,867. 2,052,867 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 57,745. 18,716,571. 17,352,417. 1,306,409 (A) amount, list line 11g expenses on Schedule O.) 3,481,153. 3,012,912. 6,494,065. 12 Advertising and promotion 11,674,304. 13,493,005. 25,318,129. 150,820. 13 Office expenses 3,383,195. 728,493. 2,473,875. 180,827. 14 Information technology 749,019. 649,473. 1,398,492. 15 Royalties 3,027,876. 2,615,111. 825 411,940. Occupancy 16 4,621,159. 4,035,822. 109,727. 475,610. 17 Travel 18 Payments of travel or entertainment expenses 0 for any federal, state, or local public officials 3,490,647. 3,185,994. 223,282 81,371. Conferences, conventions, and meetings 19 889,103. 744,271. 144,832. Interest 20 0. 21 Payments to affiliates 2,845,955. 1,224,931. 87,807 1,533,217. Depreciation, depletion, and amortization 22 907,101. 707,161. 71,568. 128,372. Insurance 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) aDUES & SUBSCRIPTIONS 3,339,244. 556,719 5,529,224. 1,633,261. **b**PREMIUMS 2,958,046. 1,591,648. 1,764 1,364,634. cAUDIO VISUAL 3,111,670. 1,859,704. 1,251,966. dBANK FEES AND SERVICES 1,831,331. 790,809. 358,101 682,421. 2,867,316. 3,343,836. 156,378. -632,898. e All other expenses 266,981,193. 205,911,957. 21,054,352 40,014,884. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 🕨 🛛 if

JSA 9E1052 2.000

following SOP 98-2 (ASC 958-720)

24,619,078.

45,966,216.

21,347,138. Form **990** (2019)

m 990 (2				Page
art X				
	Check if Schedule O contains a response or note to any line in this Pa	art X	•••	<u></u>
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	40,507,892.	1	56,703,010
2	Savings and temporary cash investments.	15,922,404.	2	9,175,052
3	Pledges and grants receivable, net	57,329,507.	3	43,958,401
4	Accounts receivable, net.	78,528,965.	4	84,439,282
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	Ο.	5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	Ο.	6	
7	Notes and loans receivable, net	0.	7	
7 8	Inventories for sale or use	0.	8	
9	Prepaid expenses and deferred charges	5,598,777.	9	8,752,609
-	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D <b>10a</b> 139,191,229.			
b	Less: accumulated depreciation	65,818,930.	10c	77,759,29
11	Investments - publicly traded securities.	124,414,143.	11	96,999,40
12	Investments - other securities. See Part IV, line 11	116,952,722.		124,818,085
13	Investments - program-related. See Part IV, line 11	0.	13	
14	Intangible assets	0.	14	
15	Other assets. See Part IV, line 11	3,388,816.	15	4,595,242
16	<b>Total assets</b> . Add lines 1 through 15 (must equal line 33)	508,462,156.	16	507,200,384
17	Accounts payable and accrued expenses	33,233,493.	17	34,654,149
18	Grants payable	26,476,242.	18	18,270,283
19	Deferred revenue	16,404,900.	19	12,147,890
20	Tax-exempt bond liabilities.	0.	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	
	Loans and other payables to any current or former officer, director,			
22	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	0.	22	
23	Secured mortgages and notes payable to unrelated third parties	49,097,310.	23	46,112,584
24	Unsecured notes and loans payable to unrelated third parties	0.	24	-, ,
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	8,213,536.	25	9,990,20
26	Total liabilities. Add lines 17 through 25.	133,425,481.	26	121,175,113
	Organizations that follow FASB ASC 958, check here ► X		20	, ,
	and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	163,311,531.	27	156,319,924
28	Net assets with donor restrictions.	211,725,144.	28	229,705,34
	Organizations that do not follow FASB ASC 958, check here ►	,,	20	-,,,,,,,,,,
	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
	Paid-in or capital surplus, or land, building, or equipment fund		30	
30	and in or capital carpiac, or land, banding, or equipment land			
30 31	Retained earnings endowment accumulated income or other funds		21	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds.	375,036,675.	31 32	386,025,271

WORLD	WILDLIFE	FUND	TNC
MORTID		LOND	TINC

Form 99	90 (2019)			Pa	ge <b>12</b>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		. <b></b> .		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	286,3	;50 <b>,</b> 0	188.
2	Total expenses (must equal Part IX, column (A), line 25)	2	266,9	81,1	.93.
3	Revenue less expenses. Subtract line 2 from line 1	3	19,3	68,8	395.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	375 <b>,</b> 0	136,6	575.
5	Net unrealized gains (losses) on investments	5	-6,7	/31,6	500.
6	Donated services and use of facilities	6			0.
7	Investment expenses	7			0.
8	Prior period adjustments	8			0.
9					599.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	<u>32,</u> column (B))	10	386,0	25,2	271.
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				Х
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain in			
	Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were con				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audi				
	separate basis, consolidated basis, or both:				
	X       Separate basis       Consolidated basis       Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight of			1
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?	2c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, e				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in the			1
	Single Audit Act and OMB Circular A-133?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	•	3b	Х	
				990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

## 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.

OMB No. 1545-0047

		evenue Service	l	► Go to <i>www.ir</i> s.gov	//Form990 for instructio	ons and t	he latest i	nformation.	Inspection		
Name	e of t	he organization						Employer identif	ication number		
WOF	RLD	WILDLIFE 1	FUND INC					52-16933	87		
Pa	rt I	Reason for	r Public Cha	rity Status (All o	organizations must o	omplet	e this pa	art.) See instructions	S.		
The	orga		•		is: (For lines 1 throug	-	-	,			
1				-	tion of churches desc						
2					. (Attach Schedule E						
3		-	-	-	rganization described						
4			-		conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A	(iii). Enter the		
-		hospital's nam									
5		-	-		a college of universit	y owned	u or ope	rated by a governme	ental unit described in		
6				Complete Part II.)	rnmental unit describe	d in <b>sect</b>	ion 170/	h(1)(A)(y)			
7	Х		-	-			-		om the general public		
'		-		(1)(A)(vi). (Comple	-		oni a go				
8					<b>b)(1)(A)(vi).</b> (Complete	Part II.)					
9					ed in section 170(b)(1			l in conjunction with a	land-grant college		
		•			riculture (see instruct		•		• •		
		university:									
10		receipts from support from	n organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross eccipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its upport from gross investment income and unrelated business taxable income (less section 511 tax) from businesses cquired by the organization after June 30, 1975. See <b>section 509(a)(2).</b> (Complete Part III.)								
11		•	•	•	usively to test for publi						
12		-	-	-	-	-			carry out the purposes		
				· · ·					See section 509(a)(3).		
				-				-	nes 12e, 12f, and 12g.		
а					, supervised, or contr	-					
			-		regularly appoint or e		ajority of	the directors or truste	ees of the		
b			-	-	e Part IV, Sections A ed or controlled in co		with ite	supported organizati	on(c) by baying		
b					rganization vested in						
			-		, Sections A and C.	the barn					
с		<b>-</b>	( )	•	ng organization opera	ted in co	onnectio	n with. and functiona	llv integrated with.		
					s). You must comple				<b>y</b> 0 <i>y</i>		
d		Type III non	-functionally	integrated. A sup	porting organization of	perated	in conne	ection with its suppor	ted organization(s)		
		that is not fu	inctionally inte	egrated. The orgar	nization generally mus	st satisfy	a distrib	ution requirement an	d an attentiveness		
	_		-		omplete Part IV, Sect						
е			-		a written determinatio				II, Type III		
£	Γ				ionally integrated sup			ion.			
f					orted organization(s).		• • • •		•••••		
g		ame of supported of		(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of		
	(.,		sigunzation	(1) 2.13	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see		
					above (see instructions))	Yes	ment? No	instructions)	instructions)		
( • •											
(A)											
(B)											
(C)											
(D)											
(E)											
Tota	ıl										

V 19-7.9F

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. JSA 9E1210 1.000 Schedule A (Form 990 or 990-EZ) 2019

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u>Sec</u>	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	225,837,994.	213,838,919.	242,705,727.	230,298,727.	271,337,477.	1,184,018,844.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	225,837,994.	213,838,919.	242,705,727.	230,298,727.	271,337,477.	1,184,018,844.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						16,465,721.
6	Public support. Subtract line 5 from line 4						1,167,553,123.
	tion B. Total Support					1	
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from	225,837,994.	213,838,919.	242,705,727.	230,298,727.	271,337,477.	1,184,018,844.
	similar sources	20,138,802.	13,463,682.	15,032,700.	16,381,060.	16,803,573.	81,819,817.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0.	0.	172,902.	989,685.	0.	1,162,587.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <u>ATCH 1</u>	340,341.	202,151.	233,620.	409,278.	198,901.	1,384,291.
11	<b>Total support</b> . Add lines 7 through 10						1,268,385,539.
12	Gross receipts from related activities, etc. (s	ee instructions)				12	457,825.
13	<b>First five years.</b> If the Form 990 is for organization, check this box and <b>stop here</b>	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2019 (li	ne 6, column (f)	) divided by line	11, column (f)).		14	92.05%
15	Public support percentage from 2018	Schedule A, Pa	irt II, line 14			15	91.41 %
16a	331/3% support test - 2019. If the org	ganization did n	ot check the bo	x on line 13, ar	nd line 14 is 33	1/3 % or more, c	heck this
	box and <b>stop here</b> . The organization qu						
b	33 1/3 % support test - 2018. If the org						
	this box and stop here. The organization	on qualifies as a	publicly suppor	ted organizatio	n		▶∟
17a	10%-facts-and-circumstances test - 2	019. If the org	anization did no	ot check a box	on line 13, 16a	a, or 16b, and I	ine 14 is
	10% or more, and if the organization	meets the "fac	cts-and-circumst	ances" test, ch	eck this box a	nd stop here. E	Explain in
	Part VI how the organization meets t	he "facts-and-c	ircumstances" te	est. The organi	zation qualifies	as a publicly s	upported
	organization						▶∟
b	10%-facts-and-circumstances test - 2	2018. If the org	ganization did no	ot check a box	on line 13, 16	a, 16b, or 17a,	and line
	15 is 10% or more, and if the orga	anization meets	the "facts-and	-circumstances	" test, check t	his box and <b>st</b>	op here.
	Explain in Part VI how the organization	on meets the "	facts-and-circum	stances" test.	The organizatio	on qualifies as a	a publicly
	supported organization						
18	Private foundation. If the organization	did not check a	a box on line 13,	16a, 16b, 17a	, or 17b, check	this box and see	e
	instructions						▶□

Schedule A (Form 990 or 990-EZ) 2019

#### Schedule A (Form 990 or 990-EZ) 2019

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	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						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support		<b></b>	1	1	1	
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	-			•		
<u></u>	organization, check this box and stop here.			<u></u>		<u></u>	· · · · F
	tion C. Computation of Public Supp						
15	Public support percentage for 2019 (line 8,					15	%
$\frac{16}{800}$	Public support percentage from 2018 Sche			<u></u>		16	%
	tion D. Computation of Investment			10 column (f))		47	0/
17	Investment income percentage for 2019 (lin					17	%
18	Investment income percentage from 2018 S						<u>%</u>
19 a	331/3% support tests - 2019. If the or	-					
	17 is not more than 331/3%, check this		-				
b	331/3% support tests - 2018. If the orga						
	line 18 is not more than 331/3%, check		•	•			
20 JSA	Private foundation. If the organization of	ла пот спеск а		4, 19a, 01 19D,		Schedule A (Form 9	

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

52-1693387

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

10b Schedule A (Form 990 or 990-EZ) 2019

Page	5
i ayu	•

Schedu	ile A (Form 990 or 990-EZ) 2019		F	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	44-		
h	A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
	on B. Type I Supporting Organizations	TIC		
<u></u>			Yes	No
4	Did the directors, trustees, or membership of one or more supported organizations have the power to			
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).			
Socti	on D. All Type III Supporting Organizations	1		
Jecu			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structio	ons).	
а	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instruc		
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
		2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's position that its supported organization(s) would have engaged in these	2b		
2				
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in <b>Part VI.</b></i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
JSA	Schedule A (Form	990 or	990-EZ	Z) 2019

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#### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions 3 3 Other gross income (see instructions) 4 Add lines 1 through 3. 4 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a a Average monthly value of securities 1b b Average monthly cash balances c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 **Current Year** Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 4 Enter greater of line 2 or line 3. 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

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

6

Schedule A (Form 990 or 990-EZ) 2019

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	Page
	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		
2	Amounts paid to perform activity that directly furthers exer		ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in <b>Part VI</b> ). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Page 8

#### Schedule A (Form 990 or 990-EZ) 2019

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

	CHEDULE A, PART II - OTHER INCOME						
SCHEDULE A, FARI II -	OTHER INCOME	1					
DESCRIPTION	2015	2016	2017	2018	2019	TOTAL	
MISCELLANEOUS	333,941.	202,151.	230,240.	406,723.	198,901.	1,371,956.	
INCOME FROM FUNDRAISING EVENT	6,400.		3,380.	2,555.		12,335.	
TOTALS	340,341.	202,151.	233,620.	409,278.	198,901.	1,384,291.	

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

#### Internal Revenue Service

Name of the organization

## Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Q

Employer identification number

52-1693387

WORLD WILDLIFE FUND INC

#### Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year  $\blacktriangleright$  \$ \_

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

			52-1693387
art I Contr	ibutors (see instructions). Use duplicate cop	ies of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$12,877,527.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$11,010,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page **2** 

) INC	FUND	WILDLIFE	WORLD	Name of organization
-------	------	----------	-------	----------------------

Employer identification number 52–1693387

		of Part II if additional space is ne	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
		Ψ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
		Ψ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		—	
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)		Page <b>4</b>
Name of organization WORLD WILDLIFE E	FUND INC	Employer identification number
		E0 1 00000E

				52-1693387		
Part III	<b>Exclusively</b> religious, charitable, etc., (10) that total more than \$1,000 for the the following line entry. For organizatio contributions of \$1,000 or less for the	he year from any Ins completing Par	one contributor. Ill, enter the tota	Complete columns (a) through (e) and al of <i>exclusively</i> religious, charitable, etc.,		
	Use duplicate copies of Part III if additio					
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held		
		(e) Transf	er of gift			
	Transferee's name, address, and	I ZIP + 4	Relati	ionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		(e) Transf	er of gift			
	Transferee's name, address, and	I ZIP + 4	Relati	ionship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transf	er of aift			
		(-)				
	Transferee's name, address, and	I ZIP + 4	Relati	ionship of transferor to transferee		
(a) No.						
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
		(a) Transf	or of gift			
		(e) Transf				
	Transferee's name, address, and	I ZIP + 4	Relati	onship of transferor to transferee		

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

	•	on Form 990, Part IV, line 3, or Forn Complete Parts I-A and B. Do not comp		6 (Political Campaign Activ	ities), then
	()()	ion 501(c)(3)) organizations: Complete		Do not complete Part I-B.	
	Section 527 organizations: Com	()()) <b>c</b>			
	0	on Form 990, Part IV, line 4, or Form	n 990-EZ, Part VI, line 4	7 (Lobbying Activities), the	n
•	Section 501(c)(3) organizations	that have filed Form 5768 (election ur	nder section 501(h)): Co	mplete Part II-A. Do not cor	nplete Part II-B.
•	Section 501(c)(3) organizations	that have NOT filed Form 5768 (election	ion under section 501(h	)): Complete Part II-B. Do ne	ot complete Part II-A.
Tax)	(see separate instructions), the		Tax) (see separate ii	nstructions) or Form 990-	EZ, Part V, line 35c (Proxy
	Section 501(c)(4), (5), or (6) org	anizations: Complete Part III.			
	e of organization				entification number
_	LD WILDLIFE FUND INC			52-169	
Par		organization is exempt under			
1	Provide a description of the	organization's direct and indirect	political campaign a	ctivities in Part IV. (see i	nstructions for
	definition of "political campa	<b>c</b> ,			
2		xpenditures (see instructions)			
3		campaign activities (see instructio			
Par		organization is exempt under			
1		cise tax incurred by the organization			
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Par	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)	3).
1		expended by the filing organization			
2		ng organization's funds contributed			
		ies			
3	Total exempt function expe	enditures. Add lines 1 and 2. En	ter here and on Fo	rm 1120-POL,	
4		e Form 1120-POL for this year?			
5	Enter the names, addresses	and employer identification numb	per (EIN) of all section	on 527 political organiz	zations to which the filing
		ts. For each organization listed, er			
		tributions received that were prom			
		nd or a political action committee(			
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate
					political organization. If none, enter -0
(1)			_		
(2)					
(3)					
(4)			-		
(5)			-		
(6)			-		
For F	Paperwork Reduction Act Notic	e, see the Instructions for Form 990 o	r 990-EZ.	Schedu	le C (Form 990 or 990-EZ) 2019

#### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Internal Revenue Service

PAGE 28

OMB No. 1545-0047

20 19 **Open to Public** Inspection

Schedule C (Form 990 or 990-EZ) 2019 WORLD	WILDLIFE FOND INC	52=1	093387 Page Z
Part II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under
	longs to an affiliated group (and list in Part IV e nd share of excess lobbying expenditures).	ach affiliated group mem	per's name,
B Check ► if the filing organization ch	ecked box A and "limited control" provisions app	oly.	
	ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
<ul> <li>b Total lobbying expenditures to influence</li> <li>c Total lobbying expenditures (add lines 1</li> <li>d Other exempt purpose expenditures</li> <li>e Total exempt purpose expenditures (add</li> </ul>	public opinion (grassroots lobbying) a legislative body (direct lobbying) a and 1b) d lines 1c and 1d) e amount from the following table in both		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
<b>g</b> Grassroots nontaxable amount (enter 25	i% of line 1f)		
	ess, enter -0-		
	ss, enter -0		
	on either line 1h or line 1i, did the organiza		
reporting section 4911 tax for this year?	<u></u>		Yes No

4-Year Averaging Period Under Section 501(h)

### (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> Total	
<b>2a</b> Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))						
<b>c</b> Total lobbying expenditures						
<b>d</b> Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
<b>f</b> Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2019

		-
Pad	e	3

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has No (election under section 501(h)).	DT filed For	rm 5768
		(a)	(b)

	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local			
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?	Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х		
ĉ	Media advertisements?			24,184
d	Mailings to members, legislators, or the public?			12,345
e	Publications, or published or broadcast statements?			77
f	Grants to other organizations for lobbying purposes?	Х		297
a	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х		406,308
9 h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	
	Other activities?	Х		101
i	Total. Add lines 1c through 1i			443,312
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Ра	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
_		2a	
	Current year		
b	Carryover from last year	20	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)		

#### Part IV Supplemental Information

Schedule C (Form 990 or 990-E7) 2019

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

#### PART II-B, LINE 1, LOBBYING ACTIVITIES:

#### OTHER ACTIVITIES INCLUDED TIME SPENT ON STRATEGY AND PLANNING RELATED TO

LOBBYING.

Schedule C (Form 990 or 990-EZ) 2019

Page 4

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2019

SCHEE	DULE	D
(Form	990)	

# Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

(FOITH 990) ► Complet		Complete if t	the organization answered 8, 9, 10, 11a, 11b, 11c, 11d	"Yes" on Form 990	·		2019
	artment of the Treasury nal Revenue Service		► Attach to Form 990. Form990 for instructions a			_	Open to Public Inspection
-	e of the organization	, concentration gen				ployer identifica	
WOI	RLD WILDLIFE F	FUND INC				52-169338	37
Pa	art I Organiza	tions Maintaining Donor Adv	ised Funds or Other Si	imilar Funds or	Acc	ounts.	
		e if the organization answered	"Yes" on Form 990, Pa	art IV, line 6.			
	-		(a) Donor advised	l funds		(b) Funds and	other accounts
1	Total number at e	nd of year					
2		of contributions to (during year)					
3		of grants from (during year)					
4		at end of year					
5	Did the organizati	ion inform all donors and donor	advisors in writing that	the assets held	in do	nor advised	
	funds are the orga	anization's property, subject to the	e organization's exclusive	legal control?			Yes No
6					can be used		
	only for charitable	e purposes and not for the bene	fit of the donor or donor	advisor, or for a	ny ot	her purpose	
		nissible private benefit?					Yes No
Pa		tion Easements.					
		e if the organization answered					
1		servation easements held by the			<i>.</i> .		
		n of land for public use (for example	e, recreation or education)				portant land area
		of natural habitat		Preservation	orac	certified histor	ic structure
•		n of open space	ald a gualified concernation	an aantributian in	the f	orm of a con-	omistion
2	-	a through 2d if the organization he last day of the tax year.	eid a quaimed conservation		ine i		End of the Tax Year
•					2a		
a ⊾		onservation easements			2a 2b		
b C		tricted by conservation easements rvation easements on a certified			20 2c		
d d		rvation easements included in (c			20		
u		isted in the National Register			2d		
3		rvation easements modified, tra				hy the ora	nization during the
•	tax year ▶				mator	a by the erge	anzation during the
4	-	where property subject to conse	rvation easement is locate	ed 🕨			
5		ation have a written policy reg			ion, I	nandling of	
	•	orcement of the conservation ea		• ·		•	
6		hours devoted to monitoring, insp					ents during the year
7	Amount of expens	ses incurred in monitoring, inspec	ting, handling of violations	, and enforcing c	onser	vation easem	ents during the year
	▶\$		<u>, , , , , , , , , , , , , , , , , , , </u>	· 0			0,
8		vation easement reported on line 2	2(d) above satisfy the requ	irements of section	on 17	0(h)(4)(B)(i)	
		)(4)(B)(ii)?					Yes No
9	In Part XIII, descri	ibe how the organization reports	conservation easements	in its revenue and	d expe	ense statemer	
		d include, if applicable, the text o		anization's financ	ial sta	tements that	describes the
		counting for conservation easeme		• •			
Pa		tions Maintaining Collections			r Sim	illar Assets.	
		e if the organization answered					
1a	of art. historical t	n elected, as permitted under FA treasures, or other similar asse Part XIII the text of the footnote	ts held for public exhibi	ition. education.	or re	esearch in fu	alance sheet works rtherance of public
b	art, historical treas	n elected, as permitted under F/ sures, or other similar assets he ring amounts relating to these iter	ld for public exhibition, e				
	•	ded on Form 990, Part VIII, line 1				▶ \$	
		ed in Form 990, Part X					
2		n received or held works of a					
	-	s required to be reported under F					5 / 1
а		on Form 990, Part VIII, line 1				▶\$	

а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	

Schedule D (Form 990) 2019

▶ \$

OMB No. 1545-0047

_	dule D (Form 990) 2019		A / 11 / · · · · · ·			0: ::		Page 2
	rt III Organizations Maintain							
3	Using the organization's acquisition collection items (check all that app		other records, chec	k any of th	ne tollow	ing that make sigi	nificant us	e of its
а	Public exhibition		d Loan	or exchang	je progra	m		
b	Scholarly research		e Other					
С	Preservation for future gene	rations						
4	Provide a description of the organ XIII.	nization's collections	and explain how	they furthe	er the or	ganization's exemp	t purpose	in Part
5	During the year, did the organization	on solicit or receive o	donations of art, hist	orical treas	sures, or	other similar		
•	assets to be sold to raise funds rath						Yes	No
Pa	rt IV Escrow and Custodial A			or gamzatio				
i u	Complete if the organiza 990, Part X, line 21.		es" on Form 990, F	Part IV, lin	e 9, or r	eported an amou	nt on Forr	n
1a	Is the organization an agent, truste	e, custodian or othe	er intermediary for o	ontribution	is or othe	r assets not		
	included on Form 990, Part X?		-			_	Yes	No
b	If "Yes," explain the arrangement i	n Part XIII and com	plete the following tal	ble <sup>.</sup>				
~						Amount		
с	Beginning balance			10		,		
	Additions during the year							
e	Distributions during the year							
f	Ending balance							
	Did the organization include an am					account liability?	Yes	No
	If "Yes," explain the arrangement i							
	rt V Endowment Funds.			Thas been	provided			
Гa	Complete if the organiza	ation answered "Va	es" on Form 990	Part IV lin	<u>م</u> 10			
		(a) Current year	(b) Prior year	(c) Two ye		(d) Three years back	(e) Four ye	oro book
		217, 348, 846.	218,082,665.			199,308,858.	223,60	
1a	Beginning of year balance							
b	Contributions	33,823,726.	23,975,755.	25,78	9,522.	19,370,730.	21,21	3,812.
С	Net investment earnings, gains,	642 200	0 055 670	1 - 00	C 700		с <b>г</b> и	
	and losses	-643,389.				30,527,829.		10,800.
d	Grants or scholarships	1,119,342.	1,073,756.	1,01	4,155.	1,022,791.	1,00	)1,145.
е	Other expenditures for facilities							
	and programs	39,537,796.	31,691,498.	33,89	8,084.	36,916,034.	37,96	59,074.
f	Administrative expenses							
g	End of year balance	209,872,045.	217,348,845.	218,082	2,665.	211,268,592.	199,30	8,859.
2	Provide the estimated percentage	of the current year	end balance (line 1g	, column (a	)) held as	:		
а	Board designated or quasi-endown		)_%					
b	Permanent endowment  30.8							
С	Term endowment ► .3700	_%						
	The percentages on lines 2a, 2b, a	and 2c should equal	100%.					
3a	Are there endowment funds not in	the possession of the	ne organization that	are held a	nd admir	nistered for the		
	organization by:						Ye	es No
	(i) Unrelated organizations						3a(i)	Х
	(ii) Related organizations						3a(ii)	Х
b	If "Yes" on line 3a(ii), are the related	ed organizations liste	d as required on Sch	edule R? .			3b	
4	Describe in Part XIII the intended	uses of the organiza	tion's endowment fu	nds.				
Ра	rt VI Land, Buildings, and Equ	uipment.						
	Complete if the organiz Description of property							
	Description of property	(a) Cost or (inves		or other basis other)		cumulated (c	i) Book value	9
1a	Land		17,4	136,974.			17,436	5,974.
b	Buildings		45,9	982,829.	22,9	10,581.	23,072	2,248.
c	Leasehold improvements		31,6	652,830.	19,2	26,853.	12,426	5,247.
d	Equipment		26,3	332,113.		69,380.		2,733.
	Other			, 786 <b>,</b> 483.		25,388.	15,961	
Tota	I. Add lines 1a through 1e. (Column	(d) must equal Forr					77,759	
	<b>0</b> ,	· · · ·						

Schedule D (Form 990) 2019

	Form 990) 2019			Page <b>3</b>
Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	<b>(b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year marke	
(1) Financi	al derivatives			
	held equity interests			
(3) Other_				
	TNERSHIPS	124,818,085.	FMV	
(B)				
(C)				
(D) (E)				
(E) (F)				
(G)				
(U) (H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.) 🔒 🕨	124,818,085.		
Part VIII				
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	<b>(b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
<u>(8)</u> (9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.) 🔒 🕨			
Part IX	Other Assets.			
i alt izt	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11d. See Form 990,	Part X, line 15.
	• •	scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
<u>(9)</u>	umn (b) must equal Form 990, Part X, col. (B) I	ine 15)	<b>&gt;</b>	
Part X	Other Liabilities. Complete if the organization answered line 25.		·	n 990, Part X,
1.		tion of liability		(b) Book value
	ral income taxes			
<u> </u>	E OF INTEREST RATE SWAPS			9,990,207.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)	<u> </u>	<u></u> ▶	9,990,207.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Х

Schedu	le D (Form 990) 2019				Page <b>4</b>
Part				n.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	, line	12a.		
1	Total revenue, gains, and other support per audited financial statements			1	359,815,497.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-6,731,600.		
b	Donated services and use of facilities	2b	84,500,663.		
С	Recoveries of prior year grants.	2c			
d	Other (Describe in Part XIII.)	2d	-2,376,995.		
е	Add lines 2a through 2d			2e	75,392,068.
3	Subtract line 2e from line 1			3	284,423,429.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а		4a	2,052,867.		
b		4b	-126,208.		
c	Add lines 4a and 4b			4c	1,926,659.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) .			5	286,350,088.
Part				ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV,	, line	12a.		
1	Total expenses and losses per audited financial statements			1	348,826,902.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а		2a	84,500,663.		
b	Prior year adjustments	2b			
с		2c			
d		2d	-602,087.		
e	Add lines 2a through 2d			2e	83,898,576.
3	Subtract line 2e from line 1			3	264,928,326.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а		4a	2,052,867.		
b		4b			
c	Add lines 4a and 4b			4c	2,052,867.
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> ).			5	266,981,193.
Part	XIII Supplemental Information.				
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV	, lines 1b and 2b; F	Part V,	line 4; Part X, line

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

#### PART V, LINE 4:

ENDOWMENT FUNDS ARE USED TO FURTHER CONSERVATION WORK.

Part XIII Supplemental Information (continued)

PART X, LINE 2:

UNDER ASC 740-10 AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED. WWF DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND ACCORDINGLY IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. WWF HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN THE JURISDICTIONS WHERE IT IS REQUIRED TO DO SO. ADDITIONALLY, WWF HAS FILED IRS FORM 990 AND FORM 990-T TAX RETURNS AS REQUIRED AND ALL OTHER APPLICABLE RETURNS IN THOSE JURISDICTIONS WHERE IT IS REQUIRED. WWF BELIEVES THAT IT IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S. INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2015. FOR THE YEAR ENDED JUNE 30, 2020 AND 2019, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE CONSOLIDATED STATEMENTS OF ACTIVITIES RELATED TO UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS GAIN/LOSS ON DEBT SWAP \$(2,206,226) GAIN/LOSS ON EXCHANGE RATE DIFFERENCES \$(170,768) ROUNDING (1)

TOTAL TO SCHEDULE D, PART XI, LINE 2D \$(2,376,995)

Schedule D (Form 990) 2019	WORLD W	NILDLIFE	FUND	INC	
Part XIII Supplementa	I Information (d	continued)			
PART XI, LINE 4B - (	OTHER ADJUST	MENTS			
FUNDRAISING EVENT EX	XPENSES NETT	ED WITH	INCOM	Έ	\$ (126,208)
PART XII, LINE 2D -	OTHER ADJUS	TMENTS			
FUNDRAISING EVENT EX	XPENSES NETT	'ED WITH	INCOM	Е	\$126 <b>,</b> 208
CANCELED GRANTS				\$	(728,295)
				_	

\$(602,087)

Schedule D (Form 990) 2019

SCHEDULE F	Statement of Activities Outside the United St	ates	OMB No. 1545-0047
(Form 990)	► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 1 ► Attach to Form 990.	5, or 16.	2019
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Open to Public Inspection
Name of the organization		Employer ide	entification number
WORLD WILDLIFE H	FUND INC	52-16	93387
	formation on Activities Outside the United States. Complete if the Part IV, line 14b.	• organizati	ion answered "Yes" on
-	Does the organization maintain records to substantiate the amount of its the grantees' eligibility for the grants or assistance, and the selection crite or assistance?	eria used to	

- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- Activities per Region. (The following Part L line 3 table can be duplicated if additional space is needed.) 2

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBE	AN 5.	33.	GRANTMAKING	CONSERVATION	1,010,567
(2) EAST ASIA AND THE PACIF	IC 0.	0.	GRANTMAKING	CONSERVATION	13,321,637
(3) EUROPE	0.	0.	GRANTMAKING	CONSERVATION	12,766,192
(4) NORTH AMERICA	4.	119.	GRANTMAKING	CONSERVATION	1,554,528.
(5) SOUTH AMERICA	14.	350.	GRANTMAKING	CONSERVATION	19,912,591.
(6) SOUTH ASIA	8.	125.	GRANTMAKING	CONSERVATION	7,689,507.
(7) SUB-SAHARAN AFRICA	1.	24.	GRANTMAKING	CONSERVATION	9,508,831.
(8) RUSSIA/INDEPENDENT STAT	ES 0.	0.	GRANTMAKING	CONSERVATION	851,619
(9) CENTRAL AMERICA/CARIBBE	AN 0.	0.	PROGRAM SERVICES	CONSERVATION	4,609,745.
10) NORTH AMERICA	0.	0.	PROGRAM SERVICES	CONSERVATION	8,153,840.
11) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	CONSERVATION	16,783,105.
12) SOUTH ASIA	0.	0.	PROGRAM SERVICES	CONSERVATION	2,635,021.
<b>13)</b> SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	CONSERVATION	2,004,217.
14) CENTRAL AMERICA/CARIBBE	AN 0.	0.	INVESTMENTS		17,947,294.
15) EUROPE	0.	0.	INVESTMENTS		20,699,518.
16) MIDDLE EAST AND NORTH A	FRICA 0.	0.	GRANTMAKING		
17)					
<ul><li>3a Subtotal</li><li>b Total from contin sheets to Part I</li></ul>	uation	651.			139,448,212.
c Totals (add lines 3a a or Paperwork Reduction Act N	nd 3b) 32.	651.			139,448,212.

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Schedule F (	Schedule F (Form 990) 2019							) 1 1	Page 2
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed	<b>ance to Organiza</b> acipient who recei	Entities e than \$5	de the United	<b>Outside the United States.</b> Complete if the organization ,000. Part II can be duplicated if additional space is needed.	te if the orga onal space is	anization answered needed.	ed "Yes" on I	"Yes" on Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			SOUTH AMERICA	CONSERVATION	10,705,000.	WIRE			
(2)			EUROPE/ICELAND/GREENLAND	CONSERVATION	9,854,899.	WIRE			
(3)			EAST ASIA & PACIFIC	CONSERVATION	5,633,759.	WIRE			
(4)			EAST ASIA & PACIFIC	CONSERVATION	4,459,070.	WIRE			
(5)			SOUTH ASIA	CONSERVATION	2,005,453.	WIRE			
(9)			SOUTH AMERICA	CONSERVATION	1,978,823.	WIRE			
(2)			SOUTH ASIA	CONSERVATION	1,499,084.	WIRE			
(8)			SUB-SAHARAN AFRICA	CONSERVATION	1,241,078.	WIRE			
(6)			SOUTH ASIA	CONSERVATION	982,315.	WIRE			
(10)			SUB-SAHARAN AFRICA	CONSERVATION	924,625.	WIRE			
(11)			SOUTH AMERICA	CONSERVATION	865,567.	WIRE			
(12)			EAST ÀSIÀ & PÀCIFIC	CONSERVATION	860,721.	WIRE			
(13)			SUB-SAHARAN AFRICA	CONSERVATION	839,550.	WIRE			
(14)			RUSSIA/NEWLY IND. STATES	CONSERVATION	833,382.	WIRE			
(15)			SOUTH ASIA	CONSERVATION	747,890.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

720,412. WIRE

CENT. AMERICA/CARIBBEAN CONSERVATION

(16)

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities m

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Schedule F	3chedule F (Form 990) 2019								Page 2
Part II	ertil Grants and Other Assistance to Organizations or	ance to Organizat	tions or Entities Outs	side the United	Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,	te if the orga	anization answer	ed "Yes" on	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.	cipient who receiv	/ed more than \$5,000	. Part II can be d	uplicated if addition	onal space is	needed.		
-	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description (i) Method of	(i) Method of

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1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EAST ASIA & PACIFIC	CONSERVATION	679,270.	WIRE			
(2)		SUB-SAHARAN AFRICA	CONSERVATION	670,000.	WIRE			
(3)		SUB-SAHARAN AFRICA	CONSERVATION	636,568.	WIRE			
(4)		SUB-SAHARAN AFRICA	CONSERVATION	612,994.	WIRE			
(5)		SUB-SAHARAN AFRICA	CONSERVATION	612,427.	WIRE			
(6)		NORTH AMERICA	CONSERVATION	592,333.	WIRE			
(7)		SOUTH ASIA	CONSERVATION	559,529.	WIRE			
(8)		EUROPE/ICELAND/GREENLAND	CONSERVATION	549,147.	WIRE			
(6)		SUB-SAHARAN AFRICA	CONSERVATION	511,615.	WIRE			
(10)		SOUTH ASIA	CONSERVATION	409,000.	WIRE			
(11)		EUROPE	CONSERVATION	370,556.	WIRE			
(12)		SUB-SAHARAN AFRICA	CONSERVATION	362,126.	WIRE			
(13)		SUB-SAHARAN AFRICA	CONSERVATION	330,241.	WIRE			
(14)		SOUTH ASIA	CONSERVATION	323,845.	WIRE			
(15)		SOUTH AMERICA	CONSERVATION	319,828.	WIRE			
(16)		SUB-SAHARAN AFRICA	CONSERVATION	319,069.	WIRE			
tarana yata barina any interior and add ad angla and barina and tat and a batal and an initial addition to addi	- 4- F - 4-11 14				-			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

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Schedule F (	Schedule F (Form 990) 2019							) 1 1	Page 2
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed	ance to Organiza scipient who recei	Entities e than \$5	<b>de the United</b> Part II can be d	<b>Outside the United States.</b> Complete if the organization ,000. Part II can be duplicated if additional space is needed.	te if the orga onal space is	anization answered needed.	ed "Yes" on	"Yes" on Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			EAST ASIA & PACIFIC	CONSERVATION	300,866.	WIRE			
(2)			SOUTH AMERICA	CONSERVATION	299,280.	WIRE			
(3)			SUB-SAHARAN AFRICA	CONSERVATION	263,101.	WIRE			
(4)			SOUTH AMERICA	CONSERVATION	257,528.	WIRE			
(5)			SOUTH AMERICA	CONSERVATION	249,829.	WIRE			
(9)			SOUTH ASIA	CONSERVATION	246,644.	WIRE			
(2)			EUROPE/ICELAND/GREENLAND	CONSERVATION	246,016.	WIRE			
(8)			SUB-SAHARAN AFRICA	CONSERVATION	236,588.	WIRE			
(6)			EUROPE/ICELAND/GREENLAND	CONSERVATION	228,408.	WIRE			
(10)			EUROPE/ICELAND/GREENLAND	CONSERVATION	228,192.	WIRE			
(11)			SOUTH AMERICA	CONSERVATION	225,111.	WIRE			
(12)			EUROPE/ICELAND/GREENLAND	CONSERVATION	220,414.	WIRE			
(13)			SUB-SAHARAN AFRICA	CONSERVATION	206,711.	WIRE			
(14)			EUROPE/ICELAND/GREENLAND	CONSERVATION	189,544.	WIRE			
(15)			EAST ASIA & PACIFIC	CONSERVATION	187,200.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

183,570. WIRE

CONSERVATION

SUB-SAHARAN AFRICA

(16)

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities m

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Schedule F (Form 990) 2019

Part II	<b>art II Grants and Other Assistance to Organizations or Entities Outside the United States.</b> Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	tance to Organiza ∍cipient who recei	tions or Entities Outsic ved more than \$5,000. P	<b>de the Unite</b> d art II can be c	Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, than \$5,000. Part II can be duplicated if additional space is needed.	te if the organ	anization answer needed.	ed "Yes" on	
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description (i) Method of of noncash (book, FMV, assistance appraisal, other	(i) Method of valuation (book, FMV, appraisal, other)

<ol> <li>(a) Name of organization</li> </ol>	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EUROPE/ICELAND/GREENLAND	CONSERVATION	179,437.	WIRE			
(2)		south America	CONSERVATION	171,445.	WIRE			
(3)		EAST ASIA & PACIFIC	CONSERVATION	165,534.	WIRE			
(4)		SUB-SAHARAN AFRICA	CONSERVATION	155,705.	WIRE			
(5)		SUB-SAHARAN AFRICA	CONSERVATION	155,661.	WIRE			
(6)		SOUTH AMERICA	CONSERVATION	155,660.	WIRE			
(7)		SUB-SAHARAN AFRICA	CONSERVATION	155,299.	WIRE			
(8)		SUB-SAHARAN AFRICA	CONSERVATION	152,789.	WIRE			
(9)		EAST ASIA & PACIFIC	CONSERVATION	141,612.	WIRE			
(10)		SOUTH AMERICA	CONSERVATION	139,672.	WIRE			
(11)		SOUTH AMERICA	CONSERVATION	133,457.	WIRE			
(12)		EUROPE/ICELAND/GREENLAND	CONSERVATION	132,716.	WIRE			
(13)		SOUTH ASIA	CONSERVATION	127,434.	WIRE			
(14)		EAST ASIA & PACIFIC	CONSERVATION	127,397.	WIRE			
(15)		SUB-SAHARAN AFRICA	CONSERVATION	124,309.	WIRE			
(16)		NORTH AMERICA	CONSERVATION	120,306.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities з

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Schedule F (Form 990) 2019

Part II		ance to Organiza	tions or Entities Outsic	le the United	Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,	e if the orga	anization answer	ed "Yes" on	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	cipient who received	ved more than \$5,000. P	art II can be d	uplicated if additic	onal space is	needed.		
<del>.</del>	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<ul> <li>(h) Description</li> <li>(i) Method of of noncash valuation assistance</li> <li>(book, FMV, appraisal, other</li> </ul>	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			EAST ASIA & PACIFIC	CONSERVATION	120,000.	WIRE			
(2)			EAST ASIA & PACIFIC	CONSERVATION	119,900. WIRE	WIRE			

organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
(1)		EAST ASIA & PACIFIC	CONSERVATION	120,000.	WIRE			
(2)		EAST ASIA & PACIFIC	CONSERVATION	119,900.	WIRE			
(3)		south America	CONSERVATION	119,174.	WIRE			
(4)		NORTH AMERICA	CONSERVATION	114,825.	WIRE			
(5)		south America	CONSERVATION	114,220.	WIRE			
(6)		EAST ASIA & PACIFIC	CONSERVATION	114,000.	WIRE			
(2)		EAST ASIA & PACIFIC	CONSERVATION	112,500.	WIRE			
(8)		EAST ASIA & PACIFIC	CONSERVATION	109,911.	WIRE			
(6)		SUB-SAHARAN AFRICA	CONSERVATION	109,661.	WIRE			
(10)		SOUTH ASIA	CONSERVATION	101,975.	WIRE			
(11)		SOUTH AMERICA	CONSERVATION	101,768.	WIRE			
(12)		south America	CONSERVATION	100,462.	WIRE			
(13)		SOUTH AMERICA	CONSERVATION	99, 629.	WIRE			
(14)		EUROPE/ICELAND/GREENLAND	CONSERVATION	98,938.	WIRE			
(15)		EUROPE/ICELAND/GREENLAND	CONSERVATION	98,643.	WIRE			
(16)		SUB-SAHARAN AFRICA	CONSERVATION	93,997.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities з

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Schedule F (	schedule F (Form 990) 2019								Page 2
Part II	art I Grants and Other Assistance to Organizations or	ance to Organizat	tions or Entities Outsic	le the United	Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,	e if the orga	inization answei	red "Yes" on	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.	cipient who receiv	/ed more than \$5,000. P	art II can be d	uplicated if additic	nal space is	needed.		
•	(a) Name of			AV Durbonn of	(4) Dimension of (4) American of (5) American of (4) American of (4) Dimension of (5) American of	ft Manar of	(a) A maint of	(h) Decerination	GV Mathed of

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)		SUB-SAHARAN AFRICA	CONSERVATION	92,248.	WIRE			
(2)		EAST ASIA & PACIFIC	CONSERVATION	89,100.	WIRE			
(3)		EUROPE/ICELAND/GREENLAND	CONSERVATION	89,021.	WIRE			
(4)		SOUTH AMERICA	CONSERVATION	87,685.	WIRE			
(5)		CENTRAL AMERICA & CARRIB	CONSERVATION	86,723.	WIRE			
(6)		SOUTH AMERICA	CONSERVATION	84,582.	WIRE			
(2)		SOUTH AMERICA	CONSERVATION	84,011.	WIRE			
(8)		SUB-SAHARAN AFRICA	CONSERVATION	80,844.	WIRE			
(6)		SUB-SAHARAN AFRICA	CONSERVATION	77,000.	WIRE			
(10)		SOUTH ASIA	CONSERVATION	76,403.	WIRE			
(11)		SOUTH AMERICA	CONSERVATION	71,800.	WIRE			
(12)		south America	CONSERVATION	71,744.	WIRE			
(13)		south America	CONSERVATION	70,954.	WIRE			
(14)		SOUTH AMERICA	CONSERVATION	70,000.	WIRE			
(15)		SOUTH AMERICA	CONSERVATION	69, 068.	WIRE			
(16)		SOUTH AMERICA	CONSERVATION	67,765.	WIRE			
<ol> <li>Enter total number of recipient organizations listed above that are recognized as charities by the foreign country recognized as tax evenus</li> </ol>								

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

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Schedule F (Form 990) 2019

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	tance to Organiza	tions or Entities Outsic ded more than \$5,000. P	art II can be d	Entities Outside the United States. Complete if the organization answered "Yes" than \$5,000. Part II can be duplicated if additional space is needed.	te if the orga onal space is	inization answer needed.		on Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			SOUTH ASIA	CONSERVATION	66,421.	WIRE			
(2)			SUB-SAHARAN AFRICA	CONSERVATION	66,114.	WIRE			
(3)			south America	CONSERVATION	63,353.	WIRE			
(4)			south America	CONSERVATION	61,909.	WIRE			
(5)			SOUTH AMERICA	CONSERVATION	61,635.	WIRE			
(6)			EUROPE	CONSERVATION	60,000.	WIRE			
(2)			south America	CONSERVATION	59, 978.	WIRE			
(8)			south America	CONSERVATION	59,169.	WIRE			
(6)			south America	CONSERVATION	56, 696.	WIRE			
(10)			SOUTH AMERICA	CONSERVATION	54,775.	WIRE			
(11)			SOUTH AMERICA	CONSERVATION	54,131.	WIRE			
(12)			south America	CONSERVATION	53, 319.	WIRE			
(13)			south America	CONSERVATION	52,874.	WIRE			
(14)			SUB-SAHARAN AFRICA	CONSERVATION	50, 255.	WIRE			
(15)			EUROPE	CONSERVATION	50,000.	WIRE			
(16)			NORTH AMERICA	CONSERVATION	49,829.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities ۳

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Schedule F (i	Schedule F (Form 990) 2019							) 1 2	Page 2
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	ance to Organiza	Entities e than \$5	de the United	<b>Outside the United States.</b> Complete if the organization ,000. Part II can be duplicated if additional space is needed.	te if the orgainal space is	anization answered needed.	ed "Yes" on I	"Yes" on Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance a	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			south America	CONSERVATION	49,500.	WIRE			
(2)			NORTH AMERICA	CONSERVATION	49,343.	WIRE			
(3)			SOUTH AMERICA	CONSERVATION	49,059.	WIRE			
(4)			SUB-SAHARAN AFRICA	CONSERVATION	48,658.	WIRE			
(5)			south America	CONSERVATION	47,962.	WIRE			
(9)			SOUTH AMERICA	CONSERVATION	47,407.	WIRE			
(2)			SOUTH AMERICA	CONSERVATION	47,300.	WIRE			
(8)			SOUTH AMERICA	CONSERVATION	46,816.	WIRE			
(6)			SOUTH AMERICA	CONSERVATION	45,574.	WIRE			
(10)			SOUTH ASIA	CONSERVATION	45,413.	WIRE			
(11)			SUB-SAHARAN AFRICA	CONSERVATION	44,750.	WIRE			
(12)			SOUTH AMERICA	CONSERVATION	44,586.	WIRE			
(13)			SOUTH AMERICA	CONSERVATION	44,335.	WIRE			
(14)			SOUTH AMERICA	CONSERVATION	43,829.	WIRE			
(15)			SOUTH AMERICA	CONSERVATION	42,595.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

42,553. WIRE

CONSERVATION

NORTH AMERICA

(16)

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities ۳

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Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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.	Schedule F	F (Form 990) 2019
Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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.

<ol> <li>(a) Name of organization</li> </ol>	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)		SOUTH AMERICA	CONSERVATION	42,179.	WIRE			
(2)		NORTH AMERICA	CONSERVATION	39, 146.	WIRE			
(3)		NORTH AMERICA	CONSERVATION	38, 593.	WIRE			
(4)		SOUTH AMERICA	CONSERVATION	35, 365 .	WIRE			
(5)		SOUTH AMERICA	CONSERVATION	35,038.	WIRE			
(6)		NORTH AMERICA	CONSERVATION	34,594.	WIRE			
(2)		SOUTH AMERICA	CONSERVATION	34,472.	WIRE			
(8)		SOUTH AMERICA	CONSERVATION	34,199.	WIRE			
(6)		SOUTH AMERICA	CONSERVATION	34,196.	WIRE			
(10)		SOUTH AMERICA	CONSERVATION	33,413.	WIRE			
(11)		SOUTH AMERICA	CONSERVATION	32,641.	WIRE			
(12)		SOUTH AMERICA	CONSERVATION	32,166.	WIRE			
(13)		SOUTH AMERICA	CONSERVATION	30, 866.	WIRE			
(14)		NORTH AMERICA	CONSERVATION	30,456.	WIRE			
(15)		EAST ASIA & PACIFIC	CONSERVATION	30,000.	WIRE			
(16)		SOUTH ASIA	CONSERVATION	29,369.	WIRE			

<u>}</u> by the IRS, or for which the granizations instea above that are recognized as chainles by the foreign country, recognized as tax-exerby the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities

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Schedule F (F	Schedule F (Form 990) 2019 Data III Grante and Other Accietance to Ornanizations or	ance to Organiza		de the Ilnited	Page 2 Page 2 Entities Outside the United States Complete if the organization answered "Ves" on Form 990	the ords	nization answer		Page 2
rait II	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	scipient who recei	(1)	art II can be d	uplicated if addition	onal space is	nieded.		
<del>.</del>	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			SOUTH ASIA	CONSERVATION	29,199.	WIRE			
(2)			SUB-SAHARAN AFRICA	CONSERVATION	28,572.	WIRE			
(3)			SOUTH ASIA	CONSERVATION	27,485.	WIRE			
(4)			SOUTH AMERICA	CONSERVATION	26,959.	WIRE			
(5)			SOUTH AMERICA	CONSERVATION	26,000.	WIRE			
(6)			SOUTH AMERICA	CONSERVATION	25,209.	WIRE			
(2)			SOUTH AMERICA	CONSERVATION	25,000.	WIRE			
(8)			NORTH AMERICA	CONSERVATION	24,728.	WIRE			
(6)			NORTH AMERICA	CONSERVATION	24,546.	WIRE			
(10)			SOUTH AMERICA	CONSERVATION	23,127.	WIRE			
(11)			NORTH AMERICA	CONSERVATION	23,068.	WIRE			
(12)			SOUTH AMERICA	CONSERVATION	22,813.	WIRE			
(13)			NORTH AMERICA	CONSERVATION	21,873.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

WIRE

21,786.

CONSERVATION

NORTH AMERICA

(14)

(15)

(16)

WIRE

21,111.

CONSERVATION

SOUTH AMERICA

WIRE

21,025.

CONSERVATION

SOUTH AMERICA

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INC	
FUND	
WILDLIFE	
WORLD	

Schedule F (Fo	Schedule F (Form 990) 2019							1	Page 2
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	ance to Organiza cipient who receiv	1 a)	ie the United art II can be du	Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, than \$5,000. Part II can be duplicated if additional space is needed.	e if the orga mal space is	anization answerd needed.	ed "Yes" on	Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(F)			SOUTH AMERICA	CONSERVATION	20,647.	WIRE			
(2)			SOUTH AMERICA	CONSERVATION	20,381.	WIRE			
(3)			SOUTH AMERICA	CONSERVATION	20,000.	WIRE			
(4)			SUB-SAHARAN AFRICA	CONSERVATION	19,853.	WIRE			
(5)			SOUTH AMERICA	CONSERVATION	19,592.	WIRE			
(9)			CENTRAL AMERICA & CARRIB	CONSERVATION	18,741.	WIRE			
(2)			CENTRAL AMERICA & CARRIB	CONSERVATION	18,627.	WIRE			
(8)			CENTRAL AMERICA & CARRIB	CONSERVATION	18,374.	WIRE			
(6)			RUSSIA/NEWLY IND. STATES	CONSERVATION	18,237.	WIRE			
(10)			SOUTH AMERICA	CONSERVATION	18,106.	WIRE			
(11)			SOUTH AMERICA	CONSERVATION	17,807.	WIRE			
(12)			NORTH AMERICA	CONSERVATION	17,525.	WIRE			
(13)			NORTH AMERICA	CONSERVATION	17,502.	WIRE			
(14)			SOUTH ASIA	CONSERVATION	16,799.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

WIRE

16,391.

CONSERVATION

SOUTH AMERICA

(15)

(16)

WIRE

16,289.

CENTRAL AMERICA & CARRIB CONSERVATION

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities ۳

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52-1693387 Page **2** 

Schedule F (Form 990) 2019

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	ance to Organiza	0	<b>ie the United</b> art II can be d	Entities Outside the United States. Complete if the organization answered than \$5,000. Part II can be duplicated if additional space is needed.	te if the orga onal space is	inization answer needed.	"Yes"	on Form 990,
<del>.</del>	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			NORTH AMERICA	CONSERVATION	16,103.	WIRE			
(2)			NORTH AMERICA	CONSERVATION	15,919.	WIRE			
(3)			SOUTH ASIA	CONSERVATION	15,756.	WIRE			
(4)			SOUTH AMERICA	CONSERVATION	15,429.	WIRE			
(5)			CENTRAL AMERICA & CARRIB	CONSERVATION	15,168.	WIRE			
(9)			SOUTH AMERICA	CONSERVATION	15,000.	WIRE			
(7)			EAST ASIA & PACIFIC	CONSERVATION	15,000.	WIRE			
(8)			EUROPE	CONSERVATION	15,000.	WIRE			
(6)			SOUTH AMERICA	CONSERVATION	14,830.	WIRE			
(10)			NORTH AMERICA	CONSERVATION	14,750.	WIRE			
(11)			NORTH AMERICA	CONSERVATION	14,726.	WIRE			
(12)			SOUTH ASIA	CONSERVATION	14,716.	WIRE			
(13)			CENTRAL AMERICA & CARRIB	CONSERVATION	14,544.	WIRE			
(14)			SOUTH AMERICA	CONSERVATION	14,451.	WIRE			
(15)			CENTRAL AMERICA & CARRIB	CONSERVATION	14,337.	WIRE			
(16)			SOUTH AMERICA	CONSERVATION	14,184.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities ۳

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Schedule F (	Schedule F (Form 990) 2019							1	Page 2
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed	ance to Organiza acipient who recei	Entities e than \$5	<b>de the United</b> Part II can be d	<b>Outside the United States.</b> Complete if the organization ,000. Part II can be duplicated if additional space is needed.	te if the orga onal space is	anization answered needed.	ed "Yes" on l	"Yes" on Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			SOUTH ASIA	CONSERVATION	13,750.	WIRE			
(2)			SOUTH ASIA	CONSERVATION	13,651.	WIRE			
(3)			SOUTH AMERICA	CONSERVATION	13,500.	WIRE			
(4)			EAST ASIA & PACIFIC	CONSERVATION	12,997.	WIRE			
(5)			SOUTH ASIA	CONSERVATION	12,512.	WIRE			
(9)			SOUTH AMERICA	CONSERVATION	12,443.	WIRE			
(1)			SOUTH AMERICA	CONSERVATION	12,068.	WIRE			
(8)			SOUTH AMERICA	CONSERVATION	12,000.	WIRE			
(6)			NORTH AMERICA	CONSERVATION	11,964.	WIRE			
(10)			NORTH AMERICA	CONSERVATION	11,833.	WIRE			
(11)			NORTH AMERICA	CONSERVATION	11,677.	WIRE			
(12)			SOUTH AMERICA	CONSERVATION	11,504.	WIRE			
(13)			SOUTH ASIA	CONSERVATION	11,468.	WIRE			
(14)			SOUTH ASIA	CONSERVATION	11,217.	WIRE			
(15)			NORTH AMERICA	CONSERVATION	11,138.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

11,132. WIRE

CONSERVATION

SOUTH AMERICA

(16)

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities m

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Schedule F (F Part II	Schedule F (Form 990) 2019 Schedule F (Form 990) 2019 Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV line 15 for any recipient who received more than \$5,000. Part II can be dunificated if additional snace is needed	ance to Organiza cipient who receiv	tions or Entities Outsic admore than \$5,000 P	de the United	<b>States.</b> Complet Indicated if addition	te if the organ	<ul> <li>Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, a than \$5,000 Part II can be dunlicated if additional snace is needed.</li> </ul>	er "be" be	<sup></sup> Page <b>2</b> 990,
-	(a) Name of or drift of drift	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	CONSERVATION	10,971.	WIRE			
(2)			south Asia	CONSERVATION	10,889.	WIRE			
(3)			SOUTH AMERICA	CONSERVATION	10,743.	WIRE			
(4)			south Asia	CONSERVATION	10,619.	WIRE			
(5)			SUB-SAHARAN AFRICA	CONSERVATION	10,612.	WIRE			
(9)			NORTH AMERICA	CONSERVATION	10,458.	WIRE			
(2)			SOUTH ASIA	CONSERVATION	10,270.	WIRE			
(8)			south America	CONSERVATION	10,240.	WIRE			
(6)			SOUTH AMERICA	CONSERVATION	10,030.	WIRE			
(10)			SOUTH AMERICA	CONSERVATION	10,000.	WIRE			
(11)			SOUTH ASIA	CONSERVATION	10,000.	WIRE			
(12)			SOUTH AMERICA	CONSERVATION	10,000.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

WIRE

9,937.

CONSERVATION

SOUTH AMERICA

WIRE

9,971.

CONSERVATION

SUB-SAHARAN AFRICA

(13)

(14)

(15)

(16)

WIRE

9,852.

CONSERVATION

NORTH AMERICA

WIRE

9,651.

CONSERVATION

EUROPE

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INC	
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WILDLIFE	
WORLD	

Schedule F (F	Part II Grants FOND INC. Schedule F (Fom 990) 2019 Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV. line 15. for any recipient who received more than \$5.000. Part II can be duplicated if additional space is needed	ance to Organiza cipient who recei	1 01	<b>le the United</b> Part II can be d	States. Comple unlicated if additi	te if the orga onal space is	Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, than \$5.000. Part II can be duplicated if additional space is needed.	Percenter P	Page 2 Form 990,
~	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			SOUTH AMERICA	CONSERVATION	9,397.	WIRE			
(2)			south Asia	CONSERVATION	9, 385.	WIRE			
(3)			SOUTH ASIA	CONSERVATION	9,130.	WIRE			
(4)			SOUTH ASIA	CONSERVATION	8,997.	WIRE			
(5)			south America	CONSERVATION	8,875.	WIRE			
(9)			south America	CONSERVATION	8,846.	WIRE			
(2)			SOUTH ASIA	CONSERVATION	8,799.	WIRE			
(8)			SOUTH ASIA	CONSERVATION	8,784.	WIRE			
(6)			CENTRAL AMERICA & CARRIB	CONSERVATION	8,607.	WIRE			
(10)			SOUTH ASIA	CONSERVATION	8,600.	WIRE			
(11)			NORTH AMERICA	CONSERVATION	8,432.	WIRE			
(12)			SOUTH AMERICA	CONSERVATION	8,234.	WIRE			
(13)			SOUTH ASIA	CONSERVATION	8,056.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

WIRE

8,003.

CONSERVATION

SOUTH AMERICA

(14)

(15)

(16)

WIRE

7,987.

CONSERVATION

SUB-SAHARAN AFRICA

WIRE

7,969.

CONSERVATION

SOUTH AMERICA

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities с

INC	
FUND	
WILDLIFE	
WORLD	

Schedule F (F	Schedule F (Form 990) 2019							, 1 )	Page 2
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organizatior Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed	ance to Organiza acipient who recei	Entities e than \$5	at the United	<b>Outside the United States.</b> Complete if the organization answered "Yes" on Form 990, 000. Part II can be duplicated if additional space is needed.	te if the orgε mal space is	anization answerd needed.	ed "Yes" on	Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(1)			SOUTH ASIA	CONSERVATION	7,892.	WIRE			
(2)			SOUTH AMERICA	CONSERVATION	7,790.	WIRE			
(3)			SOUTH ASIA	CONSERVATION	7,659.	WIRE			
(4)			SOUTH AMERICA	CONSERVATION	7,464.	WIRE			
(5)			NORTH AMERICA	CONSERVATION	7,350.	WIRE			
(9)			EAST ASIA & PACIFIC	CONSERVATION	7,202.	WIRE			
(2)			SOUTH ASIA	CONSERVATION	7,163.	WIRE			
(8)			SOUTH AMERICA	CONSERVATION	6,992.	WIRE			
(6)			NORTH AMERICA	CONSERVATION	6,859.	WIRE			
(10)			EUROPE	CONSERVATION	6,829.	WIRE			
(11)			SOUTH AMERICA	CONSERVATION	6,317.	WIRE			
(12)			EUROPE	CONSERVATION	6,201.	WIRE			
(13)			NORTH AMERICA	CONSERVATION	6,179.	WIRE			
(14)			SUB-SAHARAN AFRICA	CONSERVATION	6,000.	WIRE			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt ▲ 2

WIRE

5,248.

CONSERVATION

SOUTH AMERICA

5,884. WIRE

CONSERVATION

SOUTH AMERICA

(15)

(16)

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities с

INC
FUND
WILDLIFE
WORLD

Schedule F (Form 990) 2019

Schedule F (F	schedule F (Form 990) 2019									Ч	Page 2
Part II	art II Grants and Other Assistance to Organizations	ance to Organizat	tions or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,	de the United	d States. Co	omplete if	the organiza	tion answe	red "Yes"	on Form (	<u>990,</u>
	Part IV, line 15, for any recipient who received mor	cipient who receiv	/ed more than \$5,000. Part II can be duplicated if additional space is needed.	art II can be c	duplicated if	additional s	space is need	led.			
.											

	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	scipient who recei	ved more than \$5,000. P	art II can be d	luplicated if additic	onal space is	needed.		
<del>~</del>	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA & PACIFIC		5,187.	WIRE			
(2)			EUROPE		5,085.	WIRE			
(3)									
(4)									
(5)									
(9)									
6									
(8)									
(6)									
(10)									
(11)									
(12)									
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(15)									
(16)									
2 by	Enter total number of recipient organizations listed above that are recognized as charities by the fi by the Ikb the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	anizations listed abo or counsel has prov	ve that are recognized as c ided a section 501(c)(3) ec	charities by the quivalency lette	are recognized as charities by the foreign country, recognized as tax-exempt section 501(c)(3) equivalency letter ►	ognized as tax	r-exempt	5	258.

3 Enter total number of other organizations or entities

INC	
FUND	2019
WILDLIFE	Schedule F (Form 990) 2019
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**Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

	ninonial space is needed.						
(a) Type of grant or assistance	(b) Region	<b>(c)</b> Number of recipients	<b>(d)</b> Amount of cash grant	<b>(e)</b> Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
<ol> <li>CONSERVATION</li> </ol>	CENT. AMERICA/CARIBBEAN	104.	58,426.	WIRE			
2) CONSERVATION	EAST ASIA/PACIFIC	ي. م	25,945.	WIRE			
		4					

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<ol> <li>CONSERVATION</li> </ol>	CENT. AMERICA/CARIBBEAN	104.	58,426.	WIRE		
(2) CONSERVATION	EAST ASIA/PACIFIC	م	25,945.	WIRE		
(3) CONSERVATION	EUROPE/ICELAND/GREENLAND	18.	121,580.	WIRE		
(4) CONSERVATION	NORTH AMERICA	74.	119,930.	WIRE		
(5) CONSERVATION	SOUTH AMERICA	399.	993,804.	WIRE		
(6) CONSERVATION	SOUTH ASIA	82.	96,759.	WIRE		
(7) CONSERVATION	SUB-SAHARAN AFRICA	14.	59,358.	WIRE		
(8)						
(6)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
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(18)						
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WORLD WILDLIFE FUND INC

Schedu	ıle F (Form 990) 2019			Page
Part	V 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)	X	Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)		Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)		Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>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)</i>		Yes	X 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)	X	Yes	No No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)		Yes	X No

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Schedule F (Form 990) 2019

### 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).

## FORM 990, SCHEDULE F, PART I, LINE 1:

PROCEDURES FOR MONITORING GRANT FUNDS OUTSIDE THE UNITED STATES: ALL GRANT AGREEMENT DOCUMENTS HAVE PAYMENT PROVISIONS AND TERMS AND CONDITIONS FOR USE OF FUNDS. PAYMENTS ARE MADE IN INCREMENTAL AMOUNTS FOR GRANTS ABOVE \$25,000 BASED ON THE CASH FLOW NEEDS AND PROGRESS OF THE RECIPIENT. AFTER THE INITIAL PAYMENT, ALL SUBSEQUENT PAYMENTS ARE MADE AFTER RECEIPT, REVIEW, AND ACCEPTANCE OF SIGNED FINANCIAL AND TECHNICAL REPORTS FROM THE GRANTEES. FINAL PAYMENTS ARE MADE UPON RECEIPT AND ACCEPTANCE OF FINAL DELIVERABLES.

ALL AGREEMENTS, RECEIPT OF DELIVERABLES, AND PAYMENTS ARE TRACKED USING A DATABASE DESIGNED FOR TRACKING OF GRANTS. ALL PAYMENTS ARE DOCUMENTED IN THE ACCOUNTING SYSTEM. GRANTEE CAN ONLY RECEIVE MORE FUNDING THAN WAS IN THE ORIGINAL AGREEMENT BUDGET THROUGH THE ISSUANCE OF AN AMENDMENT DOCUMENT.

FOR ALL GOVERNMENT FUNDED AGREEMENTS, AN EXPANDED FINANCIAL REPORT IS REQUIRED FROM THE GRANTEES. THIS INCLUDES MONITORING ADHERENCE TO DONOR REQUIREMENTS WITH EMPHASIS ON ADHERENCE TO PROCUREMENT REQUIREMENTS; USE OF EQUIPMENT, TIMESHEETS, AND SEPARATE BANK ACCOUNTS IF REQUIRED. FOR HIGH RISK GRANTEES, ADDITIONAL MONITORING REQUIREMENTS ARE EMPLOYED AS APPLICABLE, SUCH AS COPIES OF GENERAL LEDGERS, RECEIPTS, BANK RECONCILIATIONS, AND SITE VISITS.

GRANTEES RECEIVING MORE THAN \$100,000 ARE REQUIRED TO SUBMIT AN ANNUAL

Page 5

Schedule F (Form 990) 2019

# 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).

(OUTSIDE) AUDIT. GRANTEES RECEIVING GOVERNMENT FUNDING ARE SUBJECT TO ADDITIONAL DONOR REQUIREMENTS, INCLUDING PROJECT AUDITS OR EXPENSE VERIFICATIONS. IF GRANTEES ARE SUBJECT TO AN OMB A-133 AUDIT, WWF SEEKS CONFIRMATION OF AN UNQUALIFIED AUDIT OPINION. IF THERE ARE FINDINGS, A CORRECTIVE ACTION PLAN IS DEVELOPED IN COLLABORATION WITH THE GRANTEE AND MONITORED FOR IMPROVEMENT; DOCUMENTATION IS REQUIRED AS NEEDED.

FORM 990, SCHEDULE F, PART I, II AND III:

THE ACCRUAL METHOD OF ACCOUNTING IS USED TO ACCOUNT FOR FOREIGN

EXPENDITURES AND GRANTS.

SCHEDULE G		Information Re			-	-	OMB No. 1545-0047
(Form 990 or 990-EZ)		he organization answer organization entered n				9, or if the	2019
Department of the Treasury				0 or Form 99			Open to Public
Internal Revenue Service	► G	o to www.irs.gov/Form	990 for inst	ructions and	the latest information.		Inspection
Name of the organization	TIND THO					Employer identificati 52-1693387	on number
WORLD WILDLIFE H	g Activities. Comp	lete if the organi	zation ar	newered "	Ves" on Form 90		7
	EZ filers are not re	•					1.
	the organization rais	sed funds through a	any of the	following	activities. Check a	all that apply.	
a X Mail solicitat	tions	е			non-government g		
	email solicitations	f			government grants	S	
c X Phone solici		g	X Spe	cial fundra	ising events		
2a Did the organiza	tion have a written o						
	s listed in Form 990 10 highest paid indiv						X Yes No
	least \$5,000 by the		(iunuraise	ers) pursua	int to agreements	under which the	
·	, . , <b>,</b>	5					
<b>(i)</b> Name and addr or entity (fu		(ii) Activity	custody o	ndraiser have or control of butions?	<b>(iv)</b> Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	<b>(vi)</b> Amount paid to (or retained by) organization
			Yes	No			
1 ATTACHMENT 1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total		I	1		1,621,689.	2 727 550	1,105,861.
	which the organizat	tion is registered o	or licensed	d to solicit			
registration or lic	ensing.	-					
AL, AK, AZ, AR, CA, C IA, KS, KY, LA, ME, M				NM.NY N	C.ND.OH.		
OK, OR, PA, RI, SC, S				101-1 / 10 I / 10	c, ND, OII,		
			,				

# Schedule G (Form 990 or 990-EZ) 2019

Page 2

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported Part II more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events PANDA PADDLE VIRTUAL 5K (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 210,447. 114,568. 1 Gross receipts 325,015. 2 Less: Contributions 191,481. 93,323. 284,804. 3 Gross income (line 1 minus 18,966. 21,245. 40,211. 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 1,009. 1,009. 7 Food and beverages 2,020. 2,020. 8 Entertainment 4,583. 4,583. 9 Other direct expenses 117,204. 1,391. 118,595. 10 Direct expense summary. Add lines 4 through 9 in column (d) 126,207. 11 Net income summary. Subtract line 10 from line 3, column (d) -85,996. Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue Direct Expenses 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d)

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

**9** Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states?
b If "No," explain:

10a	Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?	Yes	No
b	If "Yes." explain:		

Schedule G (Form 990 or 990-EZ) 2019

WORLD WILDLIFE FUND INC
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	WORLD WILDLIFE FOND INC	JZ I0	55507	
Sched	ule G (Form 990 or 990-EZ) 2019			Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other enti			
	formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
a L	The organization's facility			<u>%</u>
b	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events book			%
14	records:	is and		
	Name ▶			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives	gaming		
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the		
	amount of gaming revenue retained by the third party $\blacktriangleright$			
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ►			
16	Gaming manager information:			
10				
	Name ▶			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:	aaada t	•	
а	Is the organization required under state law to make charitable distributions from the gaming pro- retain the state gaming license?			No
b	retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt orga	anization	s	
	or spent in the organization's own exempt activities during the tax year 🕨 \$			
Par				
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additic (see instructions).	nal info	rmation	
SCH	EDULE G, PART I, LINE 2 - FUNDRAISING EXPENSES:			
5011	EVOLE S, FART F, ETHE Z - FONDATOING EATENDED.			
INC	OME REFLECTED ON THIS SCHEDULE ONLY SHOWS THE INCOME RELATED TO THIS			
YEA	R AND NOT THE ONGOING MULTI-YEAR INCOME GENERATED BY THE CAMPAIGN. AS			
A R	ESULT, THIS SCHEDULE SIGNIFICANTLY UNDERSTATES THE INCOME GENERATED			
FRO	M THE EXPENSES SHOWN. COMPANIES DESCRIBED ABOVE AS 'FUNDRAISING			
COU	NSEL' PROVIDE ADVICE AND CONSULTING REGARDING SOLICITATION OF			
CON	TRIBUTIONS BUT DO NOT ENGAGE IN DIRECT SOLICITATIONS ON WWF'S BEHALF.			

Schedule G (Form 990 or 990-EZ) 2019

WORLD WILDLIFE FU	JND INC
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	WORLD WIDDIFF FORD INC	JZ 10J	5507	
-	ule G (Form 990 or 990-EZ) 2019			Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		r	
	formed to administer charitable gaming?	•••••	Yes	No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books	s and		
	records:			
	Name ▶			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives g	aming		
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ a	and the		
	amount of gaming revenue retained by the third party ► \$			
с	If "Yes," enter name and address of the third party:			
•				
	Name ▶			
	Address <b>b</b>			
	Address ►			
16	Gaming manager information:			
	Name 🕨			
	Name			
	Gaming manager compensation ► \$			
	Description of services provided			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
1 <i>1</i>	Is the organization required under state law to make charitable distributions from the gaming pro	coode to		
a			Yes	
L	retain the state gaming license?	nizationa		No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$	nizations		
Dor		(iii) and	(v) and	
Part				
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additior (see instructions).		nation	
70				
AS :	SUCH, IT IS NOT POSSIBLE TO REPORT RECEIPTS RESULTING DIRECTLY FROM			
	GEDUTCES OF SUCH COMPANIES, MILOSE ADVISE AND CONNERS TO OPEN ADDITED			
тны	SERVICES OF SUCH COMPANIES, WHOSE ADVICE AND COUNSEL IS OFTEN APPLIED			
<b>п</b> о -				
.T.O 7	A BROAD VARIETY OF FUNDRAISING ACTIVITIES.			

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	r C Z J
WTT.DT.TFF	
MORT.D	

ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
PMX	FUNDRAISING CONNERI.	~		010-494	010 767-
ONE WORLD TRADE CENTER, 63RD FLOOR NEW YORK NY 10007		1		•	
DILOGUEDIRECT, INC	FACE-TO- FACE	>	1 5.10.4 10.4	0 01F 100	987 987
1090 VERMONT AVE NW #950 WASHINGTON DC 20005		<		· ) • • • • • • • • • • • • • • • • • •	.000
GIVEBRIDGE, INC.	FUNDRAISING CONNERI.	~	7 0 08 F	187-150	-114_165
525 W MONROE STREET, STE. 900 CHICAGO IL 60661		1		• • • • • • • • • • • • • • • • • • • •	•

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ATTACHMENT 1 PAGE 64

SCHEDULEI		Grants and	nd Other /	Other Assistance to Organizations,	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	<b>9</b>	vernme	nts, and lı	Governments, and Individuals in the United States	n the United	d States		2019
	Comp	olete if the o	rganization ans ► A	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	orm 990, Part IV,	line 21 or 22.		Open to Public
Department of the Treasury Internal Revenue Service		► Go to		www.irs.gov/Form990 for the latest information.	atest information			Inspection
Name of the organization							Employer identification number	ion number
WORLD WILDLIFE	FUND INC						52-1693387	37
Part I General Ir	General Information on Grants and Assistance	d Assistanc	e					
1 Does the organiz	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ubstantiate tl	ne amount of th	e grants or assista	nce, the grantees	' eligibility for the grants	s or assistance, and	
	the selection criteria used to award the grants or assistance?	s or assistan	ce?				•	X Yes No
SSC	IV the organization's proceed		nitoring the use	or grant lunds in the	e United States.	والمتعمد والملفان ولمواد		
Part II Grants an Part IV, Iin	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	omestic UI nat received	<b>ganizations a</b> l d more than \$5	,000. Part II can t	<b>ernments.</b> Com oe duplicated if a	IPIETE IT THE ORGANIZE additional space is n	ation answered " eeded.	es" on Form 990,
<b>1 (a)</b> Name and or §	<b>1 (a)</b> Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) COOPERATIVE FOR ASSIST. & RELIEF 151 ELLIS ST NE ATLANTA, GA 30303	SSIST. & RELIEF EVERYWHERE TLANTA, GA 30303	13-1965039	501 (C) (3)	784,464.				CONSERVATION
13	NSTITUTE (WRI)							
10 G ST NE, 800 Wi	ST NE, 800 WASHINGTON, DC 20002	52-1257057	501 (C) (3)	355,000.				CONSERVATION
(3) ROSEBUD ECONOMIC DE	(3) ROSEBUD ECONOMIC DEVELOPMENT CORPORATION DO DOY 236 MISSION ON 57555	46-0454387	501 (2) (3)	000 020				NOTTERUSION
				.000				NOT TWATERNOO
(4) FLORIDA INTERNATIONAL UNIVERSITY	ONAL UNIVERSITY							
TWATH IS HIS WS UDIT	ТАМТ, F.L. 33199	9 T 9 / / T N - C 9	10) TOC	. 400,002				CONSERVATION
			0	C U U T T				
• ATND 0046	UK, MS 4C6 FAIRFAX, VA ZZU3U	4020280-4C	(S) (D) The	• 8CT /TCT				CONSERVATION
(0) GLUBAL WILLLIFF CONSERVATION DO DOY 100 ANSTIN TV 78767	UNSERVATION TV 78767	76-7887967	(C) (J) [U]					NOTTANIO
(7) STANFORD UNIVERSITY	TT 10101			· · · · · · · · · · · · · · · · · · ·				
340 PANAMA STREET STANFORD,	STANFORD, CA 94305	94-1156365	501 (C) (3)	132,787.				CONSERVATION
(8) NONPROFIT ENTERPRISE &	ISE & SELF-SUSTAINABILITY							
5917 JORDAN AVE EL CERRITO,	L CERRITO, CA 94530	52-2018791	501 (C) (3)	113,779.				CONSERVATION
(6) REGENTS OF THE UN:	REGENTS OF THE UNIVERSITY OF MINNESOTA							
200 OAK ST SE MIN	SE MINNEAPOLIS, MN 55455	20-5248591	STATE OF MN	106,823.				CONSERVATION
(10) BIGELOW LABORATORY	BIGELOW LABORATORY FOR OCEAN SCIENCES							
60 BIGELOW DR EAST BOOTHBAY,	T BOOTHBAY, ME 04544	01-6006001	501 (C) (3)	89,946.				CONSERVATION
(11) CDP NORTH AMERICA,	, INC.							
127 WEST 26TH ST NEW YORK, NY	NEW YORK, NY 10001	36-4709977	501 (C) (3)	85,000.				CONSERVATION
(12) PACIFIC INSTITUTE FOR STUDIES	FOR STUDIES IN DEVELOPMEN							
654 13TH ST OAKLAND, CA 94612	ND, CA 94612	94-3050434	501 (C) (3)	75,000.				CONSERVATION
2 Enter total number	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government	organizations lis	sted in the line 1 tat	ole			
For Paperwork Reductic	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ons for Form	990.	•			S	Schedule I (Form 990) (2019)

SCHEDULE I (Form 990) Gom	Grants and overnment	nd Other A nts, and Ir ganization ans	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	o Organiza the Unitec orm 990, Part IV,	tions, I States <sup>line 21 or 22.</sup>		омв No. 1545-0047 20 <b>19</b>
Department of the Treasury Internal Revenue Service	► Go to		Attach to Form 990. www.irs.gov/Form990 for the latest information.	atest information			Open to Fublic Inspection
Name of the organization						Employer identification number	on number
S						52-169338'	7
Part General Information on Grants and Assistance	nd Assistanc	Ð					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	substantiate th	e amount of the	e grants or assistar	ice, the grantees'	eligibility for the grants	or assistance, and $\lceil$	24  
the selection criteria used to award the grants or assistance? <b>2</b> Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	its or assistanc edures for mor	e? iitoring the use	of grant funds in the				168
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes"	<b>Domestic Or</b>	ganizations ar	Id Domestic Gov	ernments. Com	plete if the organize	ation answered "Ye	es" on Form 990,
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	that received	more than \$5,	,000. Part II can b	e duplicated if a	idditional space is n	eeded.	
<b>1</b> (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MAINE AQUACULTURE INNOVATION CENTER, INC.							
193 CLARKS COVER RD WALPOLE, ME 04573	01-0467869	501 (C) (3)	65,000.				CONSERVATION
(2) WOODROW WILSON INTERNATIONAL CENTER FOR SCH							
RONALD REAGAN BUILDING WASHINGTON, DC 20004	52-1067541	501 (C) (3)	62,664.				CONSERVATION
(3) RANCHER STEWARDSHIP ALLIANCE, INC							
PO BOX 716 MALTA, MT 59538	20-8422515	501 (C) (3)	51,500.				CONSERVATION
(4) FORT PECK COMMUNITY COLLEGE							
605 INDIAN AVE POPLAR, MT 59255	81-0374399	501 (C) (3)	46,503.				CONSERVATION
(5) GWINNETT CLEAN & BEAUTIFUL							
446 W CROGAN ST LAWRENCEVILLE, GA 30046	26-2969476	501 (C) (3)	45,000.				CONSERVATION
(6) OREGON GREEN SCHOOLS ASSOCIATION							
P.O. BOX 323 CORVALLIS, OR 97339	93-1230794	501 (C) (3)	42,350.				CONSERVATION
(7) REFED INC.							
27-01 QUEENS PLAZA N L.I. CITY, NY 11101	83-1579781	501 (C) (3)	40,000.				CONSERVATION
(8) WILDLIFE ECOLOGY INSTITUTE							
PO BOX 4725 HELENA, MT 59604	81-0723892	501 (C) (3)	39,871.				CONSERVATION
(9) THE OCEAN CONSERVANCY							
2029 K. STREET NW, 600 WASHINGTON, DC 20006	23-7245152	501 (C) (3)	38,828.				CONSERVATION
(10) CALYPSO FARM AND ECOLOGY CENTER							
PO BOX 106 ESTER, AK 99725	92-0169368	501 (C) (3)	33,952.				CONSERVATION
(11) AANIIIH NAKODA COLLEGE							
PO BOX 159 HARLEM, MT 59526	81-0420980	501 (C) (3)	30,668.				CONSERVATION
(12) WORKING DOGS FOR CONSERVATION FOUNDATION							
WD4C 10971 RUSTIC ROAD MISSOULA, MT 59802	20-2708654	501 (C) (3)	28,781.				CONSERVATION
	government o	organizations lis	ted in the line 1 tab	le		▲ 	
3 Enter total number of other organizations listed in the line 1	sted in the line	1 table	•				
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	tions tor Form a	90.				SCII	Schedule I (Form 990) (2019)

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SCHEDULE I (Form 990)	Gran Goverr <sup>Complete if</sup>	Grants and overnment: plete if the orga	d Other A ts, and In mization ansv	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22	o Organiza the United orm 990, Part IV,	tions, 1 States <sup>line 21 or 22.</sup>		омв No. 1545-0047 20 <b>19</b>
Department of the Treasury Internal Revenue Service		► Go to	At View.irs.gov/i	Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	atest information			open to Fublic Inspection
Name of the organization WORLD WILDLIFE FUND INC							Employer identification number 52-1693387	on number
General Ir	ants and Assi	stance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	rds to substan the grants or as	tiate the sistance	amount of the	grants or assistar	sistance, the grantees	eligibility for the grants	or assistance, and	X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	s procedures f	or monit	toring the use c	of grant funds in the	· .			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ice to Domes	<b>tic Org</b> teived r	anizations an nore than \$5,0	d Domestic Gov 000. Part II can b	ernments. Com	plete if the organiza idditional space is ne	ition answered "Y seded.	es" on Form 990,
<b>1 (a)</b> Name and address of organization or government	(q)	(p) EIN	(c) IRC section (if applicable)	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF HAWAII								
2440 CAMPUS RD, BOX 368 HONOLULU, HI	96822	99-6000354	501 (C) (3)	27,453.				CONSERVATION
(2) AMERICAN PRAIRIE RESERVE								
7 EAST BEALL ST. #100 BOZEMAN, MT 59715		81-0541893	501 (C) (3)	25,000.				CONSERVATION
625 W WASHINGTON AVE MADISON, WI 53703		47-1196006	501 (C) (3)	25,000.				CONSERVATION
(4) THE YIELD LAB INSTITUTE								
1100 CORP. SQR DR, 227 ST. LOUIS, MO	63132	82-2282693	501 (C) (3)	20,000.				CONSERVATION
(5) NATIONAL WILDLIFE FEDERATION			-					
240 NORTH HIGGINS		53-0204616	501 (C) (3)	15,000.				CONSERVATION
(6) PETROLEUM COUNTY CONSERVATION DISTRICT								
PO BOX 118 WINNETT, MT 59087	81-03	81-0349546	501 (C) (3)	15,000.				CONSERVATION
STITUTE								
105 VILLAGE PL, BOX 1829 DILLON, CO	80435 84-14	84-1435420	501 (C) (3)	14,863.				CONSERVATION
'H DAKOTA STATE UNIVERSIT								
BOX 2202 SAD 200 BROOKINGS, SD 57007	95-16	95-1657183	501 (C) (3)	13,667.				CONSERVATION
(9) INTERAMERICAN TROPICAL TUNA CO	C3 02037 16-60	1 122000327	501 (2) (3)	6 F 0 C F				NOTERNICESNOO
			2					
431 W. 7TH AVENUE, 101 ANCHORAGE, AK 99501		13-1624102	501 (C) (3)	10,720.				CONSERVATION
(11) BOARD OF REGENTS, UNIVERSITY OF NEBRASKA								
2504 9TH AVE. KEARNEY, NE 68849	47-00	47-0049123	501 (C) (3)	10,460.				CONSERVATION
(12) ALASKA NANNUT CO-MANAGEMENT COUNCIL								
PO BOX 2027 NOME, AK 99762	84-22	84-2270999	501 (C) (3)	10,000.				CONSERVATION
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(3) and goverr	ment or	rganizations list بوماری	ed in the line 1 tab	le .			
ے ا	Instructions for	Form 99	0.				Sch	Schedule I (Form 990) (2019)

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SCHEDULEI		Grants and	nd Other /	Other Assistance to Organizations,	o Organiza	itions,		OMB No. 1545-0047
(Form 990)	õ	vernme	nts, and li	Governments, and Individuals in the United States	n the United	d States		
	Com	olete if the o	rganization ans	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury Intemal Revenue Service		ĕ G	► A to www.irs.gov	► Attach to Form 990. ■ Go to www.irs.gov/Form990 for the latest information.	atest information			Open to Fublic Inspection
Name of the organization							Employer identification number	tion number
WORLD WILDLIFE F	FUND INC						52-1693387	87
Part I General Inf	General Information on Grants and Assistance	d Assistanc	e					
1 Does the organize	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ubstantiate th	he amount of th	e grants or assistal	nce, the grantees	' eligibility for the grants	or assistance, and	
	the selection criteria used to award the grants or assistance?	s or assistan	ce?	at a start finado in the	Ctotoo		· · · · · · · · · · · · · · · · · · ·	X Yes No
2						aloto if the errori		Voo" on Form 000
Part IV, line	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered if each feet of for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	omestic Ur nat received	t more than \$5	,000. Part II can t	ernmenus. ບວກ pe duplicated if a	ipiete il trie organiză additional space is n	allon answered eeded.	tes on Form 990,
<b>1 (a)</b> Name and . or gc	1 (a) Name and address of organization or government	(p) Ein	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CA PELAGIC FISHERIES ASSOCIATION	ES ASSOCIATION							
PO BOX 601124 SAN DIEGO, CA 92160	DIEGO, CA 92160	47-5069538	501 (C) (3)	10,000.				CONSERVATION
(2) COOK INLETKEEPER	COOK INLETKEEPER 3734 ben mattreps tane homee ak 99603	02-0156450	501 (C) (3)					NOTATION
			2					NOT TUMEONOO
(3) SOUTH DAKUTA AGKICULTURAL LAND TRUST 116 N. EUCLID AVE. PIERRE, SD 57501	ULTURAL LAND TRUST PIERRE, SD 57501	84-3127026	501 (C) (3)	10,000.				CONSERVATION
(4) USDA APHIS WILDLIFE SERVICES	E SERVICES							
PO BOX 1938 BILLINGS, MT	GS, MT 59103	41-0696271	501 (C) (3)	9,500.				CONSERVATION
(5) ALASKA CONSERVATION	CONSERVATION FOUNDATION							
1227 W. 9TH AVENUE,	, 300 ANCHORAGE, AK 99501	92-0061466	501 (C) (3)	5,050.				CONSERVATION
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
2 Enter total numbe	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	aovernment	organizations lis	sted in the line 1 tak				41.
	Enter total number of other organizations listed in the line 1	ed in the line	e 1 table	-				
For Paperwork Reductior	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ons for Form	.066				ŭ	Schedule I (Form 990) (2019)
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INC	
FUND	2019)
WILDLIFE	ule I (Form 990) (
WORLD	Schedu

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

	-					
	(a) Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 CONSEI	CONSERVATION	67.	203,764.			
2						
e						
4						
5						
9						
2						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.	nformation re	quired in Part I, I	line 2, Part III, c	olumn (b); and any ot:	her additional

PART I, LINE 2:

SEE SCHEDULE F, PART V FOR DESCRIPTION OF PROCEDURE FOR MONITORING USE OF

GRANT FUNDS.

SCH	EDULE J	Compen	sation Information	C	MB No.	1545-0	047		
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest					୬ <b>ଲ 1 0</b>		
Compensated E ► Complete if the organization answered		mpensated Employees on answered "Yes" on Form 990. Part IV. line :	23.	ZU	13				
	Department of the Treasury Attach to Form 990.				Open to	o Puk ectio			
	Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.								
	0	E FUND INC		52-169338		•			
Part		is Regarding Compensation		02 100000					
T ure						Yes	No		
1a			ovided any of the following to or for a pers provide any relevant information regarding						
	X First-cla	ss or charter travel	Housing allowance or residence for	personal use					
	Travel fo	or companions	Payments for business use of perso	nal residence					
	X       Tax indemnification and gross-up payments       Health or social club dues or initiation fees								
	Discretionary spending account Personal services (such as maid, chauffeur, chef)								
b	or reimburse	ement or provision of all of the ex	ne organization follow a written policy re openses described above? If "No," com	plete Part III to	1b	x			
2	Did the org	anization require substantiation prior	to reimbursing or allowing expenses	incurred by all					
-	•		D/Executive Director, regarding the items	•					
					2	Х			
3			on used to establish the compensation of						
	organization's	CEO/Executive Director. Check all the	at apply. Do not check any boxes for metho e CEO/Executive Director, but explain in P	ods used by a					
		nsation committee	Written employment contract						
		dent compensation consultant	X Compensation survey or study						
	X Form 99	90 of other organizations	X Approval by the board or compensa	ation committee					
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment?								
а			-		4a		X		
b					4b 4c		X		
С	<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						X		
	If "Yes" to an	y of lines 4a-c, list the persons and pr	rovide the applicable amounts for each if	em in Part III.					
	Only costion	E01(a)(2) = E01(a)(4) and $E01(a)(20)$ as	ragnizations must complete lines 5.0						
5			rganizations must complete lines 5-9. ion A, line 1a, did the organization pa						
5	•	n contingent on the revenues of:	ion A, inte Ta, did the organization pa	ly of accide any					
а	•						X		
b	Any related organization?						X		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any								
	-	n contingent on the net earnings of:			-		v		
a h					6a 6b		X X		
b	b Any related organization?								
7	For persons	listed on Form 990, Part VII, Sectio	on A, line 1a, did the organization prov				v		
8			escribe in Part III paid or accrued pursuant to a contract th		7		X		
υ	-	-	Regulations section 53.4958-4(a)(3)?	-					
		-	regulations section 55.4956-4(a)(5)?		8		X		
9			low the rebuttable presumption proced						
-					9				

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

INC	
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Page 2

# Schedule J (Form 990) 2019

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

For each individual whose compensation must be reported on 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 aren't 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.

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
CARTER ROBERTS	Ξ	799,303.	206,250.	3,612.	43,108.	41,076.	1,093,349.	0.
PRESIDENT & CEO	1	.0	.0	.0	.0	.0	.0	0.
MARCIA MARSH	Ξ	214,740.	.0	59,429.	19,282.	332.	293,783.	0.
<b>2</b> CHIEF OPR OFCR PART YEAR	1	.0	.0	.0	0	.0	.0	.0
MARGARET ACKERLEY	Ξ	401,007.	50,000.	2,647.	43,077.	35,851.	532,582.	0.
$3^{ ext{SVP}}$ & general counsel	<b>(ii)</b>	.0	.0	.0	.0	.0	.0	0.
JULIE MILLER	Ξ	340,569.	15,000.	5,041.	24,738.	32,051.	417,399.	.0
4 SVP DEVELOPMENT	<b>(ii)</b>	.0	.0	.0	.0	.0	.0	0.
LEROY WADE	Ξ	186,302.	5,000.	9,396.	17,497.	27,523.	245,718.	0.
5 CONTROLLER	(ii)	.0	.0	• 0	.0	• 0	.0	.0
MIKE PEJCIC	Ξ	295,043.	15,600.	.996.	7,011.	34,625.	353,275.	0.
6 GCHIEF FINANCIAL OFFICER	1	.0	.0	.0	0	.0	.0	.0
MARTHA PIPER	Ξ	321,144.	15,531.	1,658.	.0	15,362.	353,695.	0.
$_{7}^{\text{CHIEF}}$ opr ofcr part year	<b>(ii)</b>	.0	.0	.0	.0	.0	.0	0.
TERENCE MACKO	Ξ	344,657.	15,000.	3,273.	24,736.	13,145.	400,811.	0.
8 <sup>SVP</sup> MARKETING AND COMM.	(ii)	0	0.	.0	.0	.0	0.	0.
NIKHIL SEKHRAN	Ξ	353,740.	50,702.	9,013.	8,400.	25,133.	446,988.	0.
9 <sup>CHIEF</sup> CONVERVATION OFFICER	(ii)	0.	0.	0.	0.	.0	0.	0.
SHEILA BONINI	(i)	321,908.	10,000.	3,064.	24,646.	26,154.	385,772.	0.
10 <sup>SVP</sup> PRIVATE SECTOR ENGAGEMENT	(ii)	0	0.	.0	.0	.0	0.	0.
JASON CLAY	Ξ	367,290.	10,000.	10,545.	24,877.	34,108.	446,820.	0.
11 <sup>SVP</sup> MARKETS & FOOD	(ii)	0	0.	.0	.0	.0	0.	0.
AMY GOLDEN	Ξ	259,701.	16,600.	2,487.	24,028.	34,968.	337,784.	0.
12 <sup>VP</sup> STRATEGIC SERVICES	(ii)	.0	0.	.0	.0	.0	0.	0.
GINETTE HEMLEY	(i)	320,048.	25,000.	11,470.	24,646.	23, 509.	404,673.	0.
13 <sup>SVP</sup> WILDLIFE CONSERVATION	(ii)	0.	0.	0.	0.	.0	0.	0.
DAVID MCCAULEY	Ξ	273,098.	5,000.	7,524.	24,028.	3,531.	313,181.	0.
14 <sup>SVP</sup> POLICY & GOVT AFFAIRS	(ii)	0.	0.	0.	.0	.0	0.	0.
	Ξ							
15	(ii)							
	Ξ							
16	(ii)							

INC
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WORLD

Schedule J (Form 990) 2019

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. Part III Supplemental Information

PART I, LINE 1A:

NET \$5,035) AND SEKHRAN RECEVIED GROSS UP FIRST BOX CHECKED IS FOR CHARTER TRAVEL. THE OTHER BOX IS CHECKED FOR UP GIFT CARD OF \$478). \$6,692.19, GROSS-UP PAYMENTS: MARGARET ACKERLEY RECEIVED A GROSS GROSS UP FOR TAX PROTECTION \$26.36(GROSS \$504.36, NET \$500), AND NIKHIL \$1,657.19(GROSS SERVICE FEES \$215.31(GROSS \$715.31, NET FOR TAXABLE TAX

PART I, LINE 3:

THE INDEPENDENT COMPENSATION EXPERT ADVISES THE BASED ON PERFORMANCE AND IS DETERMINED BY COMMITTEE OF ROLE, BASED ON EXHAUSTIVE ANALYSIS OF COMPENSATION AT ORGANIZATIONS OF THE BOARD IN CONSULTATION WITH AN INDEPENDENT AND HIGHLY-EXPERIENCED SCOPE AND REACH. WWF MAKES COMPENSATION DETERMINATIONS ы О THE COMMITTEE ON WHAT IS REASONABLE COMPENSATION FOR THE DEMANDS OUTSIDE COMPENSATION EXPERT. WITHIN THESE GUIDEPOSTS S H SIMILAR SIZE, COMPENSATION

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

20**19**Open to Public
Inspection

Name of the organization

# Employer identification number 52–1693387

	The second second	D	4
WORLD	WILDLIFE	FUND	INC

		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		351.	4,512,559.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified 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							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶()							
26	Other ►()							
27	Other ▶()							
28	Other ►()							
29	Number of Forms 8283 received	by the org	anization during the tax y	ear for contributions for				
	which the organization completed F	orm 8283,	Part IV, Donee Acknowledg	jement	29			
							Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I, line	s 1 through			
	28, that it must hold for at least the	nree years f	rom the date of the initial	contribution, and which is	sn't required			
	to be used for exempt purposes for	the entire h	olding period?			30a		X
b	If "Yes," describe the arrangement i	n Part II.						
31	Does the organization have a	•						
	contributions?					31	Х	
32a	Does the organization hire or use	•	•					
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an describe in Part II.	amount in c	column (c) for a type of pro	perty for which column (a)	) is checked,			

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

**Part II 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.

SCHEDULE M, PART I, COLUMN (B):

REPRESENTS NUMBER OF CONTRIBUTIONS.

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

Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

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

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



Internal Revenue Service Name of the organization

Employer identification number

WORLD WILDLIFE FUND INC

52-1693387

FORM 990, PART I, LINE 1 AND PART III, LINE 1: WWF HAS WORKED SINCE 1961 TO PROTECT THE FUTURE OF NATURE. WWF'S MISSION IS TO CONSERVE NATURE AND REDUCE THE MOST PRESSING THREATS TO THE DIVERSITY OF LIFE ON EARTH. THE WWF NETWORK, OF WHICH WWF-US IS PART, IS ONE OF THE WORLD'S LEADING CONSERVATION ORGANIZATIONS, WORKING IN OVER 100 COUNTRIES, WITH THE SUPPORT OF MILLIONS OF MEMBERS WORLDWIDE. WWF IS DEDICATED TO DELIVERING SCIENCE-BASED SOLUTIONS TO PRESERVE THE DIVERSITY AND ABUNDANCE OF LIFE ON EARTH, HALT THE DEGRADATION OF THE ENVIRONMENT, AND COMBAT CLIMATE CHANGE.

WWF FOCUSES ITS WORK IN SIX KEY AREAS:

\*CONSERVE THE WORLD'S MOST IMPORTANT FORESTS TO SUSTAIN NATURE'S DIVERSITY, BENEFIT OUR CLIMATE, AND SUPPORT HUMAN WELL-BEING \*SUSTAIN MARINE LIFE AND FUNCTIONING OCEAN ECOSYSTEMS THAT SUPPORT RICH BIODIVERSITY, FOOD SECURITY, AND SUSTAINABLE LIVELIHOODS \*IMPROVE AND MAINTAIN THE HEALTH OF THE WORLD'S MAJOR FRESHWATER BASINS \*ENSURE THE WORLD'S MOST ICONIC SPECIES, INCLUDING POLAR BEARS, BISON, TIGERS, RHINOS, AND ELEPHANTS, ARE SECURED AND RECOVERING IN THE WILD \*DRIVE SUSTAINABLE FOOD SYSTEMS TO CONSERVE NATURE AND FEED HUMANITY \*CREATE A CLIMATE-RESILIENT AND ZERO-CARBON WORLD POWERED BY RENEWABLE ENERGY

WWF WORKS IN PARTNERSHIP WITH COMMUNITIES, INDIVIDUALS, GOVERNMENTS, BUSINESSES, AND FOUNDATIONS TO CONSERVE MANY OF THE WORLD'S MOST ECOLOGICALLY IMPORTANT REGIONS. TOGETHER, WE ARE:

\*PROTECTING AND RESTORING SPECIES AND THEIR HABITATS WITH BOTH WELL

Schedule O (Form 990 or 990-EZ) 2019	Page 2
Name of the organization	Employer identification number
WORLD WILDLIFE FUND INC	52-1693387

PROVEN AND INNOVATIVE TECHNOLOGIES, AND SOCIAL AND ECOLOGICAL SCIENCE METHODS \*STRENGTHENING LOCAL COMMUNITIES' ABILITY TO CONSERVE THE NATURAL RESOURCES THEY DEPEND UPON \*TRANSFORMING SPECIFIC COMMODITY MARKETS TO REDUCE THE IMPACT OF THEIR PRODUCTION AND CONSUMPTION ON NATURAL SYSTEMS \*MOBILIZING HUNDREDS OF MILLIONS OF PEOPLE TO SUPPORT CONSERVATION

FORM 990, PART III, LINE 4A-D, PROGRAM SERVICES: LINE 4A, INTERNATIONAL COUNTRY PROGRAMS:

FROM PERU'S RAINFORESTS AND THE MOUNTAINS OF BHUTAN TO NAMIBIA'S COMMUNAL CONSERVANCIES, THE WWF NETWORK BRINGS ITS SCIENCE-BASED AND RESULTS ORIENTED APPROACH TO ENVIRONMENTAL CHALLENGES IN 100 COUNTRIES. WWF SUPPORTS THE CREATION OF RESOURCE-BASED ECONOMIC OPPORTUNITIES AND LIVELIHOODS FOR COMMUNITIES IN SOME OF THE WORLD'S MOST REMOTE LOCATIONS. WWF-US SPECIFICALLY MANAGES COUNTRY-OFFICE OPERATIONS THROUGHOUT LATIN AMERICA, AS WELL AS IN BHUTAN, NAMIBIA, AND NEPAL - DIRECTLY SUPPORTING CONSERVATION EFFORTS IN SOME OF THE MOST ECOLOGICALLY DIVERSE PLACES ON EARTH.

LINE 4B, GLOBAL CONSERVATION:

WHETHER IN ALASKA'S BRISTOL BAY; MONTANA'S GREAT PLAINS; THE RAINFORESTS OF BRAZIL, PERU, COLOMBIA, AND BOLIVIA; OR THE MOUNTAINS OF NEPAL AND BHUTAN, WWF PARTNERS WITH LOCAL COMMUNITIES AND OTHER GROUPS TO FIND

Schedule O (Form 990 or 990-EZ) 2019	Page 2
Name of the organization	Employer identification number
WORLD WILDLIFE FUND INC	52-1693387

ACTIONS TO PROTECT FRESHWATER RESOURCES FROM CONTAMINATION AND DEPLETION, REDUCE OVERFISHING TO ENSURE RELIABLE FOOD SOURCES, REDUCE CONFLICTS BETWEEN LOCAL PEOPLE AND WILDLIFE, EMPLOY ENERGY SOLUTIONS THAT GENERATE FEWER GREENHOUSE GAS EMISSIONS THAN THE CURRENT ENERGY PRODUCTION SYSTEM, AND ENACT FOREST MANAGEMENT APPROACHES THAT REGENERATE OR RESTORE CRITICAL HABITATS FOR WILDLIFE AND A RANGE OF FOREST-BASED PRODUCTS FOR PEOPLE.

LINE 4C, PUBLIC EDUCATION:

WITH ONE MILLION MEMBERS IN THE UNITED STATES AND MORE THAN FIVE MILLION SUPPORTERS GLOBALLY, THE WWF NETWORK, OF WHICH WWF-US IS A PART, IS WORKING TO MOBILIZE HUNDREDS OF MILLIONS OF PEOPLE TO SUPPORT CONSERVATION. WWF SHARES INFORMATION WITH THE AMERICAN PUBLIC ON NATURE'S VALUE AND THE IMPORTANCE OF CONSERVATION THROUGH A VARIETY OF CHANNELS, FROM OUR WILDCLASSROOMS EDUCATIONAL CURRICULUM, OUR SIGNATURE PUBLICATION WORLD WILDLIFE MAGAZINE, OUR PUBLIC SERVICE ANNOUNCEMENTS, OUR WEBSITE AND ANNUAL INTERNATIONAL EVENTS SUCH AS EARTH HOUR.

LINE 4D, OTHER PROGRAM SERVICES:

PUBLIC AFFAIRS: AT WWF, WE BELIEVE WE CAN FOSTER A SAFER, HEALTHIER AND MORE RESILIENT FUTURE FOR PEOPLE AND NATURE. WE HELP INDIVIDUAL CITIZENS AND SOME OF THE WORLD'S LARGEST COMPANIES RETHINK THE WAY THEY PRODUCE AND CONSUME ENERGY, FOOD, AND WATER. WWF PROVIDES DECISIONMAKERS WITH THE

Schedule O (Form 990 or 990-EZ) 2019		Page <b>2</b>
Name of the organization	Employer identification number	
WORLD WILDLIFE FUND INC	52-1693387	

RESULTS OF FIELD STUDIES DESCRIBING THE BIOLOGICAL RICHNESS OF SOME OF THE WORLD'S MOST PRODUCTIVE REGIONS, RESEARCH INTO THE LOSS OR DEGRADATION OF KEY ECOLOGICAL SYSTEMS SUCH AS THE ARCTIC, TROPICAL RAINFORESTS, FISHERIES, CORAL REEFS, RIVER SYSTEMS AND WETLANDS AND SOLUTIONS BASED ON TECHNOLOGY APPLICATIONS, POLICY INCENTIVES, AND ACTIONS THAT INDIVIDUAL CITIZENS CAN TAKE TO PROTECT OUR PLANET. (EXPENSES \$30,147,576 INCLUDING GRANTS OF \$3,751,982) (REVENUE \$0)

MARKET TRANSFORMATION: WWF PARTNERS WITH CORPORATIONS, GOVERNMENT AGENCIES, LOCAL COMMUNITIES, NGOS, UNIVERSITIES AND RESEARCH INSTITUTES TO REDUCE THE IMPACT OF THE PRODUCTION AND TRADE OF COMMODITIES THAT MOST AFFECT OUR CONSERVATION PRIORITIES. OUR GOAL IS TO MEASURABLY REDUCE THE MOST SIGNIFICANT IMPACTS OF INDIVIDUAL ACTORS AS WELL AS ENTIRE INDUSTRIES.

(EXPENSES \$20,512,603 INCLUDING GRANTS OF \$3,746,215) (REVENUE \$0)

FORM 990, PART V, LINE 3B, FORM 990-T FILING: DUE TO DIFFERING FISCAL YEARS OF INVESTMENT HOLDINGS IN PASS-THROUGH ENTITIES THAT INCLUDE UBIT REPORTED ON WWF'S FORM 990-T, THERE ARE DELAYS IN RECEIVING THE NECESSARY FORMS K-1 FOR THE TAX PERIOD. THE FORM 990-T IS FILED AT A LATER DATE TO ENSURE THE MOST CURRENT AND ACCURATE INFORMATION IS INCLUDED. IT IS FILED WITHIN THE SIX-MONTH EXTENSION ALLOWED, NO LATER THAN MAY 15, 2021.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES: BELIZE, BHUTAN, BOLIVIA, CHILE, COLOMBIA, COSTA RICA, ECUADOR,

Employer identification number 52-1693387

GUATEMALA, GUYANA, HONDURAS, MEXICO, NAMIBIA, NEPAL, PANAMA, PARAGUAY, PERU, SURINAME

FORM 990, PART VI, SECTION A, LINE 4: ON OCTOBER 29, 2019, WORLD WILDLIFE FUND, INC. FILED A RESTATED CERTIFICATE OF INCORPORATION WITH THE STATE OF DELAWARE.

FORM 990, PART VI, SECTION B, LINE 11B:

WWF'S FINANCE DEPARTMENT GATHERS INFORMATION FROM VARIOUS DEPARTMENTS WITHIN THE ORGANIZATION AND PREPARES THE DRAFT 990 WITH THE ASSISTANCE OF OUR EXTERNAL AUDITORS. THE DRAFT IS REVIEWED BY THE CEO AND CHIEF OPERATIONS OFFICER. THE CHIEF FINANCIAL OFFICER REVIEWS THE 990 WITH THE CHAIR OF THE BOARD'S AUDIT COMMITTEE, AFTER WHICH, AND PRIOR TO FILING, THE 990 IS MADE AVAILABLE TO OUR FULL BOARD OF DIRECTORS FOR REVIEW.

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FORM 990, PART VI, SECTION B, LINE 12C:
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EACH DIRECTOR AND STAFF MEMBER IS PROVIDED WITH A COPY OF WWF'S CONFLICT OF INTEREST POLICY AT THE START OF THEIR ASSOCIATION WITH WWF AND ANNUALLY THEREAFTER, AND SIGNS AN ANNUAL ACKNOWLEDGEMENT OF THE POLICY, WITH DISCLOSURE OF ANY POTENTIAL CONFLICTS OF INTEREST. WWF'S CONFLICT OF INTEREST POLICY IS ALSO INCLUDED IN THE WWF BOARD HANDBOOK AND IN BOARD AND STAFF ORIENTATION MATERIALS; AVAILABLE TO ALL STAFF ON WWF'S INTRANET SITE; AND FEATURED AT PERIODIC STAFF TRAININGS. IN ADDITION TO THE ANNUAL ACKNOWLEDGEMENT AND DISCLOSURE, THE POLICY PROVIDES THAT ALL DIRECTORS AND STAFF MUST DISCLOSE POTENTIAL CONFLICTS OF INTEREST AT THE EARLIEST POSSIBLE JUNCTURE AND BEFORE THE ORGANIZATION TAKES ACTION RELATING TO

Schedule O (Form 990 or 990-EZ) 2019		Page <b>2</b>
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ANY ISSUE IN WHICH THERE IS A POTENTIAL CONFLICT. POTENTIAL CONFLICTS INVOLVING DIRECTORS ARE RAISED WITH THE CHAIRMAN OF THE BOARD, AND THE BOARD (OR EXECUTIVE COMMITTEE ACTING IN ITS STEAD) REVIEWS THE FACTS OF EACH SITUATION AND MAKES AN INDEPENDENT DETERMINATION OF WHAT ACTION IS IN WWF'S BEST INTERESTS, I.E., IF A POTENTIAL CONFLICT EXISTS, WHETHER IT CAN BE FULLY AND SATISFACTORILY ADDRESSED, OR WHETHER THE TRANSACTION MUST BE ABANDONED. THE BOARD MEMBER WITH THE POTENTIAL CONFLICT IS NOT PRESENT DURING DISCUSSION AND TAKES NO PART IN DECISIONS RELATING TO THE MATTER. POTENTIAL CONFLICTS INVOLVING STAFF MEMBERS ARE RAISED WITH WWF'S PRESIDENT, WHO REVIEWS THE FACTS OF EACH SITUATION AND DETERMINES, IF A POTENTIAL CONFLICT EXISTS, WHETHER IT CAN BE FULLY AND SATISFACTORILY ADDRESSED, OR WHETHER THE TRANSACTION MUST BE ABANDONED.

## FORM 990, PART VI, SECTION B, LINE 15:

PRIOR TO ANY INCREASES IN SALARY OR PAYMENTS OF ADDITIONAL COMPENSATION (SUCH AS BONUSES) TO A "DISQUALIFIED PERSON", THE EXECUTIVE COMMITTEE OF THE WWF BOARD OF DIRECTORS, AS ADVISED BY ITS COMPENSATION SUBCOMMITTEE, REVIEWS THE PERFORMANCE OF THAT INDIVIDUAL AND THE RELEVANT MARKET DATA FOR COMPENSATION OF THE POSITION. THE INTERESTED INDIVIDUAL IS NOT PRESENT AND TAKES NO PART IN THE DISCUSSION. WWF CLOSELY OBSERVES THE IRS' "INTERMEDIATE SANCTIONS" PROCESS IN CONDUCTING THE REVIEW AND OBTAINS AN ASSESSMENT AS TO REASONABLENESS FROM AN EXTERNAL COMPENSATION PROFESSIONAL SERVICES FIRM. ALL BOARD MEMBERS ARE INVITED TO PARTICIPATE IN THE EXECUTIVE COMMITTEE'S REVIEW AND ARE APPRISED OF OUTCOMES.

## FORM 990, PART VI, LINE 17 - STATES: AL,AK,AZ,AR,CA,CO,CT,DE, DC,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,

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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

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE ON ITS OWN WEBSITE AND UPON REQUEST.

FORM 990, PART XI, LINE 9-OTHER CHANGES IN NET ASSETS OR FUND BAL:GAIN ON DEBT SWAP(\$2,206,226)LOSS ON EXCHANGE RATE DIFFERENCE(170,767)CANCELED GRANTS728,295TOTAL OTHER CHANGES IN NET ASSETS(\$1,648,699)

FORM 990, PART XII, LINE 2C - OVERSIGHT OF AUDIT: THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS.

FORM 990, FY20 RESULTS, PART III IN 2020, WWF MADE VALUABLE STRIDES IN ADDRESSING THE CONSERVATION CHALLENGES OF THE PLANET. AMONG MANY ACHIEVEMENTS, WE NOTE THESE:

MOBILIZING THE PUBLIC TO PREVENT FUTURE PANDEMICS: AS THE COVID-19 PANDEMIC BEGAN TO IMPACT THE US THIS PAST MARCH, IT QUICKLY REVEALED THE PROFOUND CONNECTION BETWEEN HUMANITY'S BROKEN RELATIONSHIP WITH NATURE AND THE SPREAD OF EMERGING INFECTIOUS DISEASES. IN RESPONSE, WWF'S GLOBAL SCIENCE TEAM COMPILED AND AUTHORED A RAPID REVIEW, INTERNAL SCIENCE BRIEF: BEYOND BOUNDARIES: INSIGHTS INTO EMERGING ZOONOTIC DISEASES,

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NATURE AND HUMAN WELL-BEING. INFORMATION IN THIS INTERNAL BRIEF WAS SHARED WITH KEY STAKEHOLDERS AND TRUSTED PARTNERS IN AN EFFORT TO CO-DEVELOP INTERVENTIONS THAT DECREASE THE RISK OF ZOONOSES. BASED ON THIS BRIEF, WWF SOON LAUNCHED A PUBLIC FACING REPORT: COVID-19: URGENT CALL TO PROTECT PEOPLE AND NATURE WHICH EXPLAINED THAT THE KEY DRIVERS FOR THE EMERGENCE OF ZOONOTIC DISEASES ARE LAND-USE CHANGE, EXPANSION AND THE INTENSIFICATION OF AGRICULTURE AND ANIMAL PRODUCTION, AND THE CONSUMPTION OF HIGH-RISK WILDLIFE. WWF FURTHERMORE PAIRED THIS SCIENTIFIC EXPERTISE WITH OUR COMMUNICATION AND ADVOCACY CAPACITIES TO LAUNCH A NEW CAMPAIGN: FOR NATURE, FOR US. AT THE HEART OF THE CAMPAIGN LIES A SIMPLE CALL TO ACTION: TO PREVENT THE NEXT PANDEMIC, WE MUST CHANGE HOW WE ARE TRANSPORTING, TRADING AND CONSUMING WILD ANIMALS, HOW WE ARE PRODUCING FOOD, AND HOW WE ARE USING LAND. TO FURTHER THAT GOAL, WWF COORDINATED MORE THAN 100 SCIENTISTS AND CONSERVATION LEADERS FROM 25 COUNTRIES TO CALL ON GOVERNMENTS FROM ACROSS THE GLOBE TO ADDRESS HIGH-RISK WILDLIFE TRADE TO REDUCE THE CHANCE OF ANOTHER OUTBREAK; BROUGHT TOGETHER U.S. SENATORS FROM BOTH PARTIES TO CALL FOR U.S. GOVERNMENT ACTION; AND MOBILIZED NEARLY 33,000 OF OUR SUPPORTERS TO URGE CONGRESS AND THE STATE DEPARTMENT TO TAKE THE NECESSARY STEPS TO HELP PREVENT FUTURE PANDEMICS. WE ALSO LAUNCHED A NEW WEB PAGE WITH EDUCATIONAL CONTENT TO HELP THE PUBLIC BETTER UNDERSTAND THE WAYS IN WHICH THE DEGRADATION OF NATURE CONTRIBUTES TO DISEASE OUTBREAKS, AND HOW WE CAN REPAIR OUR RELATIONSHIP WITH THE NATURAL WORLD.

IMPLEMENTING NEW SOCIAL AND ENVIRONMENTAL SAFEGUARDS TO DELIVER LASTING

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CONSERVATION GAINS: THROUGHOUT FY2020 THE GLOBAL WWF NETWORK ADOPTED AND BEGAN IMPLEMENTING AN ENHANCED ENVIRONMENTAL AND SOCIAL SAFEGUARDS FRAMEWORK. THIS FRAMEWORK PROVIDES AN INSTITUTIONAL MECHANISM TO MANAGE THE ENVIRONMENTAL AND SOCIAL RISKS OF WWF'S WORK, HELPS DELIVER BETTER CONSERVATION OUTCOMES, AND ENHANCES THE SOCIAL WELL-BEING OF LOCAL COMMUNITIES IN THE PLACES WHERE WWF OPERATES. THE SAFEGUARDS FRAMEWORK SYSTEMATIZES GOOD GOVERNANCE PRACTICES TO ACHIEVE HUMAN RIGHTS, TRANSPARENCY, NONDISCRIMINATION, PUBLIC PARTICIPATION, AND ACCOUNTABILITY, AMONG OTHER GOALS.

FINDING BISON A NEW HOME WITH THE ROSEBUD SIOUX TRIBE: WWF PARTNERED WITH REDCO, THE ECONOMIC ARM OF THE ROSEBUD SIOUX TRIBE; AND ROSEBUD TRIBAL LAND ENTERPRISE; TO SECURE NEARLY 28,000 ACRES FOR WHAT WILL BECOME NORTH AMERICA'S LARGEST NATIVE-OWNED AND MANAGED BISON HERD. THE NEW WOLAKOTA BUFFALO RANGE CAN SUPPORT 1,500 BISON AND IS A HALLMARK OF WWF'S PARTNERSHIP WITH NATIVE NATIONS IN THE NORTHERN GREAT PLAINS, AS WE JOINTLY DEVELOP HEALTHY BISON HERDS FOR CONSERVATION. AND EARLY IN FY21, 100 BISON WERE TRANSFERRED AND RELEASED FROM THE NATIONAL PARK SERVICE TO THE RANGE, MARKING A REUNION WITH THE COMMUNITIES WHO LIVED WITH THEM FOR MILLENNIA IN A SYMBIOTIC RELATIONSHIP. ADDITIONAL BISON WILL BE DELIVERED OVER THE NEXT FIVE YEARS FROM HERDS MANAGED BY THE NATIONAL PARK SERVICE AND THE U.S. FISH AND WILDLIFE SERVICE THROUGH A COMMITMENT BY THE U.S. DEPARTMENT OF THE INTERIOR.

ENGAGING COMPANIES ON THE PLASTIC WASTE CRISIS: PLASTIC WASTE IS CHOKING

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OUR PLANET - POLLUTING THE AIR, WATER, AND SOIL BOTH PEOPLE AND WILDLIFE NEED TO SURVIVE. AND AS THIS CRISIS SPREADS TO EVERY CORNER OF THE GLOBE, WWF IS PARTNERING WITH THE WORLD'S LARGEST COMPANIES TO REDESIGN HOW WE SOURCE, USE AND DISPOSE OF PLASTIC THROUGH OUR RECENTLY LAUNCHED RESOURCE: PLASTIC PROGRAM. WITH THE GOAL OF PREVENTING 50 MILLION TONS OF PLASTIC WASTE BY 2030, RESOURCE: PLASTIC HELPS COMPANIES TAKE DATA-DRIVEN ACTIONS THAT HELP TURN THEIR AMBITIOUS, LARGE-SCALE COMMITMENTS ON PLASTIC INTO MEANINGFUL, MEASURABLE IMPACT. IN JUNE, RESOURCE RELEASED ITS INAUGURAL PROGRESS REPORT, TRANSPARENT 2020, PROVIDING UNPRECEDENTED DATA ABOUT CORPORATE PLASTIC FOOTPRINTS AND IDENTIFYING NEW OPPORTUNITIES FOR COMPANIES TO SCALE IMPACT THROUGH COLLECTIVE ACTION. AMCOR, COLGATE-PALMOLIVE, KIMBERLY-CLARKE JOINED RESOURCE AS NEW COMPANY MEMBERS IN 2020, JOINING PRINCIPAL MEMBERS KEURIG DR PEPPER, MCDONALD'S, PROCTER & GAMBLE, STARBUCKS, AND THE COCA COLA COMPANY.

ADVANCING NEW STANDARDS FOR GLOBAL SEAFOOD TRACEABILITY: AS PART OF AN INDUSTRY FORUM THAT INCLUDES MORE THAN 70 COMPANIES ACROSS THE SEAFOOD SUPPLY CHAIN, WWF RELEASED THE FIRST-EVER GLOBAL STANDARDS FOR TRACKING SEAFOOD PRODUCTS FROM SOURCE TO SALE. SO FAR MORE THAN 40 BRANDS INCLUDING GROCERY CHAIN WHOLE FOODS MARKET-HAVE COMMITTED TO BEGIN IMPLEMENTING THESE OCEAN-SAVING STANDARDS.

SUPPORTING COMMUNITY CONSERVANCIES IN NAMIBIA: IN NAMIBIA, THE COVID-19 PANDEMIC HAD AN ACUTE IMPACT ON BOTH COMMUNITY LIVELIHOODS AND WILDLIFE CONSERVATION EFFORTS. SOON AFTER THE COUNTRY REPORTED ITS FIRST CASE OF Page 2

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THE VIRUS IN MARCH 2020, THE GOVERNMENT DECLARED A STATE OF EMERGENCY. THE NATIONAL LOCKDOWN THAT FOLLOWED BROUGHT TOURISM TO A STANDSTILL-AN INDUSTRY ONCE BOOMING, GENERATING MORE THAN 14% OF NAMIBIA'S GDP, COMPLETELY SHUT DOWN. THOUSANDS WHO ONCE DEPENDED ON THE TOURISM INDUSTRY FOR THEIR LIVELIHOODS LOST THEIR JOBS, AND COMMUNITIES' VULNERABILITY TO HUNGER AND ECONOMIC HARDSHIP INCREASED DRAMATICALLY. THIS SHUTDOWN ALSO MEANT THAT PROTECTION FOR NAMIBIA'S WILDLIFE DECREASED, GIVEN THAT REVENUE FROM TOURISM BUSINESSES HELPED TO COVER THE COSTS OF MANAGING AND PROTECTING WILDLIFE AND HABITATS GOVERNED BY CONSERVANCIES. IN RESPONSE, WWF-NAMIBIA, WHICH IS MANAGED BY WWF-US, COLLABORATED WITH NAMIBIA'S WILDLIFE AND NATIONAL PARKS DIRECTORATE FOR THE MINISTRY OF ENVIRONMENT, FORESTRY AND TOURISM (MEFT) TO DEVELOP THE CONSERVATION RELIEF, RECOVERY AND RESILIENCE FACILITY (CRRRF) FUND. THE FUND IS A COORDINATED NATIONAL EFFORT TO PROVIDE IMMEDIATE FINANCIAL RELIEF TO NAMIBIAN CONSERVANCIES AFFECTED BY COVID-19.

SUPPORTING COMMUNITIES AND WILDLIFE IN RESPONSE TO CLIMATE-DRIVEN WILDFIRES: THROUGHOUT 2019 AND 2020 WILDFIRES SPRANG UP ACROSS THE GLOBE, DEVASTATING PEOPLE AND NATURE ALIKE. TWO OF THE MOST WIDESPREAD FIRE EVENTS OCCURRED IN THE AMAZON RAINFOREST AND IN AUSTRALIA - TWO REGIONS WHERE WWF HAS LONG BEEN ACTIVE IN SUPPORTING COMMUNITIES, ECOSYSTEMS, AND WILDLIFE. IN THE AMAZON, FIRES BURNED ROUGHLY 13.8 MILLION ACRES AND PRODUCED ENOUGH SMOKE TO DARKEN THE SKIES OF SAO PAOLO IN THE MIDDLE OF THE DAY. IN AUSTRALIA, THE BUSHFIRES BURNED ROUGHLY 47 MILLION ACRES, DESTROYING NEARLY 2,700 HOMES AND KILLING 34 PEOPLE; AND TRAGICALLY, AN ESTIMATED 3 BILLION ANIMALS WERE EITHER KILLED OR DISPLACED. IN RESPONSE, WWF-US TOOK ACTION TO SUPPORT THE EMERGENCY FUND FOR AMAZON FIRES AND THE AUSTRALIAN WILDLIFE AND NATURE RECOVERY FUND, RAISING NEARLY \$9 MILLION USD FOR THE TWO FUNDS. THE MONEY RAISED WENT DIRECTLY TO FRONTLINE EFFORTS AIMED AT HELPING PEOPLE AND WILDLIFE RECOVER FROM THE FIRES AND PREVENTING FUTURE FIRE OUTBREAKS.

DRIVING SUBNATIONAL CLIMATE ACTION: IN FY20 WWF-US CONTINUED WORKING WITH BUSINESSES, CITIES, STATES, UNIVERSITIES AND OTHER INSTITUTIONS TO ACCELERATE CLIMATE ACTION AT THE SUBNATIONAL LEVEL. THE GLOBAL MOVEMENT FOR ACTION ON CLIMATE GREW THIS YEAR TO OVER 4,500 SUB-NATIONAL AND NON-STATE ACTORS WITH TWO NEW MULTI-SECTOR COALITIONS JOINING THE ALLIANCES FOR CLIMATE ACTION. VIET NAM AND SOUTH AFRICA JOINED THE GLOBAL NETWORK OF NATIONAL CAMPAIGNS AT THE 2019 UN SECRETARY GENERAL CLIMATE ACTION SUMMIT IN NEW YORK. IN DECEMBER 2019, WE HELPED BRING SOME 70 BUSINESS LEADERS, GOVERNORS, MAYORS, AND OTHERS TO THE COP25 CONFERENCE IN MADRID AS PART OF THE "WE ARE STILL IN" INITIATIVE FOCUSED ON DEMONSTRATING TO THE WORLD THAT THE UNITED STATES REMAINS COMMITTED TO CLIMATE ACTION. WWF-US FURTHERMORE COORDINATED WITH OTHER NGOS TO DEVELOP A NEW "AAA FRAMEWORK"-THE NEW GOLD STANDARD FOR ASSESSING CORPORATE CLIMATE POLICY LEADERSHIP. AND WE WORKED WITH BUSINESSES TO DRIVE NEW COMMITMENTS FOR NATURE-BASED CLIMATE SOLUTIONS, WHICH HARNESS THE POWER OF NATURE TO ABSORB AND STORE CARBON POLLUTION WHILE ALSO ADDRESSING SOME OF OUR MOST PRESSING SOCIETAL CHALLENGES, SUCH AS THREATS TO WATER SECURITY OR THE RISING RISK OF NATURAL DISASTERS.

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FORM 990, PART III, LINE 4D - OTHER	PROGRAM SERVICES		ATTACHMENT 1	
DESCRIPTION		GRANTS	EXPENSES	REVENUE
PUBLIC EDUCATION		0.	35,743,921.	0.
COUNTRY OFFICES		23,683,220.	63,326,348.	0.
	TOTALS	23,683,220.	99,070,269.	0.

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST	PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
PMG, INC. 7240 parkway dr. ste 170 Hanover, Md 21076	PRINT, PRODUCT, MAIL	9,776,662.
DIALOGUEDIRECT, INC. 1100 17TH ST NW B2 WASHINGTON, DC 20036	FUNDRAISING CONSULT	2,032,190.
SISK FULFILLMENT SERVICE INC. 1900 INDUSTRIAL PARK FEDERALSBURG, MD 21632	COMM CONSUTLTING	852,178.
PUBLIC INTEREST COMMUNICATIONS 7700 LEESBURG PIKE FALLS CHURCH, VA 22043	TELEMARKETING SVCS	763,047.
BLACKBAUD PO BOX 930256 ATLANTA, GA 31193	IT SERVICES	696,528.

Name of the organization	Go to www.ir	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.	Form 990. ructions and the la	▲ Attach to Form 990. ▲ Go to <i>www.irs.gov/Form990</i> for instructions and the latest information.			Open to Public Inspection
WORLD WILDLIFE	FUND INC					Employer ide 52-16	Employer identification number 52-1693387
Part I Identifica	Identification of Disregarded Entities. Complete if the	e organization answered "Yes" on Form 990,	ered "Yes" on F	orm 990, Part IV	Part IV, line 33.	-	
z	(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 1250 24 LLC 1250 24TH ST NW	WASHINGTON, DC 2	81-4591595 81-4591595 8EAL	ESTATE	DC	977,164.	2,869,264.	WWF
(2) 1250 24 STREET 1250 24TH ST NW	ET LLC WASHINGTON, DC 3	82-1723387 20037 REAL	ESTATE	DC	5,069,859.	5,898,412.	WWF
(3)							
(4)							
(5)							
(9)							
Part II one or m	Identification of Related Tax-Exempt Organizations. Complete if one or more related tax-exempt organizations during the tax year.	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had he tax year.	anization answe	red "Yes" on Fo	orm 990, Part IV,	line 34, because	e it had
Name	<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)							
(2)							
(3)							
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WORLD WILDLIFE FUND INC

Schedule R (I	Schedule R (Form 990) 2019							L =			Page 2
Part III	deminication or Related Organizations I axable as a Partnership. Complete if the organizations because it had one or more related organizations treated as a partnership during the tax year	more related org	s l axable anizations		<b>Farmersnip.</b> Complete it the organization answered "res" on Form 990, Part IV, line 34, ed as a partnership during the tax year.	the tax year.	n answered Tt		1 990, Part IV,	Ine 34,	
- N	<b>(a)</b> Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	al Share of end-of- year assets	Dispropou allocatio	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)		(k) Percentage ownership
<b>E</b>								Aes No		Yes No	
(2)											
(4)											
(5)											
(9)											
(1)											
Part IV	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization ans line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	ted Organization: d one or more rel	s Taxable ated orga	as a Corporat inizations treat	<b>Corporation or Trust.</b> Complete if the organization answered "Yes" on Form 990, Part IV ons treated as a corporation or trust during the tax year.	mplete if the or on or trust durir	ganization ansv ng the tax year.	/ered "Yes"	on Form 990,	Part IV	
	(a) Name, address, and EIN of related organization	l of related organization		(b) Primary activity	ctivity Legal domicile (state or foreign country)	(d) Direct controlling entity	(C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets		(h) Percentage Section ownership controlled entity?
(1)											Yes No
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	ed in Parts II-IV?				· · · · · · · · · · · · · · · · · · ·			• • • • • • • • • • • • • • • • • • • •										• • • • • • • • • • • • • • • • • • • •						ed relationships and transe	<b>(c)</b> Amount involved						100	901	
	elated organizations list																							nis line, including cover	(b) Transaction type (a-s)								
Note: Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	<b>b</b> Gift, grant, or capital contribution to related organization(s)	<b>c</b> Gift, grant, or capital contribution from related organization(s).	d Loans or loan guarantees to or for related organization(s)	e Loans or loan guarantees by related organization(s)		1 Dividends from related organization(s)	g Sale of assets to related organization(s).	h Purchase of assets from related organization(s).	i Exchange of assets with related organization(s).	j Lease of facilities, equipment, or other assets to related organization(s).		K Lease of facilities, equipment, or other assets from related organization(s)	I Performance of services or membership or fundraising solicitations for related organization(s)	m Performance of services or membership or fundraising solicitations by related organization(s).	<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	o Sharing of paid employees with related organization(s)		p Reimbursement paid to related organization(s) for expenses.	<b>q</b> Reimbursement paid by related organization(s) for expenses	<ul> <li>Other transfer of cash or anonarty to related organization(s)</li> </ul>		2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	(a) Name of related organization	(1)	(2)	(3)	(4)	(5)		JSA	9E1309.1.000

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Schedule

WORLD WILDLIFE FUND INC

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI 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 cross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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Schedule R (Form 990) 2019

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 Part VII
 Supplemental Information

 Provide additional information for responses to questions on Schedule R. See instructions.

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