

Form **990**

**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2010 calendar year, or tax year beginning JUL 1, 2010 and ending JUN 30, 2011**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>		<b>D Employer identification number</b> <b>52-0781390</b>		
	Doing Business As				
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	<b>E Telephone number</b> <b>202-939-3333</b>	
	<b>1400 16TH STREET, NW</b>		<b>120</b>	<b>G Gross receipts \$</b> <b>57,149,463.</b>	
	City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20036-2249</b>		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)		
<b>F Name and address of principal officer: PATRICK BERGIN</b> <b>SAME AS C ABOVE</b>		<b>H(c) Group exemption number</b> ▶			
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
<b>J Website:</b> ▶ <b>WWW.AWF.ORG</b>					
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> <b>1961</b>		
<b>M State of legal domicile:</b> <b>DC</b>					

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>AWF WORKS TO ENSURE THE WILDLIFE AND WILD LANDS OF AFRICA WILL ENDURE FOREVER.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>39</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>38</b>
	<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>40</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 20,418,220.	<b>Current Year</b> 24,614,325.
	<b>9</b> Program service revenue (Part VIII, line 2g)	21,650.	344,557.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	157,759.	599,248.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	672,434.	135,626.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,270,063.	25,693,756.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,748,288.	1,801,482.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,476,055.	7,518,680.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	125,796.	135,175.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>1,977,666.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	11,747,853.	11,042,029.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	21,097,992.	20,497,366.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	172,071.	5,196,390.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 34,951,122.	<b>End of Year</b> 38,605,613.
	<b>21</b> Total liabilities (Part X, line 26)	8,878,871.	6,156,295.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	26,072,251.	32,449,318.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <i>Jeffrey Christfield CFO</i>		Date <b>2/9/12</b>		
	Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>FRANK H. SMITH</b>	Preparer's signature <i>Frank H. Smith</i>	Date <b>02/09/12</b>	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ <b>RAFFA, P.C.</b>	Firm's EIN ▶		Phone no. <b>(202) 822-5000</b>	
Firm's address ▶ <b>1899 L STREET, NW, SUITE 900</b> <b>WASHINGTON, DC 20036</b>					

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**COPY**

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [ ]

1 Briefly describe the organization's mission: THE AFRICAN WILDLIFE FOUNDATION INC., TOGETHER WITH THE PEOPLE OF AFRICA, WORKS TO ENSURE THE WILDLIFE AND WILD LANDS OF AFRICA WILL ENDURE FOREVER.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 16,198,975. including grants of \$ 1,801,482. ) (Revenue \$ 16,419. ) CONSERVATION PROGRAMS: AWF PLAYS A MAJOR ROLE IN ENSURING THE CONTINUED EXISTENCE OF SOME OF AFRICA'S MOST RARE AND TREASURED SPECIES SUCH AS ELEPHANTS, MOUNTAIN GORILLAS, RHINOCEROS, LIONS, AND CHEETAHS. AT THE CORE OF AWF'S WORK IS THE BELIEF THAT INVESTING IN TRAINING AND RESOURCES FOR AFRICAN INDIVIDUALS AND INSTITUTIONS IS CRITICAL TO ACHIEVING CONSERVATION SUCCESS. THIS APPROACH HAS HELPED AWF SIGNIFICANTLY INCREASE SCIENTIFIC UNDERSTANDING OF AFRICA'S ECOSYSTEMS THROUGH RESEARCH AND APPLY THESE FINDINGS TO REAL-LIFE CONSERVATION EFFORTS. AWF CONTINUES TO PIONEER THE USE OF COMMUNITY CONSERVATION ENTERPRISES, PROVIDE CRUCIAL ASSISTANCE TO NATIONAL PARKS AND RESERVES, AND PROMOTE INTERNATIONAL COOPERATION TO PROTECT IMPORTANT SITES AND (SEE CONTINUATION ON SCHEDULE O)

4b (Code: ) (Expenses \$ 1,015,831. including grants of \$ 0. ) (Revenue \$ 344,557. ) EDUCATION AND OUTREACH: AWF BELIEVES THAT A CONTINENT AS UNIQUE AS AFRICA REQUIRES A UNIQUE APPROACH TO CONSERVATION. IT IS SIMPLY NOT ENOUGH TO DEVELOP INITIATIVES TO PROTECT SINGLE SPECIES OR CONSERVE INDIVIDUAL PIECES OF LAND. AWF THEREFORE TAKES A "LANDSCAPE-LEVEL" APPROACH TO ITS CONSERVATION SOLUTIONS INCORPORATING A VARIETY OF EFFORTS INCLUDING CONSERVING LAND, PROTECTING SPECIES, AND EMPOWERING PEOPLE THROUGH ITS UNIQUE AFRICAN HEARTLANDS PROGRAM. THROUGH ITS PROGRAMS, AWF EDUCATES A WIDE VARIETY OF AUDIENCES ABOUT HOW SUSTAINABLE CONSERVATION IN AFRICA MEANS UNDERSTANDING HOW PEOPLE AND WILDLIFE LIVE TOGETHER, AS WELL AS HOW THEY CLASH. AWF ALSO BRINGS TO LIGHT HOW THE WELL BEING OF LOCAL PEOPLE AFFECTS CONSERVATION (SEE CONTINUATION ON SCHEDULE O)

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 17,214,806.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20b detailing various organizational requirements and their status.

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
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	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	X	
a 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

X

Main form area containing questions 1a through 14b with Yes/No columns and input fields for numbers and text.

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

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

**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		
1b Enter the number of voting members included in line 1a, above, who are independent		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **JEFF CHRISFIELD - 202-939-3333**  
**1400 16TH ST. NW, SUITE 120, WASHINGTON, DC 20036-2249**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DENNIS J. KELLER CHAIR	6.00	X		X			0.	0.	0.	
BENJAMIN W. MKAPA VICE CHAIR	3.00	X		X			0.	0.	0.	
SIR KETUMILE MASIRE VICE CHAIR (THRU 11/2010)	4.00	X		X			0.	0.	0.	
MYMA BELO-OSAGIE SECRETARY	2.00	X		X			0.	0.	0.	
ROBERT KING TREASURER	4.00	X		X			0.	0.	0.	
ROBIN BERKELEY TREASURER (THRU 11/2010)	4.00	X		X			0.	0.	0.	
GREG BEHRMAN BOARD MEMBER (THRU 11/2010)	1.00	X					0.	0.	0.	
PAUL CAMPBELL BOARD MEMBER	1.00	X					0.	0.	0.	
PAYSON COLEMAN BOARD MEMBER	3.00	X					0.	0.	0.	
DONALD DIXON BOARD MEMBER (THRU 01/2011)	1.00	X					0.	0.	0.	
LYNN DOLNICK BOARD MEMBER	1.00	X					0.	0.	0.	
LISA FIRESTONE BOARD MEMBER	4.00	X					0.	0.	0.	
ADRIAN GARDINER BOARD MEMBER	1.00	X					0.	0.	0.	
DONALD C. GRAHAM BOARD MEMBER	3.00	X					0.	0.	0.	
LARRY GREEN BOARD MEMBER	1.00	X					0.	0.	0.	
PHILIPP H. GUTSCHE BOARD MEMBER	1.00	X					0.	0.	0.	
HEATHER STURT HAAGA BOARD MEMBER	3.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MONA HAMILTON BOARD MEMBER	3.00	X						0.	0.	0.
CHRISTINE HEMRICK BOARD MEMBER	4.00	X						0.	0.	0.
WILLIAM E. JAMES BOARD MEMBER	4.00	X						0.	0.	0.
ADRIAN JAY BOARD MEMBER	3.00	X						0.	0.	0.
KRISTINA M. JOHNSON BOARD MEMBER	1.00	X						0.	0.	0.
WILLIAM S. KALEMA BOARD MEMBER	1.00	X						0.	0.	0.
WALTER KANSTEINER BOARD MEMBER	2.00	X						0.	0.	0.
RAHIM KHAN BOARD MEMBER	1.00	X						0.	0.	0.
DENISE KOOPMANS BOARD MEMBER	1.00	X						0.	0.	0.
<b>1b Sub-total</b> .....								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								1,308,843.	0.	212,702.
<b>d Total (add lines 1b and 1c)</b> .....								1,308,843.	0.	212,702.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **6**

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

**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.

(A) Name and business address	(B) Description of services	(C) Compensation
PRODUCTION SOLUTIONS, INC. 1953 GALLOWS ROAD, #600, VIENNA, VA 22182	PRINTING AND MAILSHOP	513,987.
WRIGHT TRADING COMPANY P.O. 60688, LIVINGSTONE, ZAMBIA	CONSTRUCTION	217,929.
THE AVALON CONSULTING GROUP, 1150 17TH ST., NW, #200, WASHINGTON, DC 20036	FUND. COUNSEL, PROD. MGMT, & COPYWRITING	166,508.
CONSERVATION CAPITAL CONSULTING, INC., 65 NEW CAVENDISH ST., LONDON, UNITED KINGDOM	DEVELOPMENT & STRATEGIC MANAGEMENT	118,582.
COLUMBIA DIRECT MARKETING CORP 1 S ACTION PLACE, ANNAPOLIS, MD 21401	PRINTING, EDITING, DESIGN, AND MAILSHOP	100,909.

**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 **5**

SEE PART VII, SECTION A CONTINUATION SHEETS



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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SHANA LAURSEN BOARD MEMBER	3.00	X						0.	0.	0.
VICTORIA LESLIE BOARD MEMBER	2.00	X						0.	0.	0.
ANN LUSKEY BOARD MEMBER	4.00	X						0.	0.	0.
JAMES MAKAWA BOARD MEMBER	1.00	X						0.	0.	0.
JIMNAH MBARU BOARD MEMBER	3.00	X						0.	0.	0.
FESTUS G. MOGAE BOARD MEMBER	1.00	X						0.	0.	0.
RAZAN AL MUBARAK BOARD MEMBER	1.00	X						0.	0.	0.
KRISTINA PERSSON BOARD MEMBER	3.00	X						0.	0.	0.
ELIZABETH ROBERTSHAW BOARD MEMBER	3.00	X						0.	0.	0.
TIA N. RODDY BOARD MEMBER (THRU 11/2010)	3.00	X						0.	0.	0.
STUART SCOTT BOARD MEMBER	3.00	X						0.	0.	0.
AGGIE SKIRBALL BOARD MEMBER	4.00	X						0.	0.	0.
DAVID THOMSON BOARD MEMBER (AS OF 11/2010)	3.00	X						0.	0.	0.
VERONICA VAREKOVA BOARD MEMBER	3.00	X						0.	0.	0.
JOHN R. WALTER BOARD MEMBER	3.00	X						0.	0.	0.
RICHARD WEENING BOARD MEMBER	4.00	X						0.	0.	0.
MARIA WILHELM BOARD MEMBER	3.00	X						0.	0.	0.
PATRICK BERGIN CHIEF EXECUTIVE OFFICER	40.00	X		X				233,152.	0.	48,476.
HELEN GICHOHI PRESIDENT	40.00			X				197,321.	0.	26,244.
JOANNA ELLIOT VP OF KNOWLEDGE MANAGEMENT	40.00			X				163,763.	0.	27,376.
Total to Part VII, Section A, line 1c										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (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. Rows include JEFF CHRISFIELD, CRAIG SHOLLEY, CEM KUMRAL, HENDRICK VAN DER LINDE, SNR. DIR., PRGM DESIGN/KNWLDG MGMT, SIMON MUNTHALI, REGIONAL PRGM DIR - SOUTHERN AFRICA, JEF DUPAIN, REG PRGM DIR - WEST & CENTRAL AFRICA. Total to Part VII, Section A, line 1c: 1,308,843. 212,702.

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns .....	1a					
	b Membership dues .....	1b					
	c Fundraising events .....	1c					
	d Related organizations .....	1d					
	e Government grants (contributions)	1e	11509553.				
	f All other contributions, gifts, grants, and similar amounts not included above .....	1f	13104772.				
	g Noncash contributions included in lines 1a-1f: \$		277,792.				
	<b>h Total. Add lines 1a-1f</b> .....		<b>24614325.</b>				
Program Service Revenue	2 a <b>MEETINGS</b>	Business Code	900099	343,833.	343,833.		
	b <b>PROGRAM INCOME</b>		900099	724.	724.		
	c						
	d						
	e						
	f All other program service revenue .....						
	<b>g Total. Add lines 2a-2f</b> .....		<b>344,557.</b>				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) .....			543,101.	16,419.	526,682.	
	4 Income from investment of tax-exempt bond proceeds .....						
	5 Royalties .....			459,818.		459,818.	
	6 a Gross Rents .....	(i) Real	(ii) Personal				
		b Less: rental expenses .....					
		c Rental income or (loss) .....					
		d Net rental income or (loss) .....					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		31494992	16,862.				
		b Less: cost or other basis and sales expenses .....					
		31446228	9,479.				
	c Gain or (loss) .....	48,764.	7,383.				
	d Net gain or (loss) .....			56,147.		56,147.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	a					
		b Less: direct expenses .....	b				
c Net income or (loss) from fundraising events .....							
9 a Gross income from gaming activities. See Part IV, line 19 .....	a						
	b Less: direct expenses .....	b					
	c Net income or (loss) from gaming activities .....						
10 a Gross sales of inventory, less returns and allowances .....	a						
	b Less: cost of goods sold .....	b					
	c Net income or (loss) from sales of inventory .....						
Miscellaneous Revenue		Business Code					
11 a <b>SAFARI INCOME</b>		900099	77,911.		77,911.		
b <b>MAILING LIST RENTAL</b>		900099	36,110.		36,110.		
c <b>OTHER INCOME</b>		900099	10,190.		10,190.		
d All other revenue .....		900099	<448,403.>		<448,403.>		
e <b>Total. Add lines 11a-11d</b> .....			<b>&lt;324,192.&gt;</b>				
<b>12 Total revenue. See instructions.</b> .....			<b>25693756.</b>	<b>360,976.</b>	<b>0.</b>	<b>718,455.</b>	

**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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	133,325.	133,325.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	1,668,157.	1,668,157.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,336,408.	1,062,058.	185,592.	88,758.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,146,581.	3,417,267.	304,735.	424,579.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	329,576.	269,690.	24,917.	34,969.
9 Other employee benefits	1,481,619.	1,227,921.	120,822.	132,876.
10 Payroll taxes	224,496.	184,585.	19,493.	20,418.
11 Fees for services (non-employees):				
a Management				
b Legal	128,092.	116,698.	11,116.	278.
c Accounting	118,775.	78,066.	40,709.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	135,175.			135,175.
f Investment management fees	127,916.		127,916.	
g Other	1,776,789.	1,761,419.	15,370.	
12 Advertising and promotion	69,377.	62,525.	3,689.	3,163.
13 Office expenses	1,396,069.	1,160,368.	162,949.	72,752.
14 Information technology	230,606.	88,404.	94,822.	47,380.
15 Royalties				
16 Occupancy	671,321.	383,774.	287,547.	
17 Travel	1,961,403.	1,849,457.	26,150.	85,796.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,144,682.	701,192.	3,006.	440,484.
20 Interest	97,388.	79,692.	11,382.	6,314.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	377,286.	246,967.	130,319.	
23 Insurance	46,548.	35,445.	11,103.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <b>DIRECT MAILING COSTS</b>	1,022,844.	622,869.	894.	399,081.
b <b>FIELD EQUIPMENT</b>	815,053.	814,239.	814.	
c <b>CONSTRUCTION</b>	708,611.	708,611.	0.	0.
d <b>EXCHANGE RATE FLUC.</b>	246,339.	102,930.	104,482.	38,927.
e <b>TRAINING</b>	99,122.	87,522.	4,495.	7,105.
f All other expenses	3,808.	351,625.	<387,428.>	39,611.
25 Total functional expenses. Add lines 1 through 24f	20,497,366.	17,214,806.	1,304,894.	1,977,666.
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1,148,556.	603,658.	0.	544,898.

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	1,946,613.	<b>1</b>	2,842,811.
	<b>2</b> Savings and temporary cash investments .....	6,755,890.	<b>2</b>	1,653,558.
	<b>3</b> Pledges and grants receivable, net .....	7,289,779.	<b>3</b>	9,676,222.
	<b>4</b> Accounts receivable, net .....	290,907.	<b>4</b>	191,898.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	477,136.	<b>7</b>	455,781.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	274,386.	<b>9</b>	510,560.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 9,328,582.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 887,566.	<b>10c</b>	
	<b>11</b> Investments - publicly traded securities .....	7,832,305.	<b>11</b>	8,441,016.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	8,979,708.	<b>12</b>	13,092,359.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	1,250,204.
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	1,104,398.	<b>15</b>	491,204.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	34,951,122.	<b>16</b>	38,605,613.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	2,231,708.	<b>17</b>	1,735,326.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	3,976,453.	<b>19</b>	2,038,850.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	1,815,638.	<b>23</b>	1,892,680.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	429,929.	<b>24</b>	90,980.
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	425,143.	<b>25</b>	398,459.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	8,878,871.	<b>26</b>	6,156,295.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	16,213,936.	<b>27</b>	24,381,207.
	<b>28</b> Temporarily restricted net assets .....	7,586,000.	<b>28</b>	5,795,796.
	<b>29</b> Permanently restricted net assets .....	2,272,315.	<b>29</b>	2,272,315.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> <b>Total net assets or fund balances</b> .....	26,072,251.	<b>33</b>	32,449,318.	
<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	34,951,122.	<b>34</b>	38,605,613.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	25,693,756.
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,497,366.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,196,390.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	26,072,251.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,180,677.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	32,449,318.

**Part XII Financial Statements and Reporting**

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

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

Form 990 (2010)

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

**2010**

Name of the organization

Employer identification number

**AFRICAN WILDLIFE FOUNDATION, INC.**

**52-0781390**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

<b>Name of organization</b> <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>	<b>Employer identification number</b> <b>52-0781390</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ <u>5,461,564.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ <u>4,157,834.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ <u>2,704,790.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ <u>1,100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ <u>1,057,987.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ <u>818,655.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>	Employer identification number <b>52-0781390</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/> <hr/>	\$ <u>507,935.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  AFRICAN WILDLIFE FOUNDATION, INC.	<b>Employer identification number</b>  52-0781390
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**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization

Employer identification number

**AFRICAN WILDLIFE FOUNDATION, INC.**

**52-0781390**

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) or organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship 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) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship 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) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship 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) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee


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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

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

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

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III - Functionally integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....	11g(i)	
(ii) A family member of a person described in (i) above? .....	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2010

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	18329396.	28016527.	20683717.	20418220.	24614325.	112062185
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	18329396.	28016527.	20683717.	20418220.	24614325.	112062185
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) .....						8950555.
6 <b>Public support.</b> Subtract line 5 from line 4.						103111630

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4 .....	18329396.	28016527.	20683717.	20418220.	24614325.	112062185
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	488,277.	533,807.	270,899.	504,472.	1039029.	2836484.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....		14,777.				14,777.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) .....	365.		11,032.	218,276.	88,101.	317,774.
11 <b>Total support.</b> Add lines 7 through 10						115231220
12 Gross receipts from related activities, etc. (see instructions) .....					12	366,207.
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) .....	14	89.48	%
15 Public support percentage from 2009 Schedule A, Part II, line 14 .....	15	91.52	%
16a <b>33 1/3% support test - 2010.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>		
b <b>33 1/3% support test - 2009.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
17a <b>10% -facts-and-circumstances test - 2010.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
b <b>10% -facts-and-circumstances test - 2009.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2009 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**

**MISCELLANEOUS**

**SAFARI INCOME**

**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

Open to Public Inspection

Name of the organization

**AFRICAN WILDLIFE FOUNDATION, INC.**

Employer identification number

**52-0781390**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	1	
2 Aggregate contributions to (during year)	0.	
3 Aggregate grants from (during year)	0.	
4 Aggregate value at end of year	937,954.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_



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

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

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,423,622.	11,375,778.	12,778,709.		
b Contributions	1,641,519.	859,647.	1,360,424.		
c Net investment earnings, gains, and losses	1,571,398.	188,197.	<2,241,114.>		
d Grants or scholarships					
e Other expenditures for facilities and programs	396,546.		522,241.		
f Administrative expenses					
g End of year balance	15,239,993.	12,423,622.	11,375,778.		

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment  85.09 %
- b Permanent endowment  14.91 %
- c Term endowment  \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	4,083,583.	961,961.		5,045,544.
b Buildings		2,078,041.	27,333.	2,050,708.
c Leasehold improvements		419,529.	95,122.	324,407.
d Equipment		1,041,214.	484,847.	556,367.
e Other		744,254.	280,264.	463,990.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				8,441,016.

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) DEFERRED RENT AND LEASE INCENTIVES	281,222.
(3) ANNUITIES PAYABLE	103,628.
(4) CAPITAL LEASE OBLIGATIONS	13,609.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	398,459.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	25,693,756.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	20,497,366.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	5,196,390.
4	Net unrealized gains (losses) on investments	4	1,180,677.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	1,180,677.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	6,377,067.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	27,366,850.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	1,180,677.
b	Donated services and use of facilities	2b	161,430.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	458,903.
e	Add lines 2a through 2d	2e	1,801,010.
3	Subtract line 2e from line 1	3	25,565,840.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	127,916.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	127,916.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	25,693,756.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	20,989,783.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	161,430.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	458,903.
e	Add lines 2a through 2d	2e	620,333.
3	Subtract line 2e from line 1	3	20,369,450.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	127,916.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	127,916.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	20,497,366.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4: IN THE ABSENCE OF SPECIFIC SPENDING GUIDELINES**

ESTABLISHED BY A DONOR, AWF HAS A POLICY TO SPEND FIVE PERCENT OF THESE ENDOWMENT FUNDS' AVERAGE BEGINNING INVESTED MARKET VALUES FOR THE PRIOR THREE FISCAL YEARS. HOWEVER, A FUND'S SPENDING RATE IS REDUCED OR ELIMINATED IF THE RESULTING INVESTED BALANCE OF THAT FUND WOULD FALL BELOW THE FAIR VALUE OF THE ORIGINAL GIFT(S). IN ESTABLISHING THIS POLICY, AWF CONSIDERED ITS STATED RETURN OBJECTIVE WITH THE INTENT TO, OVER THE LONG TERM, ALLOW ITS ENDOWMENT FUNDS TO GROW AT OR ABOVE THAT OF INFLATION.

**Part XIV** Supplemental Information (continued)

THIS IS CONSISTENT WITH THE ORGANIZATION'S OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT FUNDS' ASSETS HELD IN PERPETUITY OR FOR A SPECIFIED TERM, AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH NEW GIFTS AND INVESTMENT RETURN.

THE BOARD OF TRUSTEES HAS ADOPTED A SPENDING POLICY TO USE OF UP TO SEVEN PERCENT OF THE BEGINNING INVESTED MARKET VALUE OF THE BOARD-DESIGNATED ENDOWMENT IN CURRENT YEAR OPERATIONS, OR A LOWER AMOUNT AS AGREED THROUGH AWF'S ANNUAL BUDGETING PROCESS. THIS SPENDING POLICY TAKES INTO ACCOUNT THE BOARD OF TRUSTEE'S POLICY TO ADD UNRESTRICTED LEGACY GIFTS TO THE BOARD-DESIGNATED ENDOWMENT. THE FUNDS ARE USED TO FURTHER THE IMPACT OF AWF'S CONSERVATION PROGRAMS.

PART X, LINE 2: FOR THE YEAR ENDED JUNE 30, 2011, NO PROVISION FOR INCOME TAXES WAS REQUIRED AS AWF HAD NO NET UNRELATED BUSINESS INCOME AND DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION OR DISCLOSURE IN THESE FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INTERDEPARTMENTAL CHARGES 458,903.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

INTERDEPARTMENTAL CHARGES 458,903.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

**AFRICAN WILDLIFE FOUNDATION, INC.**

**52-0781390**

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
SUB-SAHARAN AFRICA	0	148	EMPLOYEES		3,622,525.
SUB-SAHARAN AFRICA	11	0	MAINTAINING OFFICES		36,933.
SUB-SAHARAN AFRICA	0	0	FUNDRAISING		17,763.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		1,668,157.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CONSERVATION PROGRAMS, EDUCATION AND OUTREACH	7,325,256.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	2	EMPLOYEES		204,858.
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	0	MAINTAINING OFFICES		4,063.
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	POLICY DEVELOPMENT AND ORGANIZATIONAL LEARNING	23,471.
<b>3 a Sub-total</b> .....	12	150			12,903,026.
<b>b Total from continuation sheets to Part I</b> .....	0	0			0.
<b>c Totals (add lines 3a and 3b)</b> .....	12	150			12,903,026.

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

Schedule F (Form 990) 2010

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	SUPPORT INTERNATIONAL CONFERENCE ON BIODIVERSITY, LAND USE, AND CLIMATE	12,276	EFT/CHECK	0		
			EUROPE (INCLUDING ICELAND AND GREENLAND)	IMPROVE CONSERVATION OF LEOPARD AT PRIVATE SECTOR, COMMUNITY AND KRUGER NATIONAL PARK	7,673	EFT/CHECK	0		
			SUB-SAHARAN AFRICA	REDUCTION OF DEFORESTATION, FOREST DEGRADATION AND POVERTY WITH IMPROVED	45,493	EFT/CHECK	0		
			SUB-SAHARAN AFRICA	VGS SALARIES AND UTILITIES	38,046	EFT/CHECK	0		
			SOUTH AMERICA	SUPPORT TO AGRICULTURAL LIVELIHOODS, ADDRESSING FOOD	189,588	EFT/CHECK	0		
			SUB-SAHARAN AFRICA	COMMUNITY DEVELOPMENT SUPPORTED BY ECOTOURISM	38,880	EFT/CHECK	0		
			SUB-SAHARAN AFRICA	TUTION SUPPORT - MWEKA COLLEGE OF WILDLIFE CONSERVATION	28,175	EFT/CHECK	0		
			SUB-SAHARAN AFRICA	SECURING WILDLIFE CORRIDOR IN LAIKIPIA	11,352	EFT/CHECK	0		

2 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 0

3 Enter total number of other organizations or entities 34

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			SUB-SAHARAN AFRICA	TREE DOMESTICATION AND FARMER ENTERPRISE DEVELOPMENT	216,387.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	IMPROVING TRADITIONAL GRAZING MANAGEMENT	39,162.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	CAPACITY BUILDING - FISH FARM MANAGEMENT	8,946.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	IMPROVE WATER SPRINGS AND WATER HARVEST ACTIVITIES	33,378.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	PROTECTED AREA CAPACITY BUILDING AND OPERATIONS SUPPORT	10,779.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	TREE PLANTING/BOUNDARY DEMARCATION	23,090.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	PROTECTED AREA INFRASTRUCTURE AND CAPACITY BUILDING	35,182.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	PROTECT AREA AND SURROUNDING COMMUNITY CAPACITY BUILDING AND GENERAL SUPPORT	66,202.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	PROTECTED AREA AND COMMUNITY SUPPORT	5,806.	EFT/CHECK	0.			

**Part II** Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PROTECTION OF KIMANA WETLANDS	14,558.	EFT/CHECK	0.		
		EAST ASIA AND THE PACIFIC	GAZETEMENT OF IYONDJI COMMUNITY BONOBO RESERVE	33,000.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	BIO-ENTERPRISE SUPPORT	115,831.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	PROTECTED AREA CAPACITY BUILDING AND OPERATIONS SUPPORT	100,020.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	HIV/AIDS INTERVENTIONS SUPPORT	7,250.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	PREVENTING DEFORESTATION THROUGH COMMUNITY OUTREACH AND SUPPORT	31,170.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	AGROFORESTRY CAPACITY BUILDING	16,778.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	CAPACITY SUPPORT TO LOCAL WOMEN'S GROUP	6,346.	EFT/CHECK	0.		
		SUB-SAHARAN AFRICA	WILD DOG CONSERVATION	10,868.	EFT/CHECK	0.		



Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			SUB-SAHARAN AFRICA	PROTECTED AREA AND COMMUNITY SUPPORT	17,429.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	REDUCTION OF DEFORESTATION, FOREST DEGRADATION AND POVERTY WITH IMPROVED	61,312.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	SUPPORT FOR TEACHER TRAINING	10,150.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	HIV/AIDS INTERVENTIONS SUPPORT	23,442.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	CAPACITY BUILDING, COMMUNITY SUPPORT, PROTECTED AREA SUPPORT	29,482.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	LAND CONSERVATION AND RANCHING OPERATIONS	121,051.	EFT/CHECK	0.			
			SUB-SAHARAN AFRICA	HIV/AIDS INTERVENTIONS SUPPORT	47,108.	EFT/CHECK	0.			
			EAST ASIA AND THE PACIFIC	DEVELOPMENT OF COMMUNITY-BASED RESOURCE MONITORING AND MANAGEMENT	33,245.	EFT/CHECK	0.			

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CONSERVATION SCHOLARSHIP AND CAPACITY BUILDING PROGRAM	SUB-SAHARAN AFRICA	30	27,877.	EFT/CHECK	0.		
KAZUNGULA HEARTLAND EASEMENTS FOR EDUCATION	SUB-SAHARAN AFRICA	125	24,530.	EFT/CHECK	0.		
KILIMANJARO HEARTLAND CONSERVATION LAND LEASES	SUB-SAHARAN AFRICA	352	58,840.	EFT/CHECK	0.		
MWEKA WILDLIFE COLLEGE SCHOLARSHIP PROGRAM	SUB-SAHARAN AFRICA	7	12,508.	EFT/CHECK	0.		
SAMBURU HEARTLAND COFFEE FARMER TRAINING PROGRAM	SUB-SAHARAN AFRICA	25	2,705.	EFT/CHECK	0.		
SAMBURU HL EASEMENTS FOR EDUCATION	SUB-SAHARAN AFRICA	25	10,895.	EFT/CHECK	0.		
TANZANIA WOMEN'S GROUP CAPACITY DEVELOPMENT PROGRAM	SUB-SAHARAN AFRICA	25	9,000.	EFT/CHECK	0.		
VOLCANOS NATIONAL PARK CHILDRENS VISITATION PROGRAM	SUB-SAHARAN AFRICA	100	2,602.	EFT/CHECK	0.		
WAGABA CHILDREN SCHOLARSHIP FUND	SUB-SAHARAN AFRICA	5	5,858.	EFT/CHECK	0.		

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* .....  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* .....  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* .....  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* .....  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* .....  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* .....  Yes  No

Schedule F (Form 990) 2010

**Part V Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); 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.

**SCHEDULE F, PART I, LINE 2: AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS.**

**IN SUCH CASES, ONLY KNOWN, VETTED ORGANIZATIONS ARE CHOSEN THAT CAN DEMONSTRATE AN ABILITY TO ACCOMPLISH THE PROGRAM OBJECTIVES.**

**SUB-RECIPIENTS ARE OFTEN INCLUDED BY NAME IN GRANT PROPOSALS.**

**SUB-RECIPIENTS ARE GENERALLY PROVIDED WITH ADVANCES, AND REQUIRED TO REPORT QUARTERLY. BOTH FINANCIAL AND PROGRAMMATIC REPORTS ARE REQUIRED TO BE SUBMITTED TO THE RELATED HL IMPLEMENTATION TEAMS (GENERALLY HL DIRECTOR). THE HEARTLAND FINANCE AND ADMINISTRATION OFFICER REVIEWS SUB-RECIPIENT FINANCIAL REPORTS AND FORWARD TO THE GRANT FINANCIAL MANAGER FOR A FURTHER QUALITY CONTROL. ONLY UPON HER REVIEW ARE FURTHER PAYMENTS OR ADVANCES PROVIDED. GENERALLY, LARGE SUB-RECIPIENTS ARE PAID THROUGH DC, AND THUS RECEIVE THE ADDED SCRUTINY OF THE ACCOUNTING MANAGER, DIRECTOR OF FINANCE, AND/OR CFO PRIOR TO DISTRIBUTION.**

**PART II, COLUMN (D):**

**REGION: SUB-SAHARAN AFRICA**

**(D) PURPOSE OF GRANT: SUPPORT INTERNATIONAL CONFERENCE ON BIODIVERSITY, LAND USE, AND CLIMATE CHANGE**

**REGION: SUB-SAHARAN AFRICA**

**(D) PURPOSE OF GRANT: REDUCTION OF DEFORESTATION, FOREST DEGRADATION AND POVERTY WITH IMPROVED QUALITY OF LIFE**

**REGION: SOUTH AMERICA**

**(D) PURPOSE OF GRANT: SUPPORT TO AGRICULTURAL LIVELIHOODS, ADDRESSING FOOD SECURITY AND DIVERSITY OF CROP PRODUCTION.**

**Part V Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); 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.

**REGION: SUB-SAHARAN AFRICA**

**(D) PURPOSE OF GRANT: REDUCTION OF DEFORESTATION, FOREST DEGRADATION AND POVERTY WITH IMPROVED QUALITY OF LIFE**

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

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

**2010**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open To Public Inspection

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

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
THE AVALON CONSULTING GROUP - P.O. BOX 1144, WEST CHESTER,	MGMT. OF DIRECT MAIL PROGRAM		X	1,379,064.	135,175.	1,243,889.
<b>Total</b>				1,379,064.	135,175.	1,243,889.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.  
AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY  
DC

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

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

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

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

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

**a** Is the organization licensed to operate gaming activities in each of these states?  Yes  No  
**b** If "No," explain: \_\_\_\_\_

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

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

- 11 Does the organization operate gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity operated in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

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

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

\_\_\_\_\_

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:
- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: THE AVALON CONSULTING GROUP

(I) ADDRESS OF FUNDRAISER: P.O. BOX 1144, WEST CHESTER, OH 45069



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

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

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

Name of the organization

**AFRICAN WILDLIFE FOUNDATION, INC.**

Employer identification number  
**52-0781390**

**Part I** General Information on Grants and Assistance

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

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

**Part II** Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶

1 (a) Name and address of organization or government	(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 non-cash assistance	(h) Purpose of grant or assistance
ECOADAPT P.O. BOX 9767 WASHINGTON, DC 20016	26-3303629	501(C)(3)	12,300.	0.			STUDY OF CLIMATE CHANGE IMPACT AND ADAPTATION ON MOUNTAIN GORILLAS.
UNIVERSITY OF MARYLAND 4101 CHESAPEAKE BOULEVARD COLLEGE PARK, MD 20742	52-6002033	501(C)(3)	121,025.	0.			SPATIAL MODELING FOR LANDSCAPE ZONING.

**2** Enter total number of section 501(c)(3) and government organizations ..... **2.**

**3** Enter total number of other organizations ..... **0.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2010)

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

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

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS. IN SUCH CASES, ONLY KNOWN, VETTED ORGANIZATIONS ARE CHOSEN THAT CAN DEMONSTRATE AN ABILITY TO ACCOMPLISH THE PROGRAM OBJECTIVES.

BOTH FINANCIAL AND PROGRAMMATIC REPORTS ARE REQUIRED TO BE SUBMITTED TO THE RELATED HL IMPLEMENTATION TEAMS (GENERALLY HL DIRECTOR). THE HEARTLAND FINANCE AND ADMINISTRATION OFFICER REVIEWS SUB-RECIPIENT FINANCIAL REPORTS AND FORWARD TO THE GRANT FINANCIAL MANAGER FOR A FURTHER QUALITY CONTROL.

ONLY UPON HER REVIEW ARE FURTHER PAYMENTS OR ADVANCES PROVIDED. GENERALLY,

**Part IV** Supplemental Information

LARGE SUB-RECIPIENTS ARE PAID THROUGH DC, AND THUS RECEIVE THE ADDED SCRUTINY OF THE ACCOUNTING MANAGER, DIRECTOR OF FINANCE, AND/OR CFO BEFORE DISTRIBUTION.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2010**

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

Open to Public Inspection

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**AFRICAN WILDLIFE FOUNDATION, INC.**

Employer identification number  
**52-0781390**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** 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.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2010

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

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

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 PATRICK BERGIN	(i) 233,152.	0.	0.	43,479.	4,997.	281,628.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2 HELEN GICHOHI	(i) 197,321.	0.	0.	19,732.	6,512.	223,565.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
3 JOANNA ELLIOT	(i) 163,763.	0.	0.	16,376.	11,000.	191,139.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
4 JEFF CHRISFIELD	(i) 156,853.	0.	0.	15,685.	9,973.	182,511.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
5 CRAIG SHOLLEY	(i) 159,655.	0.	0.	15,966.	4,856.	180,477.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
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**Part III** Supplemental Information

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

**PART I, LINE 4B: AWF CONTRIBUTED \$20,000 TO THE 457(F) PLAN OF PATRICK**

**BERGIN, CHIEF EXECUTIVE OFFICER, FOR THE YEAR ENDED JUNE 30, 2011.**

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**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2010**

Open to Public Inspection

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.**

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

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	X	23	265,993.	FAIR MARKET VALUE
10 Securities - Closely held stock	X	1	11,799.	FAIR MARKET VALUE
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 organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2010)

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

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

**AFRICAN WILDLIFE FOUNDATION, INC.**

Employer identification number

**52-0781390**

**FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:**

**BURKINA FASO, CONGO, DEM REP, KENYA, MAURITIUS,**

**MOZAMBIQUE, SOUTH AFRICA, TANZANIA, UNITED KINGDOM,**

**ZAMBIA, ZIMBABWE**

**FORM 990, PART VI, SECTION B, LINE 11: DATA AND INFORMATION FOR THE 990**

**ARE COMPILED BY THE FINANCE DEPARTMENT AND REVIEWED BY THE CFO. UPON**

**RECEIPT OF THE 990 FORM FROM AWF TAX ACCOUNTANTS, THE COMPLETED RETURN**

**UNDERGOES A SECOND LEVEL OF REVIEW BY THE CFO. CHANGES ARE COMMUNICATED TO**

**THE TAX ACCOUNTANTS AS NECESSARY AND APPROPRIATE. THE FINAL DRAFT IS**

**REVIEWED BY THE CFO AND THE CEO BEFORE BEING PRESENTED TO THE AUDIT**

**COMMITTEE. THEREAFTER, A COPY OF THE RETURN IS PROVIDED TO THE FULL BOARD**

**BEFORE FILING WITH THE INTERNAL REVENUE SERVICE.**

**FORM 990, PART VI, SECTION B, LINE 12C: TRUSTEES AND OFFICERS RECEIVE AND**

**SIGN A CONFLICT OF INTEREST POLICY STATEMENT UPON ELECTION TO THE BOARD OF**

**TRUSTEES, WITH NEW FORMS COMPLETED AT LEAST ANNUALLY. IF A TRUSTEE FEELS**

**SHE/HE MAY HAVE A POTENTIAL CONFLICT OF INTEREST WITH AWF, THESE CONCERNS**

**ARE BROUGHT TO THE ATTENTION OF THE BOARD CHAIR AND/OR AUDIT COMMITTEE OF**

**THE BOARD FOR DELIBERATION.**

**ALL STAFF MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY UPON**

**HIRING AND WITH EACH NEW CONTRACT AMENDMENT. STAFF CONCERNS REGARDING**

**CONFLICTS OF INTEREST ARE BROUGHT TO THE HUMAN RESOURCES DEPARTMENT FOR**

**RESEARCH WITH REVIEW BY THE CHIEF FINANCIAL OFFICER AND OTHER MEMBERS OF**

**EXECUTIVE MANAGEMENT AS NECESSARY.**

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

Schedule O (Form 990 or 990-EZ) (2010)

032211  
01-24-11



Name of the organization

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WITH REGARD TO CONTRACT REVIEW, STAFF THAT REVIEW PURCHASES AND CONTRACTS ARE TRAINED TO QUESTION POTENTIAL CONFLICTS OF INTEREST. LOCAL FINANCE OFFICES REVIEW TRANSACTIONS UP TO \$1,000, WITH ADDITIONAL SCRUTINY GIVEN TO LARGER CONTRACTS. ANY POTENTIAL CONFLICTS OF INTEREST ARE FORWARDED TO THE CFO FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 15: A STUDY OF COMPENSATION FOR OFFICERS AND KEY EMPLOYEES IS CONDUCTED ANNUALLY. FOR ALL OFFICERS AND KEY STAFF LOCATED WITHIN THE UNITED STATES, INFORMATION FROM COMPARABLE ORGANIZATIONS IS COLLECTED THROUGH PUBLICLY AVAILABLE IRS 990 FORMS. FOR KEY STAFF LOCATED OUTSIDE THE UNITED STATES, COMPENSATION STUDIES ARE OBTAINED AS NECESSARY TO PROVIDE COMPARABLE DATA.

COMPENSATION DATA IS SUMMARIZED IN A REPORT AND APPROVED FIRST BY THE BOARD COMPENSATION COMMITTEE, AND THEN BY THE FULL BOARD OF TRUSTEES EACH JANUARY. THE BOARD OF TRUSTEES SETS THE COMPENSATION FOR AWF'S CHIEF EXECUTIVE OFFICER, AND PROVIDES GUIDELINES FOR THE CEO TO SET OTHER EXECUTIVE SALARIES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY  
NC, ND, OH, OR, OK, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: AWF'S GOVERNING DOCUMENTS, POLICIES, FINANCIAL STATEMENTS AND FEDERAL FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST. ADDITIONALLY, COPIES OF THE 990 AND ANNUAL REPORTS ARE MAINTAINED ON THE WEBSITE.

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FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:

1,180,677.

FORM 990, PART III, LINE 4A: POPULATIONS THAT STRETCH ACROSS NATIONAL BOUNDARIES—DEMONSTRATING THAT WILDLIFE AND PEOPLE CAN THRIVE SIDE BY SIDE.

AWF'S WORK CAN BE CATEGORIZED INTO FIVE CORE AREAS: LAND AND HABITAT PROTECTION, CONSERVATION SCIENCE, CONSERVATION ENTERPRISE, EDUCATION AND CAPACITY BUILDING, AND CONSERVATION POLICY. BELOW IS A BRIEF DESCRIPTION OF AWF'S PERSPECTIVE ON EACH CATEGORY AND KEY ACHIEVEMENTS WITHIN THE LAST FISCAL YEAR.

A. LAND AND HABITAT PROTECTION: AWF'S UNIQUE HEARTLAND APPROACH TO CONSERVATION FOCUSES ON IDENTIFYING AFRICA'S GREAT WILD SPACES, PIECING TOGETHER PARKS, PRIVATE LANDS, AND COMMUNITY LANDS, WHICH CAN BE SECURED AS A HOME FOR WILDLIFE. HISTORICALLY, AWF WORKED TO ESTABLISH NATIONAL PARKS AND WILDLIFE RESERVES, AND TO HELP LOCAL PEOPLE ESTABLISH COMMUNITY CONSERVANCIES. AWF IS NOW SUPPORTING THE MANAGEMENT OF PARKS AND EXPLORING NEW PRIVATE LAND CONSERVATION APPROACHES, INCLUDING LIMITED LAND ACQUISITION AND NEW TYPES OF CONSERVATION LEASES, TO PROTECT CRITICAL WILDLIFE HABITAT.

I. AWF BEGAN RESTORING MAU FOREST COMPLEX: LOCATED IN KENYA'S RIFT VALLEY REGION, THE MAU FOREST COMPLEX IS EAST AFRICA'S LARGEST CLOSED-CANOPY FOREST ECOSYSTEM AND KENYA'S LARGEST NATURAL WATER TOWER, STORING RAINWATER DURING WET MONTHS AND RELEASING IT DURING DRY

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PERIODS. MORE THAN 25 PERCENT OF THE MAU FOREST HAS BEEN LOST TO LOGGING AND AGRICULTURE, HOWEVER. AWF LAUNCHED A RESTORATION PROJECT ON THE EASTERN SIDE OF THE MAU FOREST, PLANTING MORE THAN 25,000 TREES. THE PLANTING OF THESE TREES IS THE BEGINNING OF AWF'S LONGER-TERM PLANS TO ADOPT AND REHABILITATE THE ENTIRE ENDERIT BLOCK.

II. AWF LAUNCHED LAND-LEASE PROGRAM IN AMBOSELI REGION: DUE TO POPULATION GROWTH AND CHANGING LIFESTYLES, LAND PARCELS IN THE AMBOSELI WILDLIFE CORRIDOR ARE INCREASINGLY BEING CONVERTED TO AGRICULTURAL PLOTS OR SOLD OFF TO DEVELOPERS. THESE FORCES HAVE LED TO BOTH A RAPID REDUCTION IN WILDLIFE HABITAT AND INCREASED HUMAN-WILDLIFE CONFLICT. THROUGH AN INNOVATIVE LAND-LEASE PROGRAM, AWF NEGOTIATES WITH LOCAL LANDOWNERS TO FORM "LAND-LEASE" PARTNERSHIPS, UNDER WHICH IT PAYS THE LANDOWNERS A FEE FOR EVERY ACRE SET ASIDE FOR CONSERVATION AND SAFEGUARDED AGAINST POACHING, SUBDIVISION, AND OTHER ACTIVITIES THAT DEGRADE HABITAT. AWF ALSO WORKS WITH COMMUNITIES TO EMPLOY LOCAL SCOUTS TO PATROL THE LAND AND UPHOLD LAND-USE RESTRICTIONS.

III. AWF DEVELOPED AND ISSUED GUIDE ON LAND USE: TOGETHER WITH ITS PARTNERS, AWF ISSUED A NEW GUIDE, "SUSTAINING COMMUNITIES, LIVESTOCK AND WILDLIFE: A DECISION SUPPORT TOOL." FEATURING SIX MODULES ON FACING THE CHALLENGES OF LIVELIHOOD CHANGE AND CO-EXISTENCE WITH WILDLIFE, THE GUIDE IS DESIGNED TO HELP COMMUNITIES AND POLICYMAKERS AT LOCAL AND NATIONAL LEVELS MAKE INFORMED CHOICES REGARDING LAND USE, BUSINESS VENTURES, AND PUBLIC POLICY IN PASTORAL AREAS.

B. CONSERVATION SCIENCE: EVEN WHERE LAND AND HABITAT HAVE BEEN SECURED, CERTAIN SPECIES FACE UNIQUE THREATS AND REQUIRE A TARGETED

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CONSERVATION APPROACH. POPULATIONS OF RARE AND ENDANGERED SPECIES, SUCH AS THE RHINOCEROS, GORILLA, AND ALL OF THE GREAT CATS, HAVE BEEN DIMINISHED DUE TO POACHING, DISEASE, AND CONFLICT WITH HUMANS. AWF USES RESEARCH TO CREATE A BASELINE UNDERSTANDING OF THE STATUS OF AN ENDANGERED POPULATION, AND THEN MOVES QUICKLY TO CONSERVATION ACTIONS THAT HELP THESE SPECIES SURVIVE AND THRIVE IN THEIR NATIVE HABITAT.

I. IN CENTRAL AFRICA, AWF SUPPORTED A MOUNTAIN GORILLA CENSUS IN THE VIRUNGA MASSIF: THE CENSUS IS VITALLY IMPORTANT IN UNDERSTANDING THE LONG-TERM VIABILITY OF THE SPECIES. IN PARTNERSHIP WITH THE INTERNATIONAL GORILLA CONSERVATION PROGRAMME (IGCP), A COALITION OF AFRICAN WILDLIFE FOUNDATION, FAUNA & FLORA INTERNATIONAL, AND THE WORLD WIDE FUND FOR NATURE, THE CENSUS ITSELF WAS AN EXERCISE IN COLLABORATION. OVER 1,000 KILOMETERS WERE SYSTEMATICALLY WALKED BY SIX MIXED TEAMS OF 72 PEOPLE FROM DRC, RWANDA, AND UGANDA. TEAMS COVERED THE ENTIRE RANGE AND METICULOUSLY DOCUMENTED FRESH SIGNS OF MOUNTAIN GORILLA GROUPS. GENETIC ANALYSIS OF FECAL SAMPLES COLLECTED WERE ANALYZED TO IDENTIFY AND CORRECT FOR ANY DOUBLE-COUNTING OF INDIVIDUALS OR GROUPS, ENSURING THE MOST ACCURATE ESTIMATE FOR THE POPULATION. AFTERWARD, SAMPLES WERE SENT TO LABS IN EUROPE FOR GENETIC TESTING, AND RESULTS WERE WRITTEN UP IN MULTIPLE REPORTS. THE CENSUS FOUND 480 MOUNTAIN GORILLAS IN THE VIRUNGA MASSIF, BRINGING THE WORLD'S TOTAL MOUNTAIN GORILLA POPULATION UP BY 26 PERCENT.

II. IN EAST AFRICA, AWF CONTINUED RHINO PROJECTS TO SHORE UP AN AT-RISK POPULATION: AWF CONTINUED TO EMPLOY A NUMBER OF METHODS TO COMBAT THE DEVASTATING POACHING THAT HAS BEEN OCCURRING ON THE RHINO POPULATIONS THROUGHOUT AFRICA. THESE METHODS INCLUDE PROVIDING PARAMILITARY AND

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ANTIPOACHING TRAINING FOR COMMUNITY SCOUTS, PROVIDING EQUIPMENT (INCLUDING BINOCULARS, GPS UNITS, AND CAMPING GEAR) TO RANGERS, SUPPORTING A RHINO SANCTUARY IN KENYA'S TSAVO WEST NATIONAL PARK, AND MORE. IN MOSI-OA-TUNYA NATIONAL PARK IN ZAMBIA, AWF HELPED WILDLIFE AUTHORITIES SETTLE FOUR NEW WHITE RHINOS IN THE PARK AFTER ALL BUT ONE OF ZAMBIA'S RHINOS WERE KILLED BY POACHERS. IN EARLY 2011, TWO OF THE COWS GAVE BIRTH TO HEALTHY CALVES.

III. IN CENTRAL AFRICA, AWF CONDUCTED RESEARCH ON THE BONOBO: AT THE LOMAKO CONSERVATION SCIENCE CENTER, AN AWF-FUNDED RESEARCH FACILITY IN THE DEMOCRATIC REPUBLIC OF CONGO (DRC), AWF CONDUCTED GROUNDBREAKING RESEARCH AND HABITUATION WORK ON THE ENDANGERED BONOBO. DUE TO THE COUNTRY'S HISTORY OF CIVIL WAR, THERE IS A CONSIDERABLE GAP IN RESEARCH ON BONOBOS, WHICH ARE ONLY FOUND IN THE DRC AND WHICH SHARE AS MUCH DNA WITH HUMANS AS CHIMPANZEES. BONOBO RESEARCH INVOLVED MAPPING THE DIFFERENT VEGETATION IN THE AREA TO DETERMINE THE ABUNDANCE OR SCARCITY OF FOOD SOURCES AVAILABLE FOR THE SPECIES, COLLECTING SAMPLES OF BONOBO FECES AND URINE TO IDENTIFY WHAT THE BONOBOS ARE INGESTING AND THEIR LEVELS OF STRESS HORMONES, AND MORE. THE PROJECT EMPLOYED LOCAL COMMUNITY RESIDENTS IN CONDUCTING THE RESEARCH, THEREBY PROVIDING AN ADDITIONAL ECONOMIC BENEFIT TO THE LOCAL PEOPLE AND ALLOWING RESIDENTS TO DEVELOP A GREATER FAMILIARITY AND AFFINITY FOR THE SPECIES.

C. CONSERVATION ENTERPRISE: AWF BELIEVES THAT AFRICA'S WILDLIFE AND WILD LANDS CAN ONLY BE TRULY SECURE WHEN CONSERVATION OPERATIONS HAVE A SOUND FINANCIAL BASIS, AND WHEN ECONOMIC INCENTIVES EXIST FOR LOCAL PEOPLE TO HELP CONSERVE NATURAL SYSTEMS. OVER THE PAST SEVERAL YEARS,

AWF HAS WORKED WITH PRIVATE SECTOR PARTNERS TO CREATE CUTTING-EDGE

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EXAMPLES OF CONSERVATION TOURISM PRODUCTS THAT INCLUDE EQUITY HOLDINGS AND OTHER INCENTIVES FOR LOCAL PEOPLE TO CONSERVE WILDLIFE AND ITS HABITAT. AWF IS CURRENTLY EXPANDING OUR EMPHASIS ON AGRICULTURE, LIVESTOCK, AND FISHERIES AS SMALL BUSINESSES THAT SUPPORT HUMAN NEEDS WHILE REDUCING RELIANCE ON THE EXPLOITATION OF WILDLIFE RESOURCES.

I. AWF ESTABLISHED NEW SCHOOL IN SOUTHERN AFRICA: ONE OF THE BIGGEST CHALLENGES OF ENGAGING RURAL AFRICAN COMMUNITIES IN EFFECTIVE BIODIVERSITY CONSERVATION IS TRANSFORMING THE PERCEPTION OF WILDLIFE AS PESTS THAT DESTROY CROPS AND HARM LIVESTOCK TO THAT OF AN ASSET THAT CAN ENHANCE LIVELIHOODS. AWF CONSTRUCTED A NEW SCHOOL, CONSISTING OF FIVE TEACHER HOUSES AND SIX MODERN CLASSROOMS, TO REPLACE THE DILAPIDATED PRIMARY SCHOOL THAT HAD PREVIOUSLY EXISTED. IMMEDIATELY AFTER ITS INAUGURATION, 105 PUPILS ENROLLED IN THE SCHOOL, A BIG STEP IN A CHIEFDOM WHERE CURRENTLY 80 PERCENT OF THE PEOPLE ARE ILLITERATE.

II. AWF CONTINUED TO SUPPORT SUSTAINABLE COFFEE FARMING IN EAST AFRICA: AWF AND STARBUCKS COFFEE COMPANY CONTINUED THEIR PARTNERSHIP, OPENING A COFFEE-QUALITY LABORATORY OUTSIDE NYERI, KENYA. THE AREA IS KNOWN FOR PRODUCING SOME OF THE WORLD'S BEST COFFEE AND YET MANY AREA COFFEE FARMERS HAVE NEVER TASTED THEIR OWN BREW, UNTIL NOW. THE LAB IS THE LATEST MILESTONE IN THE KENYA HEARTLAND COFFEE PROJECT, LAUNCHED BY AWF AND STARBUCKS IN 2005. OTHER MILESTONES INCLUDE THE TRAINING OF THOUSANDS OF FARMERS IN SUSTAINABLE GROWING PRACTICES, THE PLANTING OF MORE THAN 10,000 TREES TO RESTORE FOREST COVER AND PROTECT WATERSHEDS, AND THE CREATION OF A STATE-OF-THE-ART DAM TO CONSERVE WATER AND BENEFIT LOCAL PEOPLE.

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**III. AWF BROUGHT ITS CONSERVATION ENTERPRISE PROGRAM TO NGOMA LODGE:**

AWF HELPED IN THE OPENING OF NGOMA SAFARI LODGE, A HIGH-END SAFARI LODGE LOCATED IN THE KAZUNGULA HEARTLAND IN BOTSWANA. A CRITICAL CONSERVATION LANDSCAPE THAT LIES ON THE EDGE OF CHOBE NATIONAL PARK, NGOMA LODGE WILL HELP SUSTAIN CONSERVATION WORK IN THE LANDS AROUND THE NATIONAL PARK AND BE INSTRUMENTAL IN FURTHER TRANSFORMING THIS CONSERVATION LANDSCAPE INTO A WILDLIFE DESTINATION.

**D. EDUCATION AND CAPACITY BUILDING:** AWF WAS FOUNDED ON THE BELIEF THAT CONSERVATION EFFORTS MUST ULTIMATELY REST IN THE HANDS OF THE PEOPLE OF AFRICA WHO, WITH EDUCATIONAL SUPPORT, WILL CONSTRUCT A VIABLE PLATFORM TO CONSERVE THE CONTINENT'S WILDLIFE HERITAGE. OVER THE PAST DECADES, AWF HAS SPONSORED HUNDREDS OF YOUNG AFRICAN CONSERVATIONISTS TO STUDY WILDLIFE MANAGEMENT AND TO ACQUIRE HIGHER DEGREES IN CONSERVATION-RELATED FIELDS. BEYOND FORMAL EDUCATION, AWF WORKS TO TRAIN LOCAL PEOPLE AND BUILD THE CAPACITY OF AFRICAN INSTITUTIONS TO PROTECT AND MANAGE WILDLIFE.

AWF NAMED FIVE NEW FELLOWS TO ITS CHARLOTTE CONSERVATION FELLOWSHIP PROGRAM: INTRODUCED IN 1996, THE CHARLOTTE CONSERVATION FELLOWS SCHOLARSHIP PROGRAM SUPPORTS AFRICAN NATIONALS PURSUING MASTERS' DEGREES OR DOCTORAL RESEARCH IN CONSERVATION-RELATED FIELDS. EACH YEAR AWF SUPPORTS AS MANY AS FIVE CHARLOTTE FELLOWS WHO EACH RECEIVE UP TO \$25,000. SINCE ITS INCEPTION, THE PROGRAM HAS SUPPORTED 50 FELLOWS FROM ACROSS EAST, WEST, CENTRAL, AND SOUTHERN AFRICA.

**E. CONSERVATION POLICY:** AWF AND ITS PARTNERS ACROSS THE HEARTLANDS CAN BE SUCCESSFUL ONLY IF RELEVANT POLICIES, LAWS, REGULATIONS, AND

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FINANCING MECHANISMS ARE SUPPORTIVE OF CONSERVATION AND RELATED ACHIEVEMENTS. AWF WORKS WITH INDIVIDUAL AFRICAN GOVERNMENTS, PARK AGENCIES, REGIONAL BODIES, AND INTERNATIONAL FUNDING AGENCIES TO HELP DEVELOP AND PROMOTE POLICIES THAT CREATE A ROBUST ENVIRONMENT FOR CONSERVATION AND SUSTAINABLE MODELS OF ECONOMIC DEVELOPMENT. AWF HAS ARTICULATED A SPECIFIC AGENDA, WHICH IS REVISITED EACH YEAR, OF THE MOST ESSENTIAL POLICY POSITIONS THAT WE URGE GOVERNMENTS TO ADOPT TO ENSURE THAT WILDLIFE SURVIVES WHILE CONTRIBUTING TO A PROSPEROUS FUTURE FOR AFRICA.

I. AWF CONVENED MEETINGS IN AFRICA AND THE UNITED STATES THAT ADVANCED CONSERVATION AT BOTH A LOCAL AND GLOBAL LEVEL: FOR EXAMPLE, AWF WITH OTHER PARTNERS CONVENED HEADS OF STATE, MINISTERS FOR NATURAL RESOURCES, AND OTHER LUMINARIES ON CAPITOL HILL IN WASHINGTON, DC, TO CELEBRATE THE 10 YEARS SINCE THE HISTORIC YAOUNDE SUMMIT, WHICH FIRST BROUGHT TOGETHER LEADERS FROM THE COUNTRIES THAT SHARE THE CONGO BASIN'S RICH RAINFORESTS AND ULTIMATELY GREW INTO THE CONGO BASIN FOREST PARTNERSHIP. SINCE THEN, MILLIONS OF ACRES OF NEW PROTECTED AREAS HAVE BEEN CREATED, NEW INITIATIVES ON BUSHMEAT AND ANTI-POACHING ARE IN PLACE, AND SUSTAINABLE FORESTRY IS BEGINNING TO TAKE ROOT. NOTING THE MANY CHALLENGES STILL AHEAD, PARTICIPANTS URGED THE WORLD TO RAISE GREATER AWARENESS, FUNDING SOURCES, AND TECHNICAL SUPPORT TO PROTECT THE WORLD'S SECOND LARGEST RAINFOREST.

II. AWF IS PILOTING SEVERAL CLIMATE CHANGE PROJECTS: AWF COMPLETED A PROJECT TO INVESTIGATE HOW CLIMATE CHANGE WILL LIKELY AFFECT THE MOUNTAIN GORILLA, A HIGHLY ENDANGERED GREAT APE THAT LIVES IN TWO BLOCKS OF MONTANE FORESTS IN CENTRAL AFRICA. THE PROJECT ASSESSED THE



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OUTLOOK FOR THESE GENTLE GIANTS, WHICH FEED ON VEGETATION THAT THRIVES AT HIGH ALTITUDES AND IS BEING THREATENED BY WARMING TEMPERATURES. WITH ONLY ABOUT 700 MOUNTAIN GORILLAS LEFT IN THE WORLD, ANY UNANTICIPATED SHOCK TO HABITAT COULD PUSH THE GORILLAS TO EXTINCTION. AWF ALSO LAUNCHED TWO PILOT REDD (REDUCED EMISSIONS FROM DEFORESTATION AND DEGRADATION) PROGRAMS IN EAST AFRICA.

III. AWF INFLUENCED DEBATES AND POLICY DECISIONS: AWF ISSUED A POSITION STATEMENT OPPOSING THE CONSTRUCTION OF A ROAD ACROSS THE TANZANIA'S WORLD-RENOWNED SERENGETI NATIONAL PARK. BY CUTTING THROUGH THE NORTHERN PART OF THE PARK, THE PROPOSED ROAD WOULD DISRUPT THE GREAT MIGRATION, THE SEASONAL MOVEMENT OF HUNDREDS OF THOUSANDS OF WILDEBEESTS AND ZEBRA, APTLY DESCRIBED AS ONE OF THE GREATEST SPECTACLES ON EARTH. OFFERING ALTERNATIVE ROUTES THAT FALL OUTSIDE THE BOUNDARIES OF THE PARK, AWF HAS ARTICULATED ITS POSITION THAT NO MERE REFINEMENT OF THE CURRENT ROAD DESIGN COULD MITIGATE WHAT IS A FUNDAMENTALLY FLAWED IDEA - PAVING A COMMERCIAL ROAD THROUGH THE SERENGETI.

FORM 990, PART III, LINE 4B: EFFORTS. AWF'S MISSION COULD NOT BE ACCOMPLISHED ALONE, AND THEREFORE IT WORKS WITH PARTNERS AND SUPPORTERS AROUND THE WORLD TO MOBILIZE RESOURCES AND UNITE PEOPLE WHO ARE PASSIONATE ABOUT AFRICAN CONSERVATION.

A. AWF INTENSIFIED ITS SAFARI PROGRAM OFFERINGS TO MEMBERS AND OTHER SUPPORTERS: DURING ONE OF SEVERAL AWF PLANNED SAFARIS OVER THE PAST YEAR, AWF LED A GROUP OF MEMBERS ON AN 11-DAY SAFARI TO UGANDA AND RWANDA. THE TRIP WAS DESIGNED TO BUILD KNOWLEDGE ABOUT THE ENDANGERED

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MOUNTAIN GORILLA WHILE SPOTLIGHTING CONSERVATION PROJECTS THAT LINK  
WILDLIFE PROTECTION WITH IMPROVED HUMAN WELL-BEING.

B. AWF PARTNERED WITH NATURE'S BEST PHOTOGRAPHY TO BUILD AWARENESS  
ABOUT WILDLIFE CONSERVATION: AWF SPONSORED A NEW AFRICAN WILDLIFE  
CATEGORY IN THE PRESTIGIOUS NATURE'S BEST PHOTOGRAPHY WINDLAND SMITH  
RICE INTERNATIONAL AWARDS. EVERY YEAR THE COMPETITION CELEBRATES THE  
BEAUTY AND DIVERSITY OF NATURE THROUGH THE ART OF PHOTOGRAPHY. WINNERS  
ARE FEATURED IN A SIX-MONTH PRINT EXHIBITION AT THE SMITHSONIAN'S  
NATIONAL MUSEUM OF NATURAL HISTORY FOR THOUSANDS OF VISITORS TO ENJOY  
AND LEARN FROM.

C. AWF PARTNERED WITH DISNEY FRIENDS FOR CHANGE TO SAVE BONOBO: AWF'S  
PROJECT TO PROTECT BONOBO AND THEIR HABITAT IN THE DEMOCRATIC REPUBLIC  
OF CONGO WAS SELECTED BY THE WALT DISNEY COMPANY AS A RECIPIENT OF  
FUNDING THROUGH FRIENDS FOR CHANGE: PROJECT GREEN. A WEB-BASED VOTING  
TOOL AND OUTREACH PROGRAM BUILT AWARENESS ABOUT THE PROGRAM AND  
PARTNERSHIP.

D. AWF EXPERTS CONTRIBUTED TO THE DEBATE ON THE EFFICACY OF  
CONSERVATION ENTERPRISES: VICE PRESIDENT, JOANNA ELLIOTT, TOGETHER WITH  
VICE PRESIDENT OF OPERATIONS, DAUDI SUMBA, CO-AUTHORED A WHITE PAPER,  
"CONSERVATION ENTERPRISE: WHAT WORKS, WHERE AND FOR WHOM?", AS PART OF  
A RESEARCH SERIES PUBLISHED BY THE INTERNATIONAL INSTITUTE FOR  
ENVIRONMENT AND DEVELOPMENT. THE SERIES AIMS TO HIGHLIGHT KEY TOPICS IN  
THE FIELD OF SUSTAINABLE RESOURCE MANAGEMENT. IN THIS PAPER, ELLIOTT  
AND SUMBA THOROUGHLY EXAMINED THE CASE FOR AND AGAINST CONSERVATION  
ENTERPRISES AND HOW THEY CAN BE EFFECTIVE IN FOSTERING CONSERVATION







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

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

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

	Yes	No
<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to other organization(s)		X
<b>c</b> Gift, grant, or capital contribution from other organization(s)		X
<b>d</b> Loans or loan guarantees to or for other organization(s)		X
<b>e</b> Loans or loan guarantees by other organization(s)		X
<b>f</b> Sale of assets to other organization(s)		X
<b>g</b> Purchase of assets from other organization(s)		X
<b>h</b> Exchange of assets		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		X
<b>n</b> Sharing of paid employees		X
<b>o</b> Reimbursement paid to other organization for expenses		X
<b>p</b> Reimbursement paid by other organization for expenses		X
<b>q</b> Other transfer of cash or property to other organization(s)		X
<b>r</b> Other transfer of cash or property from other organization(s)		X

**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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				



**Information Return of U.S. Persons With Respect To Certain Foreign Corporations**

OMB No. 1545-0704

(Rev. December 2007)  
Department of the Treasury  
Internal Revenue Service

Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning , , and ending , , and ending , ,

Attachment  
Sequence No. **121**

Name of person filing this return  <b>AFRICAN WILDLIFE FOUNDATION, INC.</b> <small>Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)</small> <b>1400 16TH STREET, NW, NO. 120</b> <small>City or town, state, and ZIP code</small> <b>WASHINGTON, DC 20036-2249</b>	<b>A Identifying number</b>  <b>52-0781390</b>  <b>B Category of filer (See instructions. Check applicable box(es)):</b> 1 (repealed) 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input checked="" type="checkbox"/>  <b>C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period</b> <b>100.00 %</b>
Filer's tax year beginning <b>JUL 1</b> , 2010, and ending <b>JUN 30</b> , 2011	

**D Person(s) on whose behalf this information return is filed:**

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

**Important:** Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

<b>1a Name and address of foreign corporation</b> <b>AWC LIMITED</b> <b>C/O AXIS FIDUCIARY, 18N FELIX DE VALOIS STREET</b> <b>PORT LOUIS</b> <b>MAURITIUS</b>				<b>b Employer identification number, if any</b>  _____
<b>d Date of incorporation</b> <b>03/08/11</b>				<b>e Principal place of business</b> <b>PORT LOUIS</b> <b>MAURITIUS</b>
<b>f Principal business activity code number</b> <b>813000</b>		<b>g Principal business activity</b> <b>INVEST HOLDING</b>		
<b>h Functional currency</b> <b>MAURITIUS, RUPEE</b>				
<b>c Country under whose laws incorporated</b> <b>MAURITIUS</b>				

**2 Provide the following information for the foreign corporation's accounting period stated above.**

<b>a Name, address, and identifying number of branch office or agent (if any) in the United States</b>  _____	<b>b If a U.S. income tax return was filed, enter:</b>	
	<b>(i) Taxable income or (loss)</b>  _____	<b>(ii) U.S. income tax paid (after all credits)</b>  _____

<b>c Name and address of foreign corporation's statutory or resident agent in country of incorporation</b>  _____	<b>d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different</b>  _____
---	--

<b>Schedule A Stock of the Foreign Corporation</b>		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	(i) Beginning of annual accounting period	(ii) End of annual accounting period
<b>COMMON</b>	<b>1</b>	<b>1</b>





**Schedule E** Income, War Profits, and Excess Profits Taxes Paid or Accrued

	(a) Name of country or U.S. possession	Amount of tax		
		(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1	U.S.			
2				
3				
4				
5				
6				
7				
8	Total			

**Schedule F** Balance Sheet

**Important:** Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

	Assets	Amount of tax	
		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	Cash	1	1.
2a	Trade notes and accounts receivable	2a	
b	Less allowance for bad debts	2b ( ) ( )	
3	Inventories	3	
4	Other current assets (attach schedule)	4	
5	Loans to shareholders and other related persons	5	
6	Investment in subsidiaries (attach schedule)	6	
7	Other investments (attach schedule)	7	
8a	Buildings and other depreciable assets	8a	
b	Less accumulated depreciation	8b ( ) ( )	
9a	Depletable assets	9a	
b	Less accumulated depletion	9b ( ) ( )	
10	Land (net of any amortization)	10	
11	Intangible assets:		
a	Goodwill	11a	
b	Organization costs	11b	
c	Patents, trademarks, and other intangible assets	11c	
d	Less accumulated amortization for lines 11a, b, and c	11d ( ) ( )	
12	Other assets (attach schedule)	12	
13	Total assets	13	1.
<b>Liabilities and Shareholders' Equity</b>			
14	Accounts payable	14	
15	Other current liabilities (attach schedule)	15	
16	Loans from shareholders and other related persons	16	
17	Other liabilities (attach schedule)	17	
18	Capital stock:		
a	Preferred stock	18a	
b	Common stock	18b	1.
19	Paid-in or capital surplus (attach reconciliation)	19	
20	Retained earnings	20	
21	Less cost of treasury stock	21 ( ) ( )	
22	Total liabilities and shareholders' equity	22	1.

Schedule G Other Information

- 1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?
2 During the tax year, did the foreign corporation own an interest in any trust?
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as entities separate from their owners...
4 During the tax year, was the foreign corporation a participant in any cost sharing arrangement?
5 During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

Table with columns for Net Additions and Net Subtractions. Rows include: 1 Current year net income or (loss) per foreign books of account; 2 Net adjustments made to line 1; 3 Total net additions; 4 Total net subtractions; 5a Current earnings and profits; 5b DASTM gain or (loss); 5c Combine lines 5a and 5b; 5d Current earnings and profits in U.S. dollars.

Schedule I Summary of Shareholder's Income From Foreign Corporation

Table with 8 rows for income categories: 1 Subpart F income; 2 Earnings invested in U.S. property; 3 Previously excluded subpart F income withdrawn; 4 Previously excluded export trade income withdrawn; 5 Factoring income; 6 Total of lines 1 through 5; 7 Dividends received; 8 Exchange gain or (loss) on a distribution of previously taxed income.

- Was any income of the foreign corporation blocked?
Did any such income become unblocked during the tax year (see section 964(b))?

If the answer to either question is "Yes," attach an explanation.

**SCHEDULE J  
(Form 5471)**

(Rev. December 2005)  
Department of the Treasury  
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)  
of Controlled Foreign Corporation**

OMB No. 1545-0704

▶ Attach to Form 5471.

Name of person filing Form 5471

Identifying number

**AFRICAN WILDLIFE FOUNDATION, INC.**

**52-0781390**

Name of foreign corporation

**AWC LIMITED**

<b>Important.</b> Enter amounts in functional currency.	<b>(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)</b>	<b>(b) Pre-1987 E&amp;P Not Previously Taxed (pre-87 section 959(c)(3) balance)</b>
<b>1</b> Balance at beginning of year		
<b>2a</b> Current year E&P		
<b>b</b> Current year deficit in E&P		
<b>3</b> Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)		
<b>4</b> Amounts included under section 951(a) or reclassified under section 959(c) in current year		
<b>5a</b> Actual distributions or reclassifications of previously taxed E&P		
<b>b</b> Actual distributions of nonpreviously taxed E&P		
<b>6a</b> Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)		
<b>b</b> Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)		
<b>7</b> Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)		

	<b>(c) Previously Taxed E&amp;P (sections 959(c)(1) and (2) balances)</b>			<b>(d) Total Section 964(a) E&amp;P (combine columns (a), (b), and (c))</b>
	<i>(i)</i> Earnings Invested in U.S. Property	<i>(ii)</i> Earnings Invested in Excess Passive Assets	<i>(iii)</i> Subpart F Income	
<b>1</b>				
<b>2a</b>				
<b>b</b>				
<b>3</b>				
<b>4</b>				
<b>5a</b>				
<b>b</b>				
<b>6a</b>				
<b>b</b>				
<b>7</b>				

**Transactions Between Controlled Foreign Corporation  
and Shareholders or Other Related Persons**

▶ Attach to Form 5471.

Name of person filing Form 5471 **AFRICAN WILDLIFE FOUNDATION, INC.** Identifying number **52-0781390**

Name of foreign corporation **AWC LIMITED**

**Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.**

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade .....					
3 Sales of property rights (patents, trademarks, etc.) .....					
4 Platform contribution transaction payments received .....					
5 Cost sharing transaction payments received .....					
6 Compensation received for technical, managerial, engineering, construction, or like services .....					
7 Commissions received .....					
8 Rents, royalties, and license fees received .....					
9 Dividends received (exclude deemed distributions under subpart F and distributions of previously taxed income) .....					
10 Interest received .....					
11 Premiums received for insurance or reinsurance .....					
12 Add lines 1 through 11 .....					
13 Purchases of stock in trade (inventory) .....					
14 Purchases of tangible property other than stock in trade .....					
15 Purchases of property rights (patents, trademarks, etc.) .....					
16 Platform contribution transaction payments paid .....					
17 Cost sharing transaction payments paid .....					
18 Compensation paid for technical, managerial, engineering, construction, or like services .....					
19 Commissions paid .....					
20 Rents, royalties, and license fees paid .....					
21 Dividends paid .....					
22 Interest paid .....					
23 Premiums paid for insurance or reinsurance .....					
24 Add lines 13 through 23 .....					
25 Amounts borrowed (enter the maximum loan balance during the year) - see instr. ....					
26 Amounts loaned (enter the maximum loan balance during the year) - see instr. ....					

**Information Return of U.S. Persons With Respect To Certain Foreign Corporations**

OMB No. 1545-0704

(Rev. December 2007)

Department of the Treasury  
Internal Revenue Service

Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning \_\_\_\_\_, and ending \_\_\_\_\_  
▶ See separate instructions.

Attachment  
Sequence No. **121**

Name of person filing this return  <b>AFRICAN WILDLIFE FOUNDATION, INC.</b> <small>Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)</small> <b>1400 16TH STREET, NW, NO. 120</b> <small>City or town, state, and ZIP code</small> <b>WASHINGTON, DC 20036-2249</b> Filer's tax year beginning <b>JUL 1</b> , 2010, and ending <b>JUN 30</b> , 2011	<b>A Identifying number</b> <b>52-0781390</b>  <b>B Category of filer (See instructions. Check applicable box(es)):</b> 1 (repealed) 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input checked="" type="checkbox"/>  <b>C Enter the total percentage of the foreign corporation's voting stock you owned at the end of its annual accounting period</b> <b>100.00</b> %
--	--

**D Person(s) on whose behalf this information return is filed:**

(1) Name	(2) Address	(3) Identifying number	(4) Check applicable box(es)		
			Shareholder	Officer	Director

**Important:** Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

<b>1a Name and address of foreign corporation</b> <b>AWC CB1 LIMITED</b> <b>C/O AXIS FIDUCIARY, 18N FELIX DE VALOIS STREET</b> <b>PORT LOUIS</b> <b>MAURITIUS</b>				<b>b Employer identification number, if any</b>  <b>c Country under whose laws incorporated</b> <b>MAURITIUS</b>
<b>d Date of incorporation</b> <b>04/01/11</b>	<b>e Principal place of business</b> <b>PORT LOUIS</b> <b>MAURITIUS</b>	<b>f Principal business activity code number</b> <b>813000</b>	<b>g Principal business activity</b> <b>PROVISION OF CAPITAL</b>	<b>h Functional currency</b> <b>MAURITIUS, RUPEE</b>

**2 Provide the following information for the foreign corporation's accounting period stated above.**

<b>a Name, address, and identifying number of branch office or agent (if any) in the United States</b>	<b>b If a U.S. income tax return was filed, enter:</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><i>(i)</i> Taxable income or (loss)</td> <td style="width:50%;"><i>(ii)</i> U.S. income tax paid (after all credits)</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		<i>(i)</i> Taxable income or (loss)	<i>(ii)</i> U.S. income tax paid (after all credits)		
<i>(i)</i> Taxable income or (loss)	<i>(ii)</i> U.S. income tax paid (after all credits)					
<b>c Name and address of foreign corporation's statutory or resident agent in country of incorporation</b>	<b>d Name and address (including corporate department, if applicable) of person (or persons) with custody of the books and records of the foreign corporation, and the location of such books and records, if different</b>					

<b>Schedule A Stock of the Foreign Corporation</b>		
(a) Description of each class of stock	(b) Number of shares issued and outstanding	
	<i>(i)</i> Beginning of annual accounting period	<i>(ii)</i> End of annual accounting period
<b>COMMON</b>	<b>1</b>	<b>1</b>



**Schedule E** Income, War Profits, and Excess Profits Taxes Paid or Accrued

(a) Name of country or U.S. possession	Amount of tax		
	(b) In foreign currency	(c) Conversion rate	(d) In U.S. dollars
1 U.S.			
2			
3			
4			
5			
6			
7			
8 Total			

**Schedule F** Balance Sheet

**Important:** Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

Assets		(a)	(b)
		Beginning of annual accounting period	End of annual accounting period
1 Cash	1		1.
2a Trade notes and accounts receivable	2a		
b Less allowance for bad debts	2b	( )	( )
3 Inventories	3		
4 Other current assets (attach schedule)	4		
5 Loans to shareholders and other related persons	5		
6 Investment in subsidiaries (attach schedule)	6		
7 Other investments (attach schedule)	7		
8a Buildings and other depreciable assets	8a		
b Less accumulated depreciation	8b	( )	( )
9a Depletable assets	9a		
b Less accumulated depletion	9b	( )	( )
10 Land (net of any amortization)	10		
11 Intangible assets:			
a Goodwill	11a		
b Organization costs	11b		
c Patents, trademarks, and other intangible assets	11c		
d Less accumulated amortization for lines 11a, b, and c	11d	( )	( )
12 Other assets (attach schedule)	12		
13 Total assets	13		1.
<b>Liabilities and Shareholders' Equity</b>			
14 Accounts payable	14		
15 Other current liabilities (attach schedule)	15		
16 Loans from shareholders and other related persons	16		
17 Other liabilities (attach schedule)	17		
18 Capital stock:			
a Preferred stock	18a		
b Common stock	18b		1.
19 Paid-in or capital surplus (attach reconciliation)	19		
20 Retained earnings	20		
21 Less cost of treasury stock	21	( )	( )
22 Total liabilities and shareholders' equity	22		1.

Form 5471 (Rev. 12-2007)



Schedule G Other Information

- 1 During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in any foreign partnership?
2 During the tax year, did the foreign corporation own an interest in any trust?
3 During the tax year, did the foreign corporation own any foreign entities that were disregarded as entities separate from their owners...
4 During the tax year, was the foreign corporation a participant in any cost sharing arrangement?
5 During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?

Schedule H Current Earnings and Profits

Important: Enter the amounts on lines 1 through 5c in functional currency.

Table with columns for Net Additions and Net Subtractions. Rows include: 1 Current year net income or (loss) per foreign books of account; 2 Net adjustments made to line 1 to determine current earnings and profits according to U.S. financial and tax accounting standards; 3 Total net additions; 4 Total net subtractions; 5a Current earnings and profits; 5b DASTM gain or (loss); 5c Combine lines 5a and 5b; 5d Current earnings and profits in U.S. dollars.

Schedule I Summary of Shareholder's Income From Foreign Corporation

Table with 8 rows for income categories: 1 Subpart F income; 2 Earnings invested in U.S. property; 3 Previously excluded subpart F income withdrawn from qualified investments; 4 Previously excluded export trade income withdrawn from investment in export trade assets; 5 Factoring income; 6 Total of lines 1 through 5; 7 Dividends received; 8 Exchange gain or (loss) on a distribution of previously taxed income.

- Was any income of the foreign corporation blocked?
Did any such income become unblocked during the tax year (see section 964(b))?

If the answer to either question is "Yes," attach an explanation.

**SCHEDULE J  
(Form 5471)**

(Rev. December 2005)  
Department of the Treasury  
Internal Revenue Service

**Accumulated Earnings and Profits (E&P)  
of Controlled Foreign Corporation**

OMB No. 1545-0704

▶ Attach to Form 5471.

Name of person filing Form 5471

Identifying number

**AFRICAN WILDLIFE FOUNDATION, INC.**

**52-0781390**

Name of foreign corporation

**AWC CB1 LIMITED**

Important. Enter amounts in functional currency.	(a) Post-1986 Undistributed Earnings (post-86 section 959(c)(3) balance)	(b) Pre-1987 E&P Not Previously Taxed (pre-87 section 959(c)(3) balance)
<b>1</b> Balance at beginning of year		
<b>2a</b> Current year E&P		
<b>b</b> Current year deficit in E&P		
<b>3</b> Total current and accumulated E&P not previously taxed (line 1 plus line 2a or line 1 minus line 2b)		
<b>4</b> Amounts included under section 951(a) or reclassified under section 959(c) in current year		
<b>5a</b> Actual distributions or reclassifications of previously taxed E&P		
<b>b</b> Actual distributions of nonpreviously taxed E&P		
<b>6a</b> Balance of previously taxed E&P at end of year (line 1 plus line 4, minus line 5a)		
<b>b</b> Balance of E&P not previously taxed at end of year (line 3 minus line 4, minus line 5b)		
<b>7</b> Balance at end of year. (Enter amount from line 6a or line 6b, whichever is applicable.)		

	(c) Previously Taxed E&P (sections 959(c)(1) and (2) balances)			(d) Total Section 964(a) E&P (combine columns (a), (b), and (c))
	(i) Earnings Invested in U.S. Property	(ii) Earnings Invested in Excess Passive Assets	(iii) Subpart F Income	
<b>1</b>				
<b>2a</b>				
<b>b</b>				
<b>3</b>				
<b>4</b>				
<b>5a</b>				
<b>b</b>				
<b>6a</b>				
<b>b</b>				
<b>7</b>				

**SCHEDULE M  
(Form 5471)**

(Rev. December 2010)

Department of the Treasury  
Internal Revenue Service

**Transactions Between Controlled Foreign Corporation  
and Shareholders or Other Related Persons**

OMB No. 1545-0704

▶ Attach to Form 5471.

Name of person filing Form 5471

Identifying number

**AFRICAN WILDLIFE FOUNDATION, INC.**

**52-0781390**

Name of foreign corporation

**AWC CB1 LIMITED**

**Important:** Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory) ...					
2 Sales of tangible property other than stock in trade .....					
3 Sales of property rights (patents, trademarks, etc.) .....					
4 Platform contribution transaction payments received .....					
5 Cost sharing transaction payments received .....					
6 Compensation received for technical, managerial, engineering, construction, or like services .....					
7 Commissions received .....					
8 Rents, royalties, and license fees received .....					
9 Dividends received (exclude deemed distributions under subpart F and distributions of previously taxed income) .....					
10 Interest received .....					
11 Premiums received for insurance or reinsurance .....					
12 Add lines 1 through 11 .....					
13 Purchases of stock in trade (inventory) .....					
14 Purchases of tangible property other than stock in trade .....					
15 Purchases of property rights (patents, trademarks, etc.) .....					
16 Platform contribution transaction payments paid .....					
17 Cost sharing transaction payments paid .....					
18 Compensation paid for technical, managerial, engineering, construction, or like services .....					
19 Commissions paid .....					
20 Rents, royalties, and license fees paid .....					
21 Dividends paid .....					
22 Interest paid .....					
23 Premiums paid for insurance or reinsurance .....					
24 Add lines 13 through 23 .....					
25 Amounts borrowed (enter the maximum loan balance during the year) - see instr. .....					
26 Amounts loaned (enter the maximum loan balance during the year) - see instr. .....					

