

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2014**  
Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

**A** For the 2014 calendar year, or tax year beginning **JUL 1, 2014** and ending **JUN 30, 2015**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>		<b>D</b> Employer identification number <b>52-0781390</b>
	Doing business as		<b>E</b> Telephone number <b>(202) 939-3333</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>44,999,882.</b>
	1400 16TH STREET, NW 120		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20036-2249</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>F</b> Name and address of principal officer: <b>PATRICK BERGIN</b> <b>SAME AS C ABOVE</b>			<b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: <b>WWW.AWF.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			<b>L</b> Year of formation: <b>1961</b>
			<b>M</b> State of legal domicile: <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>28</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>27</b>
	<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a)	<b>5</b>	<b>44</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>34</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>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	26,722,612.	31,585,502.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	609,718.	573,187.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,188,759.	-245,732.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,757,646.	32,280,525.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,673,984.	5,626,481.
	<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)	9,292,323.	9,628,992.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	362,082.	524,878.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>2,454,154.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,212,844.	11,395,574.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	23,541,233.	27,175,925.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	5,216,413.	5,104,600.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	44,743,327.	46,353,162.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	5,748,747.	4,038,118.
		38,994,580.	42,315,044.

**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	Date	<b>2/1/2016</b>
	<b>JEFF CHRISFIELD, CHIEF OPERATING OFFICER</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>02/01/16</b>
	Firm's name <b>RAFFA, P.C.</b>	Firm's EIN <b>52-1511275</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P00639053</b>
	Firm's address <b>1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036</b>	Phone no. <b>(202) 822-5000</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 or note to any line in this Part III

1 Briefly describe the organization's mission: THE AFRICAN WILDLIFE FOUNDATION, INC. (AWF), 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? No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 21,354,363. including grants of \$ 5,626,481.) (Revenue \$ 112,753.) 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.

(SEE SCHEDULE O FOR CONTINUATION)

4b (Code: ) (Expenses \$ 2,269,872. including grants of \$ ) (Revenue \$ 473,717.) EDUCATION AND OUTREACH: 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 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.

(SEE SCHEDULE O FOR CONTINUATION)

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 23,624,235.



**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		X



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

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		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? <i>If "Yes," complete Schedule J</i> .....	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
24c		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
24d		
25a <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
25b		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		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? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
28a		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
28b		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? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		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? <i>If "Yes," complete Schedule R, Part I</i> .....		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	X	
35b	X	
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	
<b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	
38	X	



Part V Statements Regarding Other IRS Filings and Tax Compliance

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

X

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Contains questions about Form 1096, Form W-2G, Form W-3, and various tax compliance requirements.



**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 or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	28		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	27		
<b>2</b>	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
<b>3</b>	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
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</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).		
<b>16a</b>	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>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **JEFF CHRISFIELD - (202) 939-3333**  
**1400 16TH STREET, 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 or note to any line in this Part VII

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) MR. DAVID E. THOMSON CHAIRMAN	4.00	X		X				0.	0.	0.
(2) H.E. BENJAMIN W. MKAPA VICE-CHAIRMAN	2.00	X		X				0.	0.	0.
(3) DR. MYMA BELO-OSAGIE SECRETARY	2.00	X		X				0.	0.	0.
(4) MS. MARLEEN GROEN TREASURER	3.00	X		X				0.	0.	0.
(5) MR. ROBIN BERKELEY, OBE TRUSTEE (UNTIL 05/2015)	1.00	X						0.	0.	0.
(6) MR. PAYSON COLEMAN TRUSTEE	3.00	X						0.	0.	0.
(7) MS. LYNN DOLNICK TRUSTEE	3.00	X						0.	0.	0.
(8) MS. LISA FIRESTONE TRUSTEE (UNTIL 10/2014)	1.00	X						0.	0.	0.
(9) DR. HELEN GICHOHI TRUSTEE	1.00	X						0.	0.	0.
(10) MR. LARRY GREEN TRUSTEE	1.00	X						0.	0.	0.
(11) MS. HEATHER STURT HAAGA TRUSTEE	3.00	X						0.	0.	0.
(12) MR. BARRY HALL TRUSTEE	1.00	X						0.	0.	0.
(13) MS. MONA HAMILTON TRUSTEE (UNTIL 09/2014)	1.00	X						0.	0.	0.
(14) MS. CHRISTINE HEMRICK TRUSTEE	4.00	X						0.	0.	0.
(15) MR. WILLIAM E. JAMES TRUSTEE	1.00	X						0.	0.	0.
(16) MS. ADRIAN M. JAY TRUSTEE	2.00	X						0.	0.	0.
(17) HON. KRISTINA M. JOHNSON, PH.D. TRUSTEE (UNTIL 07/2014)	1.00	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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(18) DR. STEPHEN JUELSGAARD TRUSTEE	2.00	X					0.	0.	0.	
(19) MR. RAHIM KHAN TRUSTEE	1.00	X					0.	0.	0.	
(20) MR. ROBERT KING TRUSTEE	3.00	X					0.	0.	0.	
(21) MS. DENISE KOOPMANS TRUSTEE (UNTIL 10/2014)	1.00	X					0.	0.	0.	
(22) MS. KRISTA KRIEGER TRUSTEE (UNTIL 10/2014)	1.00	X					0.	0.	0.	
(23) MS. SHANA LAURSEN TRUSTEE	2.00	X					0.	0.	0.	
(24) MR. CHRISTOPHER LEE TRUSTEE	3.00	X					0.	0.	0.	
(25) MS. VICTORIA LESLIE TRUSTEE	1.00	X					0.	0.	0.	
(26) H.E. FESTUS G. MOGAE TRUSTEE	2.00	X					0.	0.	0.	
<b>1b Sub-total</b>							0.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A</b>							1,776,196.	0.	455,670.	
<b>d Total (add lines 1b and 1c)</b>							1,776,196.	0.	455,670.	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **15**

	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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRODUCTION SOLUTIONS, INC. 1953 GALLOWS ROAD, #600, VIENNA, VA 22182	PRINTING AND MAILSHOP	579,647.
SANKY COMMUNICATIONS, INC., 599 11TH AVENUE, 6TH FLOOR, NEW YORK, NY 10036	DIRECT MAIL SERVICES	452,598.
MASS DESIGN GROUP, 334 BOYLSTON STREET, SUITE 400, BOSTON, MA 02116	DESIGN/CONSTRUCTION SERVICES	232,778.
CONSERVATION CAPITAL CONSULTING, NEW CAVENDISH STREET, LONDON, UNITED KINGDOM	DEVELOPMENT & STRATEGIC MGMT	189,973.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**

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 (list any hours for related organizations below line)	(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			
(27) H.E. RAZAN AL MUBARAK TRUSTEE	1.00	X						0.	0.	0.
(28) MR. WILFRED MURUNGI TRUSTEE (UNTIL 01/2015)	1.00	X						0.	0.	0.
(29) MR. STUART SCOTT TRUSTEE	3.00	X						0.	0.	0.
(30) MS. AGGIE SKIRBALL TRUSTEE	1.00	X						0.	0.	0.
(31) MS. VERONICA VAREKOVA TRUSTEE	1.00	X						0.	0.	0.
(32) MR. WARREN WALKER TRUSTEE	1.00	X						0.	0.	0.
(33) MR. CHARLES R. WALL TRUSTEE	2.00	X						0.	0.	0.
(34) MS. MARIA WILHELM TRUSTEE	3.00	X						0.	0.	0.
(35) PATRICK BERGIN CHIEF EXECUTIVE OFFICER	40.00	X	X					249,776.	0.	62,640.
(36) JEFF CHRISFIELD CHIEF OPERATING OFFICER	40.00			X				205,530.	0.	35,265.
(37) CRAIG SHOLLEY VP OF PHILANTHROPY/MARKETING	40.00			X				172,139.	0.	29,174.
(38) DAUDI SUMBA VP OF PROGRAM DESIGN AND GOVERNMENT	40.00			X				167,188.	0.	21,606.
(39) KATHLEEN FITZGERALD VP OF CONSERVATION STRATEGY	40.00			X				152,972.	0.	49,365.
(40) CHARLY FACHEUX VP OF CONSERVATION PROJECTS	40.00			X				126,950.	0.	26,180.
(41) TYRENE HARALSON VP OF FINANCE AND ADMINISTRATION	40.00			X				135,264.	0.	28,608.
(42) KADDU SEBUNYA CHIEF OF PARTY-USAID UGANDA PROGRAM	40.00					X		135,396.	0.	98,334.
(43) STEPHEN HAM SENIOR DIRECTOR OF PHILANTHROPY	40.00					X		107,900.	0.	25,474.
(44) BRIAN MCBREARITY MANAG. DIR.-AFRICAN CONSERV. SCHOOLS	40.00					X		108,846.	0.	27,624.
(45) KURT REDENBO DIRECTOR OF FOUNDATION & CORPORATION	40.00					X		107,423.	0.	25,407.
(46) JOHN BUTLER DIRECTOR OF MARKETING & MEMBERSHIP	40.00					X		106,812.	0.	25,993.
<b>Total to Part VII, Section A, line 1c</b>								<b>1,776,196.</b>		<b>455,670.</b>



**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514	
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	12330200.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	19255302.				
	g	Noncash contributions included in lines 1a-1f: \$		562,066.				
	h	<b>Total.</b> Add lines 1a-1f		31585502.				
Program Service Revenue	2 a	SAFARI INCOME	Business Code	900099	473,717.	473,717.		
	b	OUTREACH INCOME		900099	92,170.	92,170.		
	c	MEETINGS INCOME		900099	7,300.	7,300.		
	d							
	e							
	f	All other program service revenue						
	g	<b>Total.</b> Add lines 2a-2f			573,187.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			726,004.	13,283.	712,721.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties			297,513.		297,513.	
	6 a	Gross rents	(i) Real	(ii) Personal				
		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				
		b	Less: cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)			-971,736.		-971,736.
	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	MAILING LIST RENTAL			900099	40,180.		40,180.	
b	AMORTIZATION DISCOUNT			900099	29,875.		29,875.	
c								
d	All other revenue							
e	<b>Total.</b> Add lines 11a-11d				70,055.			
12	<b>Total revenue.</b> See instructions.				32280525.	586,470.	0.	



**Part IX Statement of Functional Expenses**

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

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

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	5,626,481.	5,626,481.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,488,322.	1,210,870.	180,031.	97,421.
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	6,069,662.	4,895,127.	294,044.	880,491.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	556,617.	445,496.	27,405.	83,716.
9 Other employee benefits	1,188,577.	958,700.	63,959.	165,918.
10 Payroll taxes	325,814.	263,021.	19,802.	42,991.
11 Fees for services (non-employees):				
a Management				
b Legal	94,927.	88,466.		6,461.
c Accounting	124,104.	77,205.	46,899.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	524,878.			524,878.
f Investment management fees	177,585.		177,585.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,892,220.	1,874,463.	6,280.	11,477.
12 Advertising and promotion	25,445.	14,123.		11,322.
13 Office expenses	1,169,636.	956,309.	137,968.	75,359.
14 Information technology	561,908.	318,301.	106,452.	137,155.
15 Royalties				
16 Occupancy	543,818.	276,540.	267,278.	
17 Travel	1,395,845.	1,192,412.	15,142.	188,291.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,875,046.	1,846,706.	5,010.	23,330.
20 Interest	45,041.	38,698.		6,343.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	403,208.	265,820.	135,387.	2,001.
23 Insurance	13,919.	11,817.	2,102.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>FIELD EQUIPMENT</b>	940,756.	940,756.		
b <b>DIRECT MAILING COSTS</b>	786,651.	681,698.		104,953.
c <b>CONSTRUCTION</b>	577,105.	577,105.		
d <b>VEHICLE OPERATIONS</b>	412,740.	412,740.		
e All other expenses	355,620.	651,381.	-387,808.	92,047.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	27,175,925.	23,624,235.	1,097,536.	2,454,154.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	1,163,203.	321,192.	0.	842,011.



**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	2,633,387.	1	1,428,422.
	2	Savings and temporary cash investments	1,360,847.	2	1,389,686.
	3	Pledges and grants receivable, net	8,408,982.	3	11,810,802.
	4	Accounts receivable, net	457,012.	4	247,610.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net	856,294.	7	959,950.
	8	Inventories for sale or use	250,382.	8	164,828.
	9	Prepaid expenses and deferred charges	542,621.	9	365,425.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,012,970.		
	b	Less: accumulated depreciation	10b 2,155,054.	10c	3,857,916.
	11	Investments - publicly traded securities	26,429,801.	11	26,244,785.
	12	Investments - other securities. See Part IV, line 11	-1,056,029.	12	-1,161,157.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	701,491.	15	1,044,895.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	44,743,327.	16	46,353,162.	
Liabilities	17	Accounts payable and accrued expenses	1,762,532.	17	1,933,141.
	18	Grants payable		18	
	19	Deferred revenue	2,786,095.	19	1,549,686.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	766,000.	23	166,250.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	434,120.	25	389,041.
	26	<b>Total liabilities.</b> Add lines 17 through 25	5,748,747.	26	4,038,118.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	26,435,760.	27	27,851,685.
	28	Temporarily restricted net assets	9,446,505.	28	11,351,044.
	29	Permanently restricted net assets	3,112,315.	29	3,112,315.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	<b>Total net assets or fund balances</b>	38,994,580.	33	42,315,044.	
34	<b>Total liabilities and net assets/fund balances</b>	44,743,327.	34	46,353,162.	

Form 990 (2014)



**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	32,280,525.
2	Total expenses (must equal Part IX, column (A), line 25)	2	27,175,925.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,104,600.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	38,994,580.
5	Net unrealized gains (losses) on investments	5	-1,784,136.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	42,315,044.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	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	
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 (2014)



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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2014**

Open to Public  
Inspection

Name of the organization <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>	Employer identification number <b>52-0781390</b>
--	---

**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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations \_\_\_\_\_

**g 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 listed in your governing document?		(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
			Yes	No		
<b>Total</b>						



**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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	24614325.	19132189.	21999183.	26722612.	31585502.	124053811
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	24614325.	19132189.	21999183.	26722612.	31585502.	124053811
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)						8700453.
6 Public support. Subtract line 5 from line 4.						115353358

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	24614325.	19132189.	21999183.	26722612.	31585502.	124053811
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1039029.	865,510.	851,922.	905,558.	1050414.	4712433.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10,190.	11,618.	20,675.	20,799.	29,875.	93,157.
11 Total support. Add lines 7 through 10						128859401
12 Gross receipts from related activities, etc. (see instructions)					12	2,267,446.
13 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						<input type="checkbox"/>

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

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	89.52	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	90.60	%
16a 33 1/3% support test - 2014. 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 33 1/3% support test - 2013. 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 10% -facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2013. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 VI.)						
<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 2014 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2013 Schedule A, Part III, line 15	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2013 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests - 2014.** 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 - 2013.** 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 Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

**Section D. Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.			



**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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



**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in <b>Part VI</b> ). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014







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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number

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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

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

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

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

**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 its Form 990-PF, Part I, line 2, 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) (2014)



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). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>6,457,876.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ <u>4,026,114.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ <u>2,614,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ <u>4,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ <u>1,655,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ <u>730,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>	Employer identification number <b>52-0781390</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	2,927 SHARES OF STRYKER CORPORATION STOCK	\$ 242,034.	07/16/14
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____



Name of organization <b>AFRICAN WILDLIFE FOUNDATION, INC.</b>	Employer identification number <b>52-0781390</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
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
<b>(e) Transfer of gift</b>			
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
<b>(e) Transfer of gift</b>			
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
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	



**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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

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 value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....	1,112,269.	
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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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).
- Preservation of land for public use (e.g., recreation or education)     Preservation of a historically important land area
- Protection of natural habitat     Preservation of a certified historic structure
- Preservation of open space

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

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

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

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

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



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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII 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, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	26,614,112.	22,168,845.	19,788,812.	15,239,993.	12,423,622.
b Contributions	4,756,044.	2,818,826.	1,382,884.	4,569,518.	1,641,519.
c Net investment earnings, gains, and losses	-1,523,554.	2,754,271.	1,179,053.	424,401.	1,571,398.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,967,452.	1,127,830.	181,904.	445,100.	396,546.
f Administrative expenses					
g End of year balance	26,879,150.	26,614,112.	22,168,845.	19,788,812.	15,239,993.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  87.73 %
  - b Permanent endowment  11.58 %
  - c Temporarily restricted endowment  .69 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No                                  |
|---|-----|-------------------------------------|
| (i) unrelated organizations   |     | <input checked="" type="checkbox"/> |
| (ii) related organizations  |     | <input checked="" type="checkbox"/> |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b  |                                     |

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		993,157.		993,157.
b Buildings		2,239,665.	207,676.	2,031,989.
c Leasehold improvements		448,489.	292,248.	156,241.
d Equipment		1,030,619.	774,643.	255,976.
e Other		1,301,040.	880,487.	420,553.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,857,916.



**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. 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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT AND LEASE INCENTIVES	138,300.
(3) ANNUITIES PAYABLE	74,860.
(4) DEFINED COMPENSATION LIABILITY	175,881.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	389,041.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

**Part XIII Supplemental Information.**

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

**PART V, LINE 4:**

THE BOARD OF TRUSTEES HAS ADOPTED A SPENDING POLICY TO USE 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. AWF GENERALLY EXPECTS UNRESTRICTED LEGACY GIFTS TO MEET OR EXCEED THE REQUIRED ANNUAL SPENDING PAYOUT FROM THE BOARD-RESTRICTED ENDOWMENT, RESULTING IN NET POSITIVE CASH FLOWS TO THE FUND ON AN ANNUAL BASIS. COUPLED WITH AWF'S STATED RETURN OBJECTIVE, THE BOARD-DESIGNATED ENDOWMENT FUND IS EXPECTED TO ACHIEVE REAL GROWTH NET OF INFLATION OVER THE LONG-RUN.



**Part XIII** Supplemental Information (continued)

PART X, LINE 2:

AWF PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED JUNE 30, 2015 AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION OR DISCLOSURE IN THESE CONSOLIDATED FINANCIAL STATEMENTS OR WHICH MAY HAVE AN EFFECT ON THE TAX-EXEMPT STATUS OF AWF.



**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

**2014**

Open to Public Inspection

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

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

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

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**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	139	EMPLOYEES		5,908,183.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		5,626,481.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CONSERVATION PROGRAMS, EDUCATION & OUTREACH	11,491,026.
SUB-SAHARAN AFRICA	15	0	MAINTAINING OFFICES		392,604.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	2	EMPLOYEES		199,168.
EUROPE (INCLUDING ICELAND & GREENLAND)	2	0	MAINTAINING OFFICES		6,773.
<b>3 a Sub-total</b> .....	17	141			23,624,235.
<b>b Total from continuation sheets to Part I</b> .....	0	0			0.
<b>c Totals (add lines 3a and 3b)</b> .....	17	141			23,624,235.

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

Schedule F (Form 990) 2014

432071  
09-24-14

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

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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	DIALOGUE ON WILDLIFE AND ENVIRONMENTAL CRIMES, PROSECUTION AND ADJUDICATION OF	22,032.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	DEVELOPMENT OF VULNERABILITY & ADAPTATION FRAMEWORK FOR DRY LAND/SAVANNA	18,820.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CAPACITY BUILDING FOR AMBOSELI LIVESTOCK MARKETING ASSOCIATION	20,257.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	DEVELOPING SYSTEMS AND REVENUE MANAGEMENT FOR BURUNGE AND RANDILEN	9,008.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	SHIPMENT OF DOGS TO KILIMANJARO	6,300.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	WILDLIFE MONITORING AND ANTI-POACHING OPERATIONS IN THE ENDUIMENT WILDLIFE	57,032.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT TO OLE NARIKA & KITENDEN SCOUTS AND PAYMENT OF KITENDEN LEASES	214,760.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	MONITORING APES & OTHER LARGE MAMMALS IN THE PARK	17,450.	WIRE/EFT	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 ..... **43**

3 Enter total number of other organizations or entities ..... **55**

SEE PART V FOR COLUMN (D) DESCRIPTIONS

**COPY**



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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	STATUS, RESOURCE USE, AND THREATS TO CRITICAL WETLANDS OF AMBOSELI OUTSIDE OF	21,638.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	ENHANCING LIVELIHOOD THROUGH MOBILIZATION, FORMATION AND TRAINING OF VILLAGE	9,011.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	WILDLIFE PROTECTION IN THE LOWER ZAMBEZI, ZAMBIA	46,771.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CONSTRUCTION OF PIT LATRINE AND REST SHED IN LMNP	14,610.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	IMPROVING LIVESTOCK BREEDS FOR SUSTAINABLE LIVELIHOODS LAIKIPIA	9,961.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	KWS - IMPROVEMENT OF WATER INFRASTRUCTURE FOR RHINOS IN TSAVO WEST NATIONAL PARK	9,940.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	CONCEPT FOR THE DISTRIBUTION OF IMPROVED COOKING STOVES IN SIMIEN	5,842.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	RUGGED SMART PHONES FOR UGANDA WILDLIFE AUTHORITY	16,037.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	RHINO MANAGEMENT AND SUPPORT OF LAW ENFORCEMENT OPERATIONS: GREAT	65,000.	WIRE/EFT	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)

<b>1</b> (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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT FOR THE AFRICAN RHINO SPECIALIST GROUP (AFRSG) BIENNIAL	15,000.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CAPACITY BUILDING FOR LIVESTOCK COOPERATIVES IN ENDUIMENT WMA	40,304.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CONSERVING KENYA'S LIONS THROUGH SUCCESSFUL COMMUNITY ENGAGEMENT AND	21,792.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT TO FARO NATIONAL PARK	11,017.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT TO ACCA IN ACTIVITIES TOWARDS CONSERVANCY	14,706.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	ENHANCING TOURISM PRODUCTS AND OPERATIONS FOR CBTES IN KAJIADO, KISII,	29,008.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	REDEMARCATION OF BURUNGE WMA AREA	15,763.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	ENHANCING AFRICAN WILDLIFE LAW ENFORCEMENT AND NETWORKING	175,146.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PROTECTING THE AFRICAN ELEPHANT IN THE KAFUE ECO-SYSTEM AND THROUGHOUT	55,108.	WIRE/EFT	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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	MANYARA RANCH ANTI-POACHING PROGRAM	157,311.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	REGIONAL SUMMIT TO STOP WILDLIFE CRIME AND ADVANCE WILDLIFE CONSERVATION	20,000.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	MANAGEMENT OF THE BILI MBOMU FOREST SAVANNA COMPLEX	189,848.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION (CAFEC)-MARINGA-LOPOR	422,868.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	DEVELOPMENT SYSTEMS FOR GOVERNANCE IN ENSURING SUSTAINABILITY OF	9,737.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	IMPLEMENTATION OF CONSERVATION AGRICULTURE PROJECT IN RUNGWE AND MAKETE	18,936.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUSTAINABLE GROWTH AND ADAPTATION IN SIX COUNTIES IN KENYA	21,200.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	IMPROVING LIVESTOCK BREEDS FOR SUSTAINABLE LIVELIHOODS LAIKIPIA	6,567.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT KOLO HILLS FOREST PATROLS PLAN AND OPERATIONALIZATION	7,601.	WIRE/EFT	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	TRAIL CONSTRUCTION - KIDEPO VALLEY NATIONAL PARK	6,673.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SAFEGUARDING BONOBO AND MARINGA-LOPORI-WAMBA FOREST LANDSCAPE	157,371.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	ELEPHANT CONSERVATION	35,292.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	EFFICIENT UTILIZATION OF AVAILABLE WATER IN KAJIADO SOUTH SUB-COUNTY, NAMELOK	62,412.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	DEVELOPMENT OF A STRATEGIC FOCUS FOR THE SUPPORT OF THE CONSERVANCY MOVEMENT	19,965.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	WILDLIFE REGULATIONS DRAFTING, NGULIA RHINO PROGRAM, TSAVO WEST NATIONAL PARK	79,162.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	MARA REGIONAL LION RESEARCH AND CONSERVATION PROJECT	35,527.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	VILLAGE TOURISM INCOME TO BE DISTRIBUTED TO OLTUKAI AND ISILALEI	6,524.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	RESTORATION PLANTING OF TREES AT KIRISIA FOREST DURING 2015 LONG RAINS	23,971.	WIRE/EFT	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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CAPACITY BUILDING ON FINANCIAL MANAGEMENT, GOOD GOVERNANCE AND FARM INPUTS SUPPORT	19,231.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	RHINO PROTECTION IN HLUHLUWE IMPOLONZI PARK (KWAZULU NATAL)	52,131.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	IMPROVING LIVESTOCK BREEDS FOR SUSTAINABLE LIVELIHOODS LAIKIPIA	20,806.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SVC COMMUNITY PARTNERSHIP WORKSHOPS	9,767.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	MANYARA RANCH INTERNET SERVICES	17,863.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	FUND DISTRIBUTION FROM MANTIS TOURISM INCOME - VILLAGE PAYMENTS	6,524.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	BILI UELE ELEPHANT PROTECTION	20,119.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	RESTORATION PLANTING-PITTING & SUPPORT OF ENDERIT COMMUNITY FOREST	76,329.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	LIVELIHOOD IMPROVEMENT IN MAU NAROK AREA, NAKURU COUNTY	87,419.	WIRE/EFT	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	SCALING UP CONSERVATION AND LIVELIHOODS EFFORTS IN NORTHERN	6,408.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT JOINT FOREST MANAGEMENT SIGNING EVENT	17,435.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	LFFN MAASAI STEPPE LEARNING DIALOGUE	9,731.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT TO THE OPERATIONS OF INYAMBO COMMUNITY DEVELOPMENT TRUST	16,214.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	NALLEPU CONSERVANCY LEASE PAYMENTS	25,654.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	NALARAMI LEASE PAYMENTS	23,670.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	A CONCEPT NOTE FOR THE AFRICAN WILD DOG AND OTHER WILDLIFE SPECIES CONSERVATION	17,951.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	INTENSIVE AGRICULTURE AND DRIP IRRIGATION IN NAMELOK	24,198.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	EXTENDED SUPPORT TO NYANGABE WILDLIFE PROJECT :JUL-SEP 014 STAFF WAGES	6,357.	WIRE/EFT	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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SECURING OF THE GREATER OL LENTILLE CONSERVANCY (INCLUDING OL DONYIRO	41,800.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	ADC-MUTARA RANGERS SUPPORT UNIFORMS& TRAINING	5,059.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	OLEPOLOS LAND LEASES	17,550.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	ENHANCING THE PROTECTION, BIOLOGICAL MANAGEMENT AND MONITORING OF	49,500.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	OLTIYANI CONSERVANCY LEASE PAYMENTS	29,226.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION (CAFEC)- MARINGA-LOPORI-WAMBA	27,076.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	OSUPUKO LAND LEASES	16,964.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	ENGAGING COMMUNITIES TO PROTECT WILDLIFE AROUND TANZANIA'S RUAHA LANDSCAPE	28,615.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	HWANGE PAINTED DOG CONSERVATION ANTI-POACHING UNITS ZERO TOLERANCE TO	8,285.	WIRE/EFT	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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	RUVUMA ELEPHANT PROJECT	44,117.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION (CAFEC)-MARINGA-LOPOR	87,326.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	WRUA VISIT TO LAIKIPIA AND RIPARIAN LAND OWNERS-1	5,786.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	HELICOPTER FOR SABI SAND WILDTUIN ANTI-RHINO POACHING INITIATIVE	281,000.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	DIESEL FOR MANYARA RANCH OPERATIONS	10,429.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	VACCINES FOR AMBOSELI LIVESTOCK MARKETING ASSOCIATION MEMBERS	20,691.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	WILDLIFE MONITORING AND ANTI-POACHING OPERATIONS AT OLTIIYANI AND NALARAMI	39,462.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PROTECTING NAMIBIA'S BLACK RHINO	62,039.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SUPPORT FOR RHINO PROTECTION	98,491.	WIRE/EFT	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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PROTECTION OF SEKUTE CONSERVATION COMMUNITY CONSERVATION AREA AND	34,214.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	IMPLEMENTATION OF CYBER TRACKER/SMART (SPATIAL MONITORING AND REPORTING TOOL)	54,942.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	HUMAN-LION CONFLICT MITIGATION IN THE MAASAI STEPPE, NORTHERN TANZANIA	10,500.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	MANNA POOLS ANTI POACHING WORKSHOP	13,500.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	IMPROVING FOREST GOVERNANCE AND INCREASING ACCOUNTABILITY WITHIN	20,752.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	SECURING THE SURVIVAL OF ETHIOPIAN WOLVES IN REMOTE MOUNTAIN ENCLAVES	15,000.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CONSTRUCTION COSTS FOR VILLAGE BASED TOURISM CIRCUIT AROUND SIMIEN	14,446.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PURCHASE OF DOGS	24,773.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	CONSERVATION FEE TO WILDLIFE DIVISION - JULY 2014	16,848.	WIRE/EFT	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 - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	PROTECTION OF ELEPHANTS IN THE DZANGA SANGHA PROTECTED AREAS (CAR)	50,000.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	COLLABORATION FOR THE LAIKIPIA UNITY AND LAND INITIATIVE (LULI)	27,158.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	ENHANCING AFRICAN WILDLIFE LAW ENFORCEMENT AND NETWORKING	109,000.	CHECK	0.		
		SUB-SAHARAN AFRICA	USAID/UGANDA BIODIVERSITY PROGRAM AND MONITORING CHIMPANZEES IN	214,975.	CHECK	0.		
		SUB-SAHARAN AFRICA	CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION (CAPEC) -- MARINGA-LOPO	68,535.	CHECK	0.		
		SUB-SAHARAN AFRICA	CAMPAIGN TO RAISE AWARENESS ON RHINO AND ELEPHANT POACHING CRISIS	566,724.	CHECK	0.		
		SUB-SAHARAN AFRICA	ELEPHANT CRISIS FUND	100,000.	CHECK	0.		
		SUB-SAHARAN AFRICA	ENHANCING ELEPHANT PROTECTION IN THE RUAHA-RUNGWA ECOSYSTEM	66,297.	CHECK	0.		
		SUB-SAHARAN AFRICA	DJOLU DRC REDD & PROJECT WORK	488,091.	CHECK	0.		



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

(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)
EDUCATION EASEMENTS	SUB-SAHARAN AFRICA	10	15,321	EFT/CHECK	0.		
FELLOWSHIP	SUB-SAHARAN AFRICA	1	31,012	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; do not file with Form 990)* .....  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, Information 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; do not file with Form 990)* .....  Yes  No

Schedule F (Form 990) 2014



**Part V** Supplemental Information

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

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 PROGRAM IMPLEMENTATION TEAMS (GENERALLY LANDSCAPE/PROGRAM DIRECTOR). THE GRANTS & CONTRACTS OFFICER REVIEWS THE SUB-RECIPIENT FINANCIAL REPORTS AND THEN FORWARDS TO THE GRANTS FINANCIAL MANAGER FOR A FURTHER QUALITY CONTROL. ONLY UPON THE REVIEW AND APPROVAL BY THE GRANTS FINANCIAL MANAGER AND THE TECHNICAL PROGRAM LEAD ARE FURTHER PAYMENTS OR ADVANCES PROVIDED. ALL LARGE SUB-RECIPIENTS PAYMENTS AND CONTRACTS ARE ROUTED TO THE VP-F&A AND/OR COO FOR ADDED SCRUTINY AND APPROVALS PRIOR TO DISTRIBUTION.

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,  
(D) PURPOSE OF GRANT: DIALOGUE ON WILDLIFE AND ENVIRONMENTAL CRIMES, PROSECUTION AND ADJUDICATION OF JUSTICE IN KENYA, TO CURB ESCALATING POACHING AND TRAFFICKING OF WILDLIFE

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,  
(D) PURPOSE OF GRANT: DEVELOPMENT OF VULNERABILITY & ADAPTATION FRAMEWORK FOR DRY LAND/SAVANNA ECOSYSTEM PROCESSES AND SERVICES

**COPY**

**Part V** Supplemental Information

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

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: DEVELOPING SYSTEMS AND REVENUE MANAGEMENT FOR BURUNGE AND RANDILEN WILDLIFE MANAGEMENT AREAS

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: WILDLIFE MONITORING AND ANTI-POACHING OPERATIONS IN THE ENDUIMENT WILDLIFE MANAGEMENT AREAS

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: STATUS, RESOURCE USE, AND THREATS TO CRITICAL WETLANDS OF AMBOSELI OUTSIDE OF THE PARK, KENYA

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: ENHANCING LIVELIHOOD THROUGH MOBILIZATION, FORMATION AND TRAINING OF VILLAGE COMMUNITY BANKS (VICOBA)

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: IMPROVING LIVESTOCK BREEDS FOR SUSTAINABLE LIVELIHOODS LAIKIPIA NORTH - SAHIWAL BULLS

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CONCEPT FOR THE DISTRIBUTION OF IMPROVED COOKING STOVES IN SIMIEN MOUNTAIN COMMUNITIES

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: RHINO MANAGEMENT AND SUPPORT OF LAW ENFORCEMENT OPERATIONS: GREAT FISH RIVER NATURE RESERVE



**Part V** Supplemental Information

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

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: SUPPORT FOR THE AFRICAN RHINO SPECIALIST GROUP  
(AFRSG) BIENNIAL MEETING

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: CONSERVING KENYA'S LIONS THROUGH SUCCESSFUL  
COMMUNITY ENGAGEMENT AND RESEARCH - AN EXPANSION

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: ENHANCING TOURISM PRODUCTS AND OPERATIONS FOR  
CBTES IN KAJIADO, KISII, KAKAMEGA AND KISUMU

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: PROTECTING THE AFRICAN ELEPHANT IN THE KAFUE  
ECO-SYSTEM AND THROUGHOUT ZAMBIA'S PROTECTED AREA NETWORK

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION  
(CAFEC)-MARINGA-LOPORI-WAMBA FOREST LANDSCAPE

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: DEVELOPMENT SYSTEMS FOR GOVERNANCE IN ENSURING  
SUSTAINABILITY OF WILDLIFE MANAGEMENT AUTHORITIES

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: IMPLEMENTATION OF CONSERVATION AGRICULTURE PROJECT

**Part V** Supplemental Information

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

IN RUNGWE AND MAKETE IN DISTRICTS

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: IMPROVING LIVESTOCK BREEDS FOR SUSTAINABLE LIVELIHOODS LAIKIPIA NORTH - 20 DORPER RAMS FOR LLMA

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: EFFICIENT UTILIZATION OF AVAILABLE WATER IN KAJIADO SOUTH SUB-COUNTY, NAMELOK AREA

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: DEVELOPMENT OF A STRATEGIC FOCUS FOR THE SUPPORT OF THE CONSERVANCY MOVEMENT IN KENYA

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: WILDLIFE REGULATIONS DRAFTING, NGULIA RHINO PROGRAM, TSAVO WEST NATIONAL PARK RHINO ANTI-POACHING & WATER IMPROVEMENT

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: VILLAGE TOURISM INCOME TO BE DISTRIBUTED TO OLTUKAI AND ISILALEI VILLAGES

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: CAPACITY BUILDING ON FINANCIAL MANAGEMENT, GOOD GOVERNANCE AND FARM INPUTS SUPPORT FOR KONDOA FARMERS NETWORK (MVIWAKO)

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,



**Part V** Supplemental Information

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

(D) PURPOSE OF GRANT: IMPROVING LIVESTOCK BREEDS FOR SUSTAINABLE LIVELIHOODS LAIKIPIA NORTH

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: RESTORATION PLANTING-PITTING & SUPPORT OF ENDERIT COMMUNITY FOREST SCOUTS

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: SCALING UP CONSERVATION AND LIVELIHOODS EFFORTS IN NORTHERN TANZANIA(SCALE -TZ)

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: A CONCEPT NOTE FOR THE AFRICAN WILD DOG AND OTHER WILDLIFE SPECIES CONSERVATION IN KIRIMUN GROUP RANCH

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: SECURING OF THE GREATER OL LENTILLE CONSERVANCY (INCLUDING OL DONYIRO ELEPHANT CORRIDOR) THAT SUPPORTS MIGRATORY SPECIES SUCH AS AFRICAN WILD DOG, GREATER KUDUS AND GREVY'S ZEBRA IN PARTNERSHIP WITH OL LENTILLE TRUST KENYA

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: ENHANCING THE PROTECTION, BIOLOGICAL MANAGEMENT AND MONITORING OF BLACK RHINO

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION

**Part V Supplemental Information**

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

(CAFEC) - MARINGA-LOPORI-WAMBA FOREST LANDSCAPE

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: HWANGE PAINTED DOG CONSERVATION ANTI-POACHING

UNITS ZERO TOLERANCE TO WILDLIFE CRIME

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION

(CAFEC) - MARINGA-LOPORI-WAMBA FOREST LANDSCAPE

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: WILDLIFE MONITORING AND ANTI-POACHING OPERATIONS

AT OLTIIYANI AND NALARAMI CONSERVANCIES

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: PROTECTION OF SEKUTE CONSERVATION COMMUNITY

CONSERVATION AREA AND THE WILDLIFE CORRIDORS

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: IMPLEMENTATION OF CYBER TRACKER/SMART (SPATIAL MONITORING AND REPORTING TOOL) TECHNOLOGY-GUIDED ANTI-POACHING FOR

PROTECTION OF THE ELEPHANT POPULATION OF THE 5,260KM DJA FAUNAL RESERVE

(CAMEROUN)

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: IMPROVING FOREST GOVERNANCE AND INCREASING

ACCOUNTABILITY WITHIN 13 REDD PILOT VILLAGES IN KONDOA; STRENGTHENING



**Part V** Supplemental Information

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

VILLAGE NATURAL RESOURCES COMMITTEES

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: CONSTRUCTION COSTS FOR VILLAGE BASED TOURISM

CIRCUIT AROUND SIMIEN MOUNTAIN NATIONAL PARK

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: USAID/UGANDA BIODIVERSITY PROGRAM AND MONITORING

CHIMPANZEES IN COMMUNITY NATURAL RESERVE OF DINDEFELO AND SURROUNDINGS,

SENEGAL

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION

(CAFEC) --MARINGA-LOPORI-WAMBA FOREST LANDSCAPE





**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
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts .....				
	<b>2</b> Less: 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. Subtract line 10 from line 3, column (d) .....				

**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))
		<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. Subtract line 7 from line 1, column (d) .....					

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states?  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 conduct gaming activities with nonmembers?  Yes  No

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

13 Indicate the percentage of gaming activity conducted 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.** 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 provide any additional information (see instructions).

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

(I) NAME OF FUNDRAISER: SANKY COMMUNICATIONS, INC.

(I) ADDRESS OF FUNDRAISER: 599 11TH AVENUE, 6TH FLOOR, NEW YORK, NY 10036

**COPY**





**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Open to Public  
Inspection

Name of the organization

**AFRICAN WILDLIFE FOUNDATION, INC.**

Employer identification number

**52-0781390**

**Part I Questions Regarding Compensation**

		Yes	No
<b>1a</b>	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"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input checked="" type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</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	<b>X</b>	
<b>2</b>	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	<b>X</b>	
<b>3</b>	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b>	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:		
<b>a</b>	Receive a severance payment or change-of-control payment?		<b>X</b>
<b>b</b>	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		<b>X</b>
<b>c</b>	Participate in, or receive payment from, an equity-based compensation arrangement?		<b>X</b>
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>			
<b>5</b>	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:		
<b>a</b>	The organization?		<b>X</b>
<b>b</b>	Any related organization? If "Yes" to line 5a or 5b, describe in Part III.		<b>X</b>
<b>6</b>	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:		
<b>a</b>	The organization?		<b>X</b>
<b>b</b>	Any related organization? If "Yes" to line 6a or 6b, describe in Part III.		<b>X</b>
<b>7</b>	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		<b>X</b>
<b>8</b>	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		<b>X</b>
<b>9</b>	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Schedule J (Form 990) 2014



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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PATRICK BERGIN CHIEF EXECUTIVE OFFICER	(i)	249,776.	0.	0.	42,409.	20,231.	312,416.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JEFF CHRISFIELD CHIEF OPERATING OFFICER	(i)	205,530.	0.	0.	20,625.	14,640.	240,795.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CRAIG SHOLLEY VP OF PHILANTHROPY/MARKETING	(i)	172,139.	0.	0.	17,187.	11,987.	201,313.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DAUDI SUMBA VP OF PROGRAM DESIGN AND GOVERNMENT	(i)	167,188.	0.	0.	16,719.	4,887.	188,794.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KATHLEEN FITZGERALD VP OF CONSERVATION STRATEGY	(i)	152,972.	0.	0.	15,269.	34,096.	202,337.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CHARLY FACHEUX VP OF CONSERVATION PROJECTS	(i)	126,950.	0.	0.	12,695.	13,485.	153,130.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) TYRENE HARALSON VP OF FINANCE AND ADMINISTRATION	(i)	135,264.	0.	0.	13,500.	15,108.	163,872.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) KADDU SEBUNYA CHIEF OF PARTY-USAID UGANDA PROGRAM	(i)	135,396.	0.	0.	13,504.	84,830.	233,730.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

**PART I, LINE 1A:**

DURING THE YEAR ENDED JUNE 30, 2015, AWF PAID A HOUSING ALLOWANCE DIRECTLY TO A LANDLORD AND A SCHOOL ON BEHALF OF KADDU SEBUNYA, CHIEF OF PARTY-USAID UGANDA PROGRAM. THE TOTAL AMOUNT OF THIS BENEFIT WAS \$91,479 AND NONE OF THIS AMOUNT WAS TAXABLE COMPENSATION TO MR. SEBUNYA.



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2014**

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

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	41	562,066.	FAIR MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ( )				
26	Other ( )				
27	Other ( )				
28	Other ( )				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

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) (2014)





**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.

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

OMB No. 1545-0047

**2014**

Open to Public  
Inspection

Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number  
52-0781390

FORM 990, PART III, LINE 4A:

AWF CONTINUES TO PIONEER THE USE OF COMMUNITY CONSERVATION ENTERPRISES,  
PROVIDE CRITICAL ASSISTANCE TO NATIONAL PARKS AND RESERVES, AND PROMOTE  
INTERNATIONAL COOPERATION TO PROTECT IMPORTANT SITES AND POPULATIONS  
THAT STRETCH ACROSS NATIONAL BOUNDARIES-DEMONSTRATING THAT WILDLIFE AND  
PEOPLE CAN THRIVE SIDE BY SIDE. AWF'S WORK CAN BE CATEGORIZED INTO FOUR  
CORE AREAS- LAND AND HABITAT CONSERVATION, WILDLIFE PROTECTION,  
CONSERVATION ENTERPRISE, EDUCATION AND TRAINING. AWF IS ALSO ACTIVE IN  
CLIMATE CHANGE ACTIVITIES AND IN POLICY DISCUSSIONS. BELOW IS A BRIEF  
DESCRIPTION OF AWF'S PERSPECTIVE ON EACH CATEGORY AND KEY ACHIEVEMENTS  
WITHIN THE LAST FISCAL YEAR.

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

I. AWF HAS WORKED CLOSELY WITH THE WILDLIFE AUTHORITY IN THE DJA FAUNAL  
RESERVE IN CAMEROON, A WORLD HERITAGE SITE THAT IS AT RISK OF BECOMING  
A WORLD HERITAGE SITE IN DANGER. TO ENSURE THAT THIS DOES NOT HAPPEN,  
AWF HAS PROVIDED TRAINING AND TECHNICAL SUPPORT ON THE ECOLOGICAL

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

Schedule O (Form 990 or 990-EZ) (2014)

432211  
08-27-14



Name of the organization AFRICAN WILDLIFE FOUNDATION, INC.	Employer identification number 52-0781390
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MONITORING OF THE RESERVE TO ENSURE THIS BIODIVERSE RAINFOREST REMAINS PROTECTED FROM POACHERS AND TRESPASSERS WHO MAY CHUNT FOR BUSHMEAT AND CUT DOWN TREES. WE FIRST PROVIDED TRAINING IN THE USE OF HANDHELD ECOLOGICAL MONITORING DEVICES AND ITS ATTENDANT SOFTWARE TO ENSURE REGULAR DATA COLLECTION DURING PATROLS, THEN WORKED WITH THE LOCAL WILDLIFE AUTHORITY TO MORE EFFECTIVELY PLAN PATROLS, BASED ON THE DATA COLLECTED. AWF ALSO CONDUCTED A FIVE-DAY EXPEDITION THROUGH THE CENTRAL PART OF THE RESERVE, WHICH DOES NOT GET PATROLLED REGULARLY, TO DETERMINE THE TRUE STATE OF THIS FOREST. FINDINGS FROM THIS EXPEDITION WERE SUBSEQUENTLY SHARED WITH THE MINISTRY OF ENVIRONMENT AND FORESTRY TO DEVELOP AN UPDATED PLAN FOR PROTECTING THE RESERVE.

B. WILDLIFE PROTECTION: EVEN WHERE LAND AND HABITAT HAVE BEEN SECURED, CERTAIN SPECIES FACE UNIQUE THREATS AND REQUIRE A TARGETED CONSERVATION APPROACH. POPULATIONS OF RARE AND ENDANGERED SPECIES, SUCH AS THE RHINOCEROS, GORILLA, AND ALL OF THE GREAT CATS, HAVE BEEN DIMINISHED DUE TO POACHING, DISEASE, AND CONFLICT WITH HUMANS. AWF USES A NUMBER OF METHODS TO MONITOR AND PROTECT KEY POPULATIONS AND ENSURE THESE SPECIES SURVIVE AND THRIVE IN THEIR NATIVE HABITAT. ONE OF THESE TACTICS IS TO PROVIDE FUNDING TO PARTNERS ON THE GROUND THROUGH THE SPECIES PROTECTION GRANTS PROGRAM, WHICH HAS EVOLVED INTO AN URGENT RESPONSE FUND AIMED AT COMBATING THE ILLEGAL WILDLIFE TRADE THROUGH INITIATIVES THAT STOP THE KILLING, STOP THE TRAFFICKING AND STOP THE DEMAND. THE GRANTS PROGRAM FUNDS PROJECTS IN SIX THEMATIC AREAS: ELEPHANTS, RHINOS, CARNIVORES, GREAT APES, LAW ENFORCEMENT, AND AWARENESS.

I. IN SOUTHERN AFRICA, AWF HAS UNDERWRITTEN THE PURCHASE OF A

432212  
08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

62

06400201 786783 AWF

2014.05060 AFRICAN WILDLIFE FOUNDATION AWF COPY 1



Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number

52-0781390

HELICOPTER TO STRENGTHEN ANTI-POACHING OPERATIONS AT SABI SANDS WILDTUIN, A GAME RESERVE NEXT TO KRUGER NATIONAL PARK THAT HAS A SIGNIFICANT RHINO POPULATION. THE HELICOPTER HAS HELPED DECREASE POACHING ON THE RESERVE, LED TO THE ARREST OF POACHERS, AND PREVENTED POACHING. IN NORTHERN TANZANIA, SUPPORT FOR ANTI-POACHING PATROLS ON THE AWF-MANAGED MANYARA RANCH HAVE BEEN SUCCESSFUL IN REDUCING ELEPHANT POACHING AND LEADING TO THE CAPTURE OF A NUMBER OF POACHERS. IN SOUTHERN TANZANIA AND NORTHERN KENYA, AWF IS PROVIDING SUPPORT TO LION RESEARCHERS WHO ARE ALSO WORKING WITH COMMUNITIES TO MITIGATE HUMAN-LION CONFLICT.

II. TO HELP LIMIT THE TRAFFICKING OF WILDLIFE PRODUCTS OFF THE CONTINENT OF AFRICA, AWF THIS PAST YEAR LAUNCHED A NEW CANINE CONSERVATION PROGRAM. THE PROGRAM OFFERS A BEST-IN-CLASS TRAINING PROGRAM FOR IVORY AND RHINO HORN DETECTION CANINES, WHICH ARE SELECTED FROM THE BEST BREEDERS IN EUROPE AND THEN BROUGHT TO AWF'S CANINE TRAINING FACILITY IN TANZANIA TO LEARN HOW TO DETECT THESE WILDLIFE PRODUCTS. THESE DOGS ARE TRAINED ALONGSIDE HANDLERS FROM WILDLIFE AUTHORITIES ACROSS THE AFRICAN CONTINENT, TO ENSURE A SOLID BOND AND COORDINATION BETWEEN DOG AND HANDLER WHEN ON THE JOB. THE CONSERVATION CANINE PROGRAM HAS ALREADY DEPLOYED HANDLERS AND DOGS TO AIRPORTS IN MOMBASA, KENYA, AND IN DAR ES SALAAM, TANZANIA. DISCUSSIONS ARE UNDERWAY WITH OTHER WILDLIFE AUTHORITIES IN BOTH EAST AND SOUTHERN AFRICA TO TRAIN A NEW GROUP OF DOGS AND HANDLERS FOR SPECIFIC COUNTRIES IN THESE REGIONS.

III. IN CENTRAL AND WEST AFRICA, AWF LAUNCHED THE AFRICAN APES INITIATIVE TO HELP ENSURE THAT GREAT APES IN AFRICA'S LAST REMAINING



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FORESTED HABITATS GET SUPPORT AND PROTECTION: GREAT APES IN AFRICA ARE AT RISK FROM HABITAT FRAGMENTATION AND DESTRUCTION, THE PET TRADE, TRANSFER OF HUMAN DISEASE, AND MORE. UNDER THE AFRICAN APES INITIATIVE, AWF IS TRAINING RANGERS IN SENEGAL'S NIOKOLO-KOBA NATIONAL PARK, CAMEROON'S DJA FAUNAL RESERVE AND DRC'S BILI UELE COMPLEX, AS WELL AS IN PROTECTED AREAS IN UGANDA, ON HOW TO USE CYBERTRACKERS AND SMART SOFTWARE TO IMPROVE ECOLOGICAL MONITORING AND THE EFFICIENCY OF ANTI-POACHING PATROLS.

IV. VIA SUPPORT PROVIDED THROUGH AWF'S URGENT RESPONSE FUND, AWF IS WORKING WITH WILDLIFE AUTHORITIES AND PARTNERS TO CONDUCT LAW ENFORCEMENT AND JUDICIAL TRAINING AROUND WILDLIFE CRIME. THE TRAININGS AIM TO SENSITIZE MEMBERS OF THE LAW ENFORCEMENT AND JUDICIARY COMMUNITY TO WILDLIFE CRIME AND WILDLIFE LAWS, IMPROVE HANDLING AND PROCESSING OF WILDLIFE CRIME CASES, INCREASE CONVICTION RATES AND IMPROVE DETERRENT SENTENCING OF THOSE CONVICTED OF POACHING OR WILDLIFE TRAFFICKING.

FORM 990, PART III, LINE 4A:

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 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.

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I. IN CENTRAL KENYA, AWF CONTINUES OUR SUPPORT OF A FINANCIAL SERVICES ORGANIZATION, NASARUNI SAVINGS AND CREDIT COOPERATIVE. THIS PAST YEAR, AWF SUPPORTED THE CONSTRUCTION OF A NEW BANKING HALL TO ENSURE A PERMANENT, AND CENTRAL, LOCATION FOR THE FINANCIAL ORGANIZATION, WHICH BOASTS UPWARDS OF 1,100 MEMBERS AND REGULARLY DISBURSES MORE THAN 500,000 KES IN LOANS EACH MONTH. ALONG WITH THE NEW BANKING HALL, AWF PROVIDED NEW TECHNOLOGY AND TRAINING TO ENSURE THE FINANCIAL SERVICES ORGANIZATION WILL BE RUN PROFESSIONALLY.

II. IN THE PASTORAL COMMUNITIES IN SOUTHERN KENYA, AWF HAS SUPPORTED LIVESTOCK MARKETING GROUPS AND LIVESTOCK-ORIENTED ENTERPRISES TO HELP COMMUNITIES REALIZE BETTER RETURNS ON THEIR CATTLE. IN FEBRUARY, AN AWF-SUPPORTED LIVESTOCK MARKET OPENED IN THE LANDSCAPE, ALLOWING THE 1,100-PLUS MEMBERS OF THE LIVESTOCK MARKETING GROUPS TO HAVE A CENTRAL MARKETPLACE FROM WHICH TO SELL AND BUY THEIR LIVESTOCK. COMMUNITIES HERE ARE NOW BETTER ABLE TO MANAGE THEIR LIVESTOCK AND SELL THEM AT A HIGHER COST, ALLOWING THEM TO LIMIT THE SIZE OF THEIR HERDS AND LIMIT THEIR INVOLVEMENT IN UNSUSTAINABLE USES OF NATURAL RESOURCES.

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

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PROTECT AND MANAGE WILDLIFE.

I. AWF'S CONSERVATION MANAGEMENT TRAINING PROGRAM, NOW CALLED THE CONSERVATION MANAGEMENT & LEADERSHIP PROGRAM TO REFLECT THE HIGH CALIBER OF CANDIDATES COME INTO THE PROGRAM AND THE INTENSIVE TRAINING THEY RECEIVE, CONTINUED WITH A NEW CLASS OF TRAINEES IN AUGUST OF 2014 AND AUGUST OF 2015. THE 2014 CLASS INCLUDED 6 ASSOCIATES, FROM KENYA, CAMEROON AND NIGERIA, WHO FIRST WORKED OUT OF AWF'S HEADQUARTERS FOR A FEW MONTHS BEFORE EMBEDDING IN DIFFERENT LANDSCAPES. ALREADY ONE OF THESE ASSOCIATES HAS BEEN HIRED FULL TIME BY AWF AS AN ECOLOGIST IN ONE OF OUR KENYAN PROJECT AREAS. THE OTHERS ARE LEARNING STEADILY UNDER MENTORSHIP OF AWF'S TECHNICAL AND LANDSCAPE STAFF. THE 2015 CLASS FEATURES 3 ASSOCIATES, FROM ETHIOPIA, UGANDA AND, FOR THE FIRST TIME, CHINA. THE REASON FOR THE CHINESE ASSOCIATE IS TO BEGIN TRAINING NOT ONLY AFRICAN CONSERVATIONISTS BUT ALSO CHINESE CONSERVATIONISTS IN THE ISSUES AROUND AFRICAN CONSERVATION, DUE TO THE HIGH INVOLVEMENT OF CHINA IN AFRICAN BUSINESS IN THE PAST FEW YEARS. FINALLY, THE CLASS FROM THE PREVIOUS YEAR, WHICH HAD STARTED THE PROGRAM IN 2013, RECENTLY GRADUATED AND TOOK ON FULL-TIME POSITIONS WITH AWF IN CONSERVATION PLANNING AND CONSERVATION STRATEGY, RESPECTIVELY. BOTH WORK OUT OF AWF'S NAIROBI HEADQUARTERS.

E. AFRICAN CONSERVATION SCHOOLS PROGRAM: AWF FINISHED CONSTRUCTION OF A NEW CONSERVATION PRIMARY SCHOOL IN THE DEMOCRATIC REPUBLIC OF CONGO. ILIMA FEATURES 6 CLASSROOMS BUILT LARGELY OUT OF LOCAL MATERIALS AND INCORPORATING CLIMATE-APPROPRIATE DESIGN TO ENSURE AN AIRY AND COMFORTABLE ENVIRONMENT IN WHICH CHILDREN CAN LEARN. IN ADDITION TO THE NEW SCHOOL, AWF HAS BEGUN ONGOING TRAINING FOR TEACHERS AT THE SCHOOL,

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BOTH ON CONSERVATION ISSUES AND ON PRACTICAL PEDAGOGY. IN A COUNTRY WHERE THE AVERAGE CITIZEN HAS ONLY ABOUT THREE YEARS OF FORMAL EDUCATION, ALREADY ENROLLMENT AT ILIMA HAS INCREASED BY 40 PERCENT SINCE ITS CONSTRUCTION. MEANWHILE, AWF HAS ALSO BEGUN REMODELING OF TWO EXISTING AWF-SUPPORTED SCHOOLS, IN NORTHERN TANZANIA AND SOUTHERN ZAMBIA, RESPECTIVELY. THE SCHOOL IN ZAMBIA HAS ALSO BENEFITED FROM A NUMBER OF CONSERVATION-ORIENTED EDUCATIONAL OPPORTUNITIES, INCLUDING PROGRAMMING FOR CHILDREN AROUND WORLD GIRAFFE DAY IN JUNE AND A FIELD TRIP TO THE FAMED VICTORIA FALLS AND MOSI-OA-TUNYA NATIONAL PARK, TO WHICH MANY OF THE STUDENTS HAD NEVER VISITED. FINALLY, DISCUSSIONS HAVE BEGUN ON DESIGNING NEW SCHOOLS IN ADISGE, ETHIOPIA, AND IN KIDEPO VALLEY, UGANDA, AS PART OF THIS SCHOOLS PROGRAM.

F. CLIMATE CHANGE AND POLICY WORK: AWF AND ITS PARTNERS ACROSS AFRICA'S LANDSCAPES CAN BE SUCCESSFUL ONLY IF RELEVANT POLICIES, LAWS, REGULATIONS, AND FINANCING MECHANISMS ARE SUPPORTIVE OF CONSERVATION AND RELATED ACHIEVEMENTS. AWF WORKS WITH INDIVIDUAL AFRICAN GOVERNMENTS, PARK AGENCIES, REGIONAL BODIES, AND INTERNATIONAL FUNDING AGENCIES TO HELP DEVELOP AND PROMOTE POLICIES THAT CREATE A ROBUST ENVIRONMENT FOR CONSERVATION AND SUSTAINABLE MODELS OF ECONOMIC DEVELOPMENT. AWF HAS ARTICULATED A SPECIFIC AGENDA, WHICH IS REVISITED EACH YEAR, OF THE MOST ESSENTIAL POLICY POSITIONS THAT WE URGE GOVERNMENTS TO ADOPT TO ENSURE THAT WILDLIFE SURVIVES WHILE CONTRIBUTING TO A PROSPEROUS FUTURE FOR AFRICA.

I. AWF HAS MADE CONSIDERABLE HEADWAY WITH SOME OF OUR REDD PROJECTS, PARTICULARLY IN KENYA AND IN TANZANIA. THE CHYULU REDD+ PROJECT IN KENYA RECENTLY BECAME AWF'S FIRST VALIDATED REDUCING EMISSIONS FROM



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DEFORESTATION AND FOREST DEGRADATION (REDD) PROJECT, ALLOWING COMMUNITIES EVEN GREATER INCENTIVE TO PROTECT 420,000 HECTARES OF CLOUD AND LAVA FORESTS AND SURROUNDING SAVANNA WOODLANDS, WHICH ALSO HAPPENS TO BE A CRITICAL WATER CATCHMENT AND PART OF A WILDLIFE CORRIDOR THAT CONNECTS AMBOSELI AND TSAVO NATIONAL PARKS. 420,000 HECTARES OF CLOUD AND LAVA FORESTS AND SURROUNDING SAVANNA WOODLANDS, WHICH ALSO HAPPENS TO BE A CRITICAL WATER CATCHMENT AND PART OF A WILDLIFE CORRIDOR THAT CONNECTS AMBOSELI AND TSAVO NATIONAL PARKS. WITH THIS VALIDATION, COMMUNITIES HERE NOW HAVE THE OPPORTUNITY TO SELL THE CARBON THEY'RE "SAVING" THROUGH PROTECTION OF THESE FORESTS ON THE INTERNATIONAL CARBON MARKET. MEANWHILE, AWF HAS MADE CONSIDERABLE PROGRESS ON OUR VALIDATION EFFORTS IN THE KOLO HILLS REDD PROJECT IN CENTRAL TANZANIA, SUBMITTING ALL PAPERWORK FOR THIS PROCESS AND LINING UP A POTENTIAL BUYER OF CARBON CREDITS

II. IN THE AFRICAN UNION'S VISION 2013 AGENDA, WHICH IS BOTH A VISION DOCUMENT AND ACTION PLAN FOR GROWTH AND DEVELOPMENT ON THE CONTINENT, AWF REQUESTED AND WAS GRANTED THE OPPORTUNITY TO SUBMIT REVISIONS FOR THE AGENDA DOCUMENT THAT HELPED TO PRIORITIZE PROTECTION OF AFRICA'S WILDLIFE AND NATURAL HERITAGE AMID THE CONTINENT'S PLANS FOR GROWTH. THESE REVISIONS WERE ULTIMATELY INCORPORATED INTO THE FINAL AGENDA DOCUMENT, THUS ENSURING AFRICA'S WILDLIFE AND WILD LANDS WOULD BE ACKNOWLEDGED FOR THEIR ECONOMIC, ECOLOGICAL AND FINANCIAL VALUE AND PROTECTED.

FORM 990, PART III, LINE 4B:

A. AWF RECENTLY LAUNCHED A CHINESE VERSION OF ITS WEBSITE TO PROVIDE ONLINE AUDIENCES IN CHINA THE OPPORTUNITY TO LEARN MORE ABOUT AWF'S

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WORK AND BECOME ENGAGED. CHINA IS HOME TO THE WORLD'S LARGEST IVORY MARKET, AND HAS BECOME A DESTINATION AND TRANSIT COUNTRY FOR ILLEGAL IVORY, WHICH IS TAKEN FROM ELEPHANTS POACHED IN AFRICA. INFORMING CHINESE CITIZENS ABOUT THE CONNECTION BETWEEN BUYING IVORY PRODUCTS AND ELEPHANT POACHING IN AFRICA, AND MOBILIZING THEM TO TAKE ACTION, IS A KEY OBJECTIVE OF THE CHINESE-LANGUAGE WEBSITE.

B. AWF HAS CONTINUED ITS PUBLIC AWARENESS CAMPAIGNS IN CHINA, VIETNAM AND THAILAND ON THE ELEPHANT AND RHINO POACHING CRISIS, INFORMING CONSUMERS THROUGH PSAS, BILLBOARD ADS, AND BUS WRAPS ABOUT THE IMPACTS OF BUYING IVORY AND RHINO HORN PRODUCTS. AWF AND ITS PARTNER WILDAID CONDUCTED TWO SURVEYS IN CHINA, ONE ON AWARENESS AROUND IVORY AND THE OTHER AROUND RHINO HORN, THE RESULTS OF WHICH SUGGEST THERE IS INCREASED AWARENESS OF THE CONNECTION BETWEEN BUYING IVORY OR RHINO HORN AND THE DEVASTATION OF ELEPHANTS AND RHINOS IN AFRICA. AWF AND ITS PARTNER WILDAID HAVE ALSO LAUNCHED A PUBLIC AWARENESS PROGRAM IN TANZANIA WITH THE HELP OF TANZANIAN RELIGIOUS LEADERS AND CELEBRITIES TO BRING ATTENTION TO THE POACHING CRISIS IN THAT COUNTRY. PSAS HAVE BEEN FILMED AND DISTRIBUTED TO MEDIA HOUSES IN DAR ES SALAAM, AND BILLBOARDS ARE CURRENTLY BEING ERECTED IN DAR ES SALAAM.

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

CONGO, DEM REP, ETHIOPIA, KENYA, SOUTH AFRICA,  
TANZANIA, UGANDA, UNITED KINGDOM, ZAMBIA,  
SOUTH SUDAN, ZIMBABWE, MAURITIUS

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

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DATA AND INFORMATION FOR THE FEDERAL FORM 990 ARE COMPILED BY THE FINANCE DEPARTMENT AND REVIEWED BY THE CONTROLLER. UPON RECEIPT OF THE FEDERAL FORM 990 FROM AWF'S TAX ACCOUNTANTS, THE COMPLETED RETURN UNDERGOES A SECOND LEVEL OF REVIEW BY THE VP OF FINANCE AND ADMINISTRATION (VP OF F&A). CHANGES ARE COMMUNICATED TO THE TAX ACCOUNTANTS AS NECESSARY AND APPROPRIATE. THE FINAL DRAFT IS REVIEWED BY THE VP OF F&A AND THE CHIEF OPERATING OFFICER (COO) BEFORE BEING PRESENTED TO THE AUDIT COMMITTEE. THEREAFTER, A COPY OF THE RETURN IS PROVIDED TO THE FULL BOARD OF TRUSTEES BEFORE FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

TRUSTEES AND OFFICERS RECEIVE AND SIGN A CONFLICT OF INTEREST POLICY STATEMENT UPON ELECTION TO THE BOARD OF TRUSTEES, WITH NEW FORMS COMPLETED AT LEAST ANNUALLY. IF A TRUSTEE FEELS SHE/HE MAY HAVE A POTENTIAL CONFLICT OF INTEREST WITH AWF, THESE CONCERNS ARE BROUGHT TO THE ATTENTION OF THE BOARD OF TRUSTEES' CHAIR AND/OR AUDIT COMMITTEE OF THE BOARD OF TRUSTEES' FOR DELIBERATION.

ALL STAFF MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY UPON HIRING AND WITH EACH NEW CONTRACT AMENDMENT. STAFF CONCERNS REGARDING CONFLICTS OF INTEREST ARE BROUGHT TO THE HUMAN RESOURCES DEPARTMENT FOR RESEARCH WITH REVIEW BY THE VP OF F&A AND OTHER MEMBERS OF EXECUTIVE MANAGEMENT AS NECESSARY.

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



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VP-F&A AND/OR COO FOR REVIEW.

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

A COMPENSATION STUDY FOR OFFICERS AND KEY EMPLOYEES IS CONDUCTED ANNUALLY. FOR ALL OFFICERS AND KEY STAFF LOCATED WITHIN THE UNITED STATES, INFORMATION FROM COMPARABLE ORGANIZATIONS IS COLLECTED THROUGH PUBLICLY AVAILABLE FEDERAL 990 FORMS. FOR KEY EMPLOYEES LOCATED OUTSIDE THE UNITED STATES, COMPENSATION STUDIES ARE OBTAINED AS NECESSARY TO PROVIDE COMPARABLE DATA.

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

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 FEDERAL FORM 990 AND ANNUAL REPORTS ARE MAINTAINED ON THE WEBSITE.

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SCHEDULE R  
(Form 990)

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

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

**2014**  
Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

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

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**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

Schedule R (Form 990) 2014

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

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

	Yes	No
<b>1</b> 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?		
<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 related organization(s)		X
<b>c</b> Gift, grant, or capital contribution from related organization(s)		X
<b>d</b> Loans or loan guarantees to or for related organization(s)	X	
<b>e</b> Loans or loan guarantees by related organization(s)	X	
<b>f</b> Dividends from related organization(s)		X
<b>g</b> Sale of assets to related organization(s)		X
<b>h</b> Purchase of assets from related organization(s)		X
<b>i</b> Exchange of assets with related organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s)		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
<b>o</b> Sharing of paid employees with related organization(s)		X
<b>p</b> Reimbursement paid to related organization(s) for expenses		X
<b>q</b> Reimbursement paid by related organization(s) for expenses		X
<b>r</b> Other transfer of cash or property to related organization(s)		X
<b>s</b> Other transfer of cash or property from related 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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AWC LIMITED	A	115,825.	FMV
(2) AWC CB1 LIMITED	A	292,061.	FMV
(3) AWC CB1 LIMITED	D	2,632,507.	FMV
(4) AWC CB1 LIMITED	E	3,000,000.	FMV
(5) AWC CB2 LIMITED	A	281,957.	FMV
(6) AWC CB2 LIMITED	D	2,662,013.	FMV



**Part V** Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) AWC CB2 LIMITED	E	3,220,000.	FMV
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			





