* * *	PUBLIC	DISCLOSURE	COPY	* * *
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	00		Return of Organization Exempt From			OMB No. 1545-0047
Form <b>YYU</b> Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)					2018	
	rtment of the al Revenue		Do not enter social security numbers on this form as it ma		IC.	Open to Public Inspection
			► Go to www.irs.gov/Form990 for instructions and the late ar year, or tax year beginning JUL 1, 2018 and ending	JUN 30,	2019	Inspection
_	heck if		Forganization		r identificati	on number
a a	oplicable:	• Name o	organization	D Employe	i lacitaneati	
	Address change	AFRI	CAN WILDLIFE FOUNDATION, INC.			
	Name change	Doing b	usiness as		52-078	1390
	Initial return	Number	and street (or P.0. box if mail is not delivered to street address) Room/su	uite E Telephor		
	Final return/	1100	NEW JERSEY AVENUE, SE 900			939-3333
	termin- ated ☐Amended	-	own, state or province, country, and ZIP or foreign postal code	G Gross receip		31,208,857.
	_return Applica-	WASH	INGTON, DC 20003		a group returi	
	tion pending		nd address of principal officer: KADDU SEBUNYA		ordinates?	
<u> </u>			AS C ABOVE X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or			
			X 501(c)(3) 501(c) ( )    (insert no.) 4947(a)(1) or : AWF • ORG		exemption nu	(see instructions)
		·				ate of legal domicile; DC
		Summary				
			e the organization's mission or most significant activities: AWF WORK	S TO ENSU	RE WIL	DLIFE AND
Activities & Governance			DS THRIVE IN MODERN AFRICA.			
nai	2 Ch	neck this bo	x      if the organization discontinued its operations or disposed of m	ore than 25% of i	its net assets	
ovel	<b>3</b> Nu	umber of vot	ing members of the governing body (Part VI, line 1a)		3	22
Ğ	<b>4</b> Nu	umber of inc	ependent voting members of the governing body (Part VI, line 1b)		4	21
es 8	<b>5</b> To	otal number	of individuals employed in calendar year 2018 (Part V, line 2a)		5	57
viti			of volunteers (estimate if necessary)			48
Acti			d business revenue from Part VIII, column (C), line 12			0.
_	<b>b</b> Ne	et unrelated	business taxable income from Form 990-T, line 38			0.
	• •					Current Year
en			and grants (Part VIII, line 1h)	25,416,	, <u>511</u> . , 697.	27,913,456.
Revenue		0	ce revenue (Part VIII, line 2g)		,416.	<u>588,427.</u> 783,519.
Be			come (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,005.	27,383.
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,643,		29,312,785.
			nilar amounts paid (Part IX, column (A), lines 1-3)	5,139,		3,464,717.
			to or for members (Part IX, column (A), line 4)		0.	0.
s	<b>15</b> Sa		compensation, employee benefits (Part IX, column (A), lines 5-10)	10,531,	,694.	11,325,169.
Expense	<b>16a</b> Pr		undraising fees (Part IX, column (A), line 11e)	1,267,		242,953.
per	<b>b</b> To		ng expenses (Part IX, column (D), line 25) > 3,565,225.			
ш	<b>17</b> Ot	her expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	11,700,	,079.	15,379,427.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)	28,638,	,531.	30,412,266.
		evenue less	expenses. Subtract line 18 from line 12	-1,995,	102.	-1,099,481.
s or				Beginning of Curr		End of Year
Assets d Balanc		otal assets (F	Part X, line 16)	49,878,		46,612,111.
at As ad B			(Part X, line 26)	7,840,		4,641,999.
E <sup>Ne</sup>			fund balances. Subtract line 21 from line 20	42,038,	,115.	41,970,112.
Ра	rt II	Signature	e diuck			

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.

Sign	Signature of officer	Date
Here	RICHARD HOLLY, CFO	
	Type or print name and title	
	Print/Type preparer's name Preparer's signature	Date Check PTIN
Paid	AARON M. FOX	02/14/20 self-employed P01365820
Preparer	Firm's name MARCUM LLP	Firm's EIN ▶ 11-1986323
Use Only	Firm's address 🕨 1899 L STREET, NW, #850	
	WASHINGTON, DC 20036	Phone no. $(202)$ 227 – 4000
May the I	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
832001 12-3	LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form <b>990</b> (2018)
	*** ELECTRONICALLY FILED ON 02/	COPY

\*\*\* ELECTRONICALLY FILED ON 02/14/2020 \*\*\*

	990 (2018) AFRICAN WILDLIFE FOUNDATION, INC. 52-0781390 Page 2 t III Statement of Program Service Accomplishments
Fa	
	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), WORKS TO ENSURE WILDLIFE
	AND WILDLANDS THRIVE IN MODERN AFRICA.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:         ) (Expenses \$ 17,644,728.         including grants of \$ 3,307,787.         (Revenue \$ 31,550.)           CONSERVATION PROGRAMS
	AWF PLAYS A SIGNIFICANT ROLE IN CONSERVING AFRICAN WILDLIFE, INCLUDING
	THE CONTINENT'S MOST ICONIC SPECIES: ELEPHANTS, RHINOCEROS, GIRAFFES,
	GREAT APES, AND LARGE CARNIVORES, INCLUDING LIONS AND CHEETAHS. MUCH OF
	OUR WORK ADDRESSES THE INTERSECTION OF WILDLIFE CONSERVATION AND HUMAN
	ACTIVITY, OFTEN IN THE CONTEXT OF LIVELIHOODS AND ECONOMIC DEVELOPMENT.
	(SEE SCHEDULE O FOR CONTINUATION)
	(SEE SCHEDOLE O FOR CONTINUATION)
4b	(Code:) (Expenses \$ 7,711,582. including grants of \$156,930. ) (Revenue \$557,748. ) EDUCATION AND OUTREACH
	AWF BELIEVES THAT CONSERVATION, TO BE LASTING AND EFFECTIVE, MUST BE
	AFRICAN-LED. 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. AWF STAFF MEMBERS ALSO
	DO POLICY AND ADVOCACY WORK, SERVING AS TECHNICAL ADVISERS TO
	POLICYMAKING BODIES, INCLUDING THE AFRICAN UNION, AND SENSITIZING
	AFRICAN POLITICAL LEADERS TO THE NEED FOR CONSERVATION AS A MEANS OF
	ENSURING AFRICA'S VITALITY AND PROSPERITY.
	(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 ► 25,356,310.
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 Form 990 (2018)
 AFRICAN WILDLIFE FOUNDATION, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	L
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		_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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
	Schedule D, Part III	8		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?			77
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		v	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44.	х	
<b>h</b>	Part VI	<u>11a</u>	<u> </u>	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11b		х
•	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			- 23
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	
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 Form 990 (2018)
 AFRICAN WILDLIFE FOUNDATION, INC.
 52-0781390
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 Part IV
 Checklist of Required Schedules (continued)
 Ves
 No

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes." complete			
	Schedule L. Part I	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? If "Yes."			
	complete Schedule L. Part II	26		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? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		x
	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		<u> </u>
U	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
29 30		29	- 23	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
24	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	0.4		x
~~	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
~~	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		77	
	Part V, line 1	34	X	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		37	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>x</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a14	-		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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	Δ	0		

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Form	990 (2018) AFRICAN WILDLIFE FOUNDATION, INC. 52-0781	390	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 57			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country:  SEE SCHEDULE O			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			x
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u> </u>
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		x
		7b		<u> </u>
	It "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			<u> </u>
U	to file Form 8282?	7c		x
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h				
8				
	sponsoring organization have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	44-		x
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		x
	excess parachute payment(s) during the year?	15		
16	Is the experimetion on advectional institution explores to the explore 1000 evolution to vertice the experiment	16		x
	If "Yes," complete Form 4720, Schedule O.	10		

Form **990** (2018)

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Form 990	(2018)
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### AFRICAN WILDLIFE FOUNDATION, INC.

Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 thro	bugh	7b below, and fo	or a "No" r	espons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S					
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		22		
	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 0.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		21		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship w	with a	ny other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the o	direct	supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990	0 was	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asset	ts?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app					
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, store	ckhol	ders, or			
	persons other than the governing body?			<b>7b</b>		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		•			
а	The governing body?				X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the					
800	organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	enue	Code.)		V.	
100	Did the exception have legal chapters, branches, or effiliates?			10a	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			10a		- 23
U				10b		
119	Has the organization provided a complete copy of this Form 990 to all members of its governing body I		e filing the form		х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	berer	s ming the form	. 110		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye					
	in Schedule O how this was done	,		12c	х	
13	Did the organization have a written whistleblower policy?				Х	
14	Did the organization have a written document retention and destruction policy?				Х	
15	Did the process for determining compensation of the following persons include a review and approval b					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent wi	th a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	its pa	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz	ation	's			
	exempt status with respect to such arrangements?			<b>16</b> b		
	tion C. Disclosure	~	<u> </u>		100	167
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, FL					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	990-	F (Section 501(c	:)(3)s only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					

X Own website Another's website X 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 ►\_ RICHARD HOLLY - (202) 939-3333

1100	NEW	JERSEY	AVENUE,	SE	E, NC	). 900	), WAS	SHIN	IGTON,	DC	20003	
832006 12-31-18		SEE	SCHEDULE	0	FOR	FULL	LIST	OF	STATE	S		

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2018.05040 AFRICAN WILDLIFE FOUNDATION

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Form 990 (2018)

### 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.

		T	mzu			iper	Jour			
(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one box, unless person is both an					ne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	d a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	r dire				ted		organization	(W-2/1099-MISC)	from the
	related	stee o	ustee			ensa		(W-2/1099-MISC)		organization
	organizations	al trus	nal tr		loyee	e om p				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	Indi	Inst	Offi	Key	en Hig	For			
(1) MS. HEATHER STURT HAAGA	4.00									
CHAIRMAN & INT. CEO (10/18-05/19)		Х		Х				0.	0.	0.
(2) H.E. BENJAMIN W. MKAPA	4.00									
VICE-CHAIRMAN		Х		Х				0.	0.	0.
(3) DR. MYMA BELO-OSAGIE	4.00									
SECRETARY		х		х				0.	0.	0.
(4) MS. MARLEEN GROEN	4.00									
TREASURER		х		х				0.	0.	0.
(5) MS. SARA AVIEL	2.00									
TRUSTEE	2.00	x						0.	0.	0.
(6) MR. GORDON CHENG	1.00	Λ						0.	0.	0.
	1.00	v						0	0.	0
TRUSTEE	2 00	Х						0.	0.	0.
(7) MR. PAYSON COLEMAN	3.00									•
TRUSTEE		х						0.	0.	0.
(8) MS. LYNN DOLNICK	3.00									•
TRUSTEE		Х						0.	0.	0.
(9) MR. GREGORY EDWARDS	3.00									
TRUSTEE - UNTIL 05/2019		Х						0.	0.	0.
(10) MR. STEPHEN GOLDEN	3.00									
TRUSTEE		Х						0.	0.	0.
(11) MR. DONALD GRAY	3.00									
TRUSTEE		х						0.	0.	0.
(12) MR. LARRY GREEN	2.00									
TRUSTEE		х						0.	0.	0.
(13) MR. BARRY HALL	2.00									
TRUSTEE	2.00	x						0.	0.	0.
(14) MS. CHRISTINE HEMRICK	3.00	Λ						0.	0.	0.
	5.00	v						0	0.	0
TRUSTEE		Х						0.	0.	0.
(15) MR. MICHAEL HOFFMAN	2.00									•
TRUSTEE		Х						0.	0.	0.
(16) MR. CHRISTOPHER LEE	2.00									_
TRUSTEE		Х						0.	0.	0.
(17) H.E. FESTUS G. MOGAE	1.00									
TRUSTEE		Х						0.	0.	0.
832007 12-31-18										Form <b>990</b> (2018)
					-					

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2018.05040 AFRICAN WILDLIFE FOO

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AFRICAN WILDLIFE FOUNDATION, INC	AFRICAN	WILDLIFE	FOUNDATION,	INC.
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Form 990 (2018) AFRICAN V	VILDLIFE	I F	'UU	NDA	ATI (	ON ,	, INC.	52-07	<u>7813</u>	<u>;90 р</u>	9age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Highe	est C	Compensated Employee	s (continued)			
(A)	(B)			(C)	)		(D)	(E)		(F)	
Name and title	Average	(-1-		Posit			Reportable	Reportable		Estimate	ed
	hours per				ore that on is bo		compensation	compensatio		amount	of
	week	offic	cer and	d a dire	ector/tru	ustee)	from	from related	1	other	
	(list any	ctor					the	organizations	s	compensa	ation
	hours for	r dire			fed		organization	(W-2/1099-MIS	;C)	from th	ie
	related	tee o	ustee		ensat		(W-2/1099-MISC)			organizat	tion
	organizations	ll trus	nal tr		oyee	<b>a</b> )				and relat	ted
	below	ndividual trustee or director	nstitutional trustee	cer	Key employee Highest compe	employee Former				organizati	ions
	line)	Indi	Inst	Officer	Key Hig	For			$ \rightarrow $		
(18) MS. ANNE SCOTT	1.00										
TRUSTEE		Х					0.		0.		0.
(19) MR. STUART L. SCOTT	3.00										
TRUSTEE - UNTIL 02/2019		Х					0.		0.		0.
(20) MS. VERONICA VAREKOVA	2.00										
TRUSTEE - UNTIL 02/2019		X					0.		0.		0.
(21) MR. WARREN WALKER	2.00										
TRUSTEE		x					0.		0.		Ο.
(22) MR. CHARLES R. WALL	3.00				+						
TRUSTEE		x					0.		0.		0.
(23) MS. LINDSAY WEISSERT	1.00	Δ			-	_					
TRUSTEE	1.00	x					0.		0.		0
	2 00	<u> </u>			_	_	0.		<u> </u>		0.
(24) MS. MARIA WILHELM	2.00						•				~
TRUSTEE	10.00	Х			_	_	0.		0.		0.
(25) KADDU SEBUNYA	40.00									. – .	• •
CEO - AS OF 01/2019		Х		X			233,648.		0.	37,8	01.
(26) TOM OGILVIE GRAHAM	40.00										
CEO - UNTIL 09/2018		Х		Х			255,503.		0.	10,0	
1b Sub-total							489,151.		0.	47,8	
c Total from continuation sheets to Part VI	I, Section A						2,113,071.		0.	311,1	90.
d Total (add lines 1b and 1c)							2,602,222.		0.	359,0	19.
2 Total number of individuals (including but n							eceived more than \$100,	000 of reportable	,		
compensation from the organization					,		· ,	•			14
										Yes	No
3 Did the organization list any former officer,	director or tri	ister	e kev	/ emr	nlove	e or	highest compensated er	nplovee on	E F		
line 1a? If "Yes," complete Schedule J for s	-						•		- E	3	X
<ul><li>4 For any individual listed on line 1a, is the su</li></ul>									····  -		<u> </u>
									- 1	4 X	
<ul><li>and related organizations greater than \$150</li><li>5 Did any person listed on line 1a receive or a</li></ul>		CO	mpie		cneau		for such individual		····	4 11	
								Juai for services	- 1	-	x
rendered to the organization? <i>If "Yes." com</i> Section B. Independent Contractors	plete Schedule	e J to	or su	ch pe	erson				<u></u>	5	_ A
•								100.000 (			
1 Complete this table for your five highest co	-	-							ensati	on from	
the organization. Report compensation for	the calendar ye	ear e	ndin	g wit	h or v	vithir		ear.			
(A)	- dalue						(B)		~	(C)	
Name and business							Description of s			ompensatio	<u>'n</u>
SANKY COMMUNICATIONS, INC	•			_			MAIL & ONLIN	E			
AVENUE, 6TH FLOOR, NEW YC	RK, NY	10	<u>036</u>	5			FUNDRAISING		<u> </u>	,060,7	<u>97.</u>
PALBINA TRAVEL											
P.O. BOX 10669, NAIROBI,	KENYA						TRAVEL SERVI	CES		508,1	13.
CANINE SPECIALIST SERVICE	S, BOWE	Ν	SQT	JAR	RΕ,		CANINE				
DR FERRIERE ST., PORT LOU	IS, MAU	RI	TIT	JS			PROCUREMENT/'	FRAINING		394,9	76.
HANDS UGANDA LTD, SOROTI							PRIMARY SCHO	JL			
HARPER RD, #565 SOROTI KA							CONSTRUCTION			375,7	57.
MEERO CONTRACTORS LTD	,									2.211	<u> </u>
P.O. BOX 184, DULUTI ARUS	на там	7. 2	NTZ	4			MAINTENANCE	WORKS		365,6	74
										555,0	/ -= •
2 Total number of independent contractors (in	-	JUIN	nted		10se   17	ISLEC	above) who received mo	bre man			
\$100,000 of compensation from the organized	Lalion 📂			-	± /						

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2018)

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	WILDLIFE						-			1390
		nplo	yee			lighe	est (	Compensated Employe	, ,	
(A) Name and title	<b>(B)</b> Average hours	(cl		Pos	<b>C)</b> ition that		y)	<b>(D)</b> Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Hig hest com pen sated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) RICHARD HOLLY CFO - AS OF 05/2019	40.00			x				0.	0.	0
28) JEFF CHRISFIELD 200 - UNTIL 11/2018	40.00			x				237,267.	0.	36,273
29) CRAIG SHOLLEY	40.00									
ENIOR VP, PHILANTHROPY AND MKTG 30) CHARLY FACHEUX	40.00			X				197,410.	0.	28,874
7P OF CONSERVATION PROJECTS 31) PHILIP MURUTHI	40.00			X				187,350.	0.	38,743
7P OF SPECIES CONSERVATION 32) LINDSAY KOSNIK	40.00			X				187,350.	0.	24,182
P OF PHILANTRHOPY & MKTG 33) KATHLEEN FITZGERALD	40.00			X				186,290.	0.	26,727
ICE PRESIDENT, LAND PROTECTION				x				185,450.	0.	26,525
34) TYRENE HARALSON, VP OF 'INANCE & ADMIN UNTIL 03/2018	40.00			x				135,270.	0.	18,168
35) ERIC COPPENGER /P OF PROGRAM DESIGN	40.00			x				134,244.	0.	22,766
36) BRIAN MCBREARITY YP OF MANAGEMENT SYSTEMS	40.00					x		159,450.	0.	21,234
37) ALTHEA WILSON DIR. OF CORP. AND FND RELATIONS	40.00					x			0.	
38) DENIS GALAVA, DIRECTOR	40.00							127,325.		15,486
F MEDIA RELATIONS & ADVOCACY 39) DAVE ONATE	40.00					X		125,222.	0.	16,829
URECTOR OF MARKETING & CREATIVE	40.00					X		125,222.	0.	16,509
OO-UMILIKI						X		125,221.	0.	18,874
Fotal to Part VII, Section A, line 1c	I	<u> </u>		l	I	L		2,113,071.		311,190

832201 04-01-18

		Check if Schedule O cont	tains a response	or note to any lin				
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue exclude from tax under sections 512 - 514
<u>s</u> 1	а	Federated campaigns	1a					
and Other Similar Amounts L		Membership dues						
Am		Fundraising events						
ar		Related organizations	1d					
Ē		Government grants (contribut	· ·	.0351198.				
Ler v	f	All other contributions, gifts, gran						
Ĕ		similar amounts not included abo		7562258.				
na	g	Noncash contributions included in lines		<u>612,091</u> .	27913456.			
8	n	Total. Add lines 1a-1f	<u></u>					
	-	SAFARI INCOME		Business Code 900099	557,748.	557,748.		
2		OTHER PROGRAM I	NCOME	900099	30,679.	30,679.		
Ine	с С			500055	50,015.	50,075		
ver	d							
Revenue	e e							
		All other program service reve	enue					
		Total. Add lines 2a-2f			588,427.			
3		Investment income (including						
		other similar amounts)		▶	790,076.	871.		789,205
4		Income from investment of ta						
5		Royalties	<u>.</u>	►	26,273.			26,273
			(i) Real	(ii) Personal				
6	а	Gross rents						
	b	Less: rental expenses						
	с	Rental income or (loss)						
	d	Net rental income or (loss)		🕨				
7	а	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1889515.					
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)			6 558			6 5 5 8
		Net gain or (loss)		🕨	-6,557.			-6,557
8	а	Gross income from fundraisin						
		including \$						
		contributions reported on line	-					
Ū		Part IV, line 18						
		Less: direct expenses						
		Net income or (loss) from fund	•	····· <b>•</b>				
9	а	Gross income from gaming ad						
	h	Part IV, line 19						
		Less: direct expenses Net income or (loss) from gan						
10		Gross sales of inventory, less	•					
	a	and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
11	а	MAILING LIST RE		900099	1,110.			1,110
	b							1
	С							
		All other revenue						
		Total. Add lines 11a-11d			1,110.			
					29312785.	589,298.		. 810,031

AFRICAN WILDLIFE FOUNDATION, INC.

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Form 990 (2018)

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AFRICAN WILDLIFE FOUNDATION, INC.

Pa	990 (2018)         AFRICAN WILL           t IX         Statement of Functional Expense	DLIFE FOUNDA' es	•		781390 Page 10
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	nplete column (A).	
	Check if Schedule O contains a respon			(0)	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	131,003.	131,003.		
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	3,333,714.	3,333,714.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,944,843.	1,632,729.	59,012.	253,102
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	6,023,441.	4,514,419.	393,135.	1,115,887
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	540,557.	410,698.	33,655.	96,204
9	Other employee benefits	2,458,023.	1,637,536.	207,719.	612,768
10	Payroll taxes	358,305.	276,104.	20,586.	61,615
11 a	Fees for services (non-employees): Management				
	Legal	115,274.	103,860.	11,414.	
	Accounting	847,674.	55,088.	792,586.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	242,953.			242,953
f	Investment management fees	42,632.		42,632.	
g	Other. (If line 11g amount exceeds 10% of line 25,	2 000 022	2 0 2 1 4 2 2		44 607
	column (A) amount, list line 11g expenses on Sch 0.)	3,088,833. 49,038.	3,021,422. 40,841.	22,714. 1,298.	<u>44,697</u> 6,899
12	Advertising and promotion	1,299,444.	1,033,771.	142,111.	123,562
13	Office expenses	873,198.	276,326.	458,883.	137,989
14 45	Information technology	075,190.	270,520.	430,003.	137,909
15	Royalties	855,862.	220,453.	635,409.	
16 17		1,553,913.	1,314,568.	14,443.	224,902
18	Travel Payments of travel or entertainment expenses for any foderal, state, or least public officials	1,000,010.	1,511,5000	11,113.	224,502
19	for any federal, state, or local public officials Conferences, conventions, and meetings	1,904,623.	1,866,069.	9,140.	29,414
20	Interest	19,359.	15,222.	5,2100	4,137
21	Payments to affiliates	,,	,		_,_,,
22	Depreciation, depletion, and amortization	329,392.	227,908.	101,484.	
23	Insurance	39,511.	29,600.	9,911.	
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 0.)				
а	DIRECT MAILING COSTS	2,099,633.	1,634,284.		465,349
b	FIELD EQUIPMENT	1,307,157.	1,300,793.	5,142.	1,222
С	VEHICLE OPERATIONS	554,751.	554,027.	1 480 540	724
d	ALLOC. OF FACIL. EXP.	399,133.	1,725,875.	-1,470,543.	143,801
-	All other expenses	30,412,266.	25,356,310.	1,490,731.	3,565,225
25 26	Total functional expenses. Add lines 1 through 24e	JU,414,400.	20,000,010.	1,4JU,/JL.	5,505,225
26	Joint costs. Complete this line only if the organization				

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here **X** if following SOP 98-2 (ASC 958-720)

832010 12-31-18

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2,411,612.

2018.05040 AFRICAN WILDLIFE FOUNDAT

1,649,106.

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762,506.

Form 990 (2018)

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Form 990 (2018)

AFRICAN WILDLIFE FOUNDATION, INC. Part X Balance Sheet

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		Check if Schedule O contains a response or not	e to anv	line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			9,150,773.	1	3,802,226.
	2	Savings and temporary cash investments			175,801.	2	145,183.
	3	Pledges and grants receivable, net			5,264,599.	3	5,459,000.
	4	Accounts receivable, net			276,283.	4	414,357.
	5	Loans and other receivables from current and fo			,		
		trustees, key employees, and highest compensation					
		Part II of Schedule L	-			5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	-	· ·			
		employers and sponsoring organizations of sect					
s		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net			886,498.	7	1,706,573.
As	8	Inventories for sale or use				8	
	9	<b>–</b> • • • • • • • •			694,594.	9	641,981.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	7,235,912.			
	b	Less: accumulated depreciation	10b	2,773,902.	4,703,211.	10c	4,462,010.
	11	Investments - publicly traded securities			28,964,819.	11	30,145,511.
	12	Investments - other securities. See Part IV, line 1	1		-562,247.	12	-562,247.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			324,422.	15	397,517.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34	)	49,878,753.	16	46,612,111.
	17	Accounts payable and accrued expenses			1,837,897.	17	1,364,936.
	18	Grants payable				18	
	19	Deferred revenue		·····	3,980,515.	19	1,309,499.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV o	f Schedule D		21	
Se	22	Loans and other payables to current and former					
iliti		key employees, highest compensated employee	s, and d	isqualified persons.			
Liabilities				······  -	101 01 0	22	101 016
	23	Secured mortgages and notes payable to unrela			191,916.	23	131,916.
	24	Unsecured notes and loans payable to unrelated		·····		24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on lines			1 0 2 0 2 1 0		1 025 640
		Schedule D			<u>1,830,310.</u> 7,840,638.	25	<u>1,835,648.</u> 4,641,999.
	26	Total liabilities. Add lines 17 through 25			/,040,030.	26	4,041,999.
		Organizations that follow SFAS 117 (ASC 958		here <b>A</b> and			
ses	07	complete lines 27 through 29, and lines 33 an			30,399,154.	27	29,291,399.
anc	27	Unrestricted net assets			8,526,646.	27 28	9,566,398.
Bal	28 29	Temporarily restricted net assets Permanently restricted net assets			3,112,315.	20 29	3,112,315.
pu	29	Organizations that do not follow SFAS 117 (A		ahaak hara	5,112,515.	29	5,112,515.
Ę		and complete lines 30 through 34.	30 930)				
s ol	30	Capital stock or trust principal, or current funds				30	
set	31	Paid-in or capital surplus, or land, building, or ec				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
Net	33	Total net assets or fund balances			42,038,115.	33	41,970,112.
	34	Total liabilities and net assets/fund balances			49,878,753.	34	46,612,111.
	1 07				, , , , , , , , , , , , , , , , , ,	57	

Form 990 (2018)

15230214 150872 AWF

Form	AFRICAN WILDLIFE FOUNDATION, INC.	52-0	781390	Pag	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	29,312		
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,412		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,099		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42,038		
5	Net unrealized gains (losses) on investments	5	1,031	.,4'	78.
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	41,970	),11	12.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- 🗖	Yes	No
20	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		Za		
	separate basis, consolidated basis, or both:	ona			
	Separate basis, consolidated basis, or both.				
Ь			2b	x	
D	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				
	consolidated basis, or both:	; Dasis,			
	Separate basis X Consolidated basis Both consolidated and separate basis				
~	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit			
Ŭ	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
54	Act and OMB Circular A-133?	0	3a	x	
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
2	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	x	
					(2010)

Form **990** (2018)

SCHEDUL	E A.
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### **Public Charity Status and Public Support**

OMB No. 1545-0047

Y

1

(Fo	orm 99	00 or 990-EZ)		omplete if the orga	nization is a section 501	(c)(3) orga	anization			2018	
Dena	rtment o	f the Treasury			47(a)(1) nonexempt cha Attach to Form 990 or F					Open to Public	
		nue Service			v/Form990 for instruction			nformation.		Inspection	
Nar	ne of t	the organizati							Employer	identification number	
		5		CAN WTLDLT	FE FOUNDATION	J TNO	<b>.</b>			2-0781390	
Pa	art I	Reason	for Public C	Charity Status	All organizations must co	mplete th	is part.) Se	e instructions	<u> </u>	2 0701000	
					For lines 1 through 12, cl						
1			-		· · · ·			1\/ A \/;\			
	$\square$				on of churches described			I)(A)(I).			
2					(Attach Schedule E (Form			::)			
3	$\square$				anization described in <b>se</b> njunction with a hospital				(iiii) Entor	the beenital's name	
4		city, and stat	•	ation operated in co	injunction with a nospital	uescribeu	Sectio			the hospital's hame,	
F			-	or the bonefit of a co	llege or university owned	or operat	od by a go	vorpmontal u	ait doscrib	od in	
5		0	•		mege of university owned	or operat	eu by a go	veninentai ui	III describe		
~				Complete Part II.)			70/1-1/41/41	()			
6	X			-	nental unit described in					u de lie, ele e evile e el im	
7	Δ	•			intial part of its support fr	om a gove	ernmental	unit or from tr	ie general j	Dublic described in	
~				omplete Part II.)							
8 9		-			(1)(A)(vi). (Complete Part		ad in aanii	nation with a	land grant		
9		-	-		in section 170(b)(1)(A)(				-	-	
			or a non-ianu-g	frant college of agric	culture (see instructions).		name, city	, and state of	the college	or	
10		university:	on that norma		e than 33 1/3% of its supp	ort from (	ontributio	no momborok	in food on	d grace receipte from	
10					ct to certain exceptions,						
		income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See <b>section 509(a)(2).</b> (Complete Part III.)									
11				-	ively to test for public sat	aty Saa	section 5(	10(2)(4)			
12	$\square$	•	-	-	ively for the benefit of, to	•			rny out tho	purposes of one or	
12		•	-	-	ed in section 509(a)(1) o				•		
				-	of supporting organization						
-		7	-		supervised, or controlled		-		-	aivina	
a					gularly appoint or elect a	• • • •	-				
			-	complete Part IV, Se		majonty c				ipporting	
b		¬ ~		•	d or controlled in connect	ion with it	e supporte	ad organizatio	a(e) by bay	vina	
L.				•	anization vested in the sa			0		•	
			-	t complete Part IV,		ame perso	ns that co	ntroi or manaç	je i le sup	Joned	
		¬ -		-	ig organization operated	in connoc	tion with	and functional	ly intograte	od with	
c	· [		-		b). You must complete F				iy miegrate	a with,	
c		¬ ···	-		porting organization oper				ted organi-	zation(s)	
Ľ	•		-	• •	zation generally must sat				•	. ,	
					mplete Part IV, Sections				anatonti	inclusion of the second s	
e			-	-	written determination from				I Type III		
	·		-		mally integrated supporti			турст, турс	n, rype m		
f	Ente	er the number		rachizationa			ation.				
			••	about the supporte							
		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other	
		organizatior	I		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)	
_											
Tota	al										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 14

# Schedule A (Form 990 or 990-EZ) 2018 AFRICAN WILDLIFE FOUNDATION, INC. Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(in

5	2-	07	81	39	0	Page 2
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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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	<u>31585502.</u>	24337569.	24185152.	25416311.	27913456.	133437990
2	Tax revenues levied for the organ-						
	ization'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	31585502.	24337569.	24185152.	25416311.	27913456.	133437990
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)						2678058.
6	Public support. Subtract line 5 from line 4.						130759932
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	31585502.	24337569.	24185152.	25416311.	27913456.	133437990
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1050414.	938,181.	691,600.	714,999.	817,459.	4212653.
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.)	29,875.	-2,072.	87,687.	-4,279.		111,211.
11	Total support. Add lines 7 through 10						137761854
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 2	,367,974.
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	
	organization, check this box and stop	p here					
Sec	ction C. Computation of Public	ic Support Per	centage				
14	Public support percentage for 2018 (	line 6, column (f) di	vided by line 11, c	olumn (f))		14	94.92 %
15	Public support percentage from 2017	' Schedule A, Part	II, line 14			15	91.18 %
16a	33 1/3% support test - 2018. If the	organization did no	ot check the box o	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2017. If the	organization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua	lifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	sts-and-circumstan	ces" test, check th	nis box and <b>stop h</b>	<b>tere.</b> Explain in Pa	rt VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a	publicly supported	organization		
b	10% -facts-and-circumstances test	t - 2017. If the org	anization did not o	check a box on line			
	more, and if the organization meets the	he "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	n in Part VI how the	e
	organization meets the "facts-and-cire	cumstances" test.	The organization o	ualifies as a public	ly supported orga	nization	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s <b>&gt;</b>
					Sche	edule A (Form 990	or 990-EZ) 2018

### Schedule A (Form 990 or 990-EZ) 2018 AFRICAN WILDLIFE FOUNDATION, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support			•	-		
Calendar year (or fiscal year beginning in)	) ► (a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do no	ot					
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpos						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit	to					
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, a 3 received from disqualified perso						
<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						
8 Public support. (Subtract line 7c from line 6	3.)					
Section B. Total Support				-		
Calendar year (or fiscal year beginning in)		(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 busines	ses					
acquired after June 30, 1975						
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated busine activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>	ess					
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 1						
14 First five years. If the Form 990 i	s for the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiza	ation,
check this box and stop here		-				<b>)</b>
Section C. Computation of Pu					1 1	
<b>15</b> Public support percentage for 20	( ) ()		column (f))		15	%
16 Public support percentage from 2					16	%
Section D. Computation of In					1 1	
17 Investment income percentage for	or 2018 (line 10c, colur	mn (f), divided by	line 13, column (f))		17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2018.	i the organization did r	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this bo	-	•				
b 33 1/3% support tests - 2017. If						
line 18 is not more than 33 1/3%,						
20 Private foundation. If the organiz	zation did not check a	box on line 14, 19	9a, or 19b, check t			· · · · · · · · · · · · · · · · · · ·
832023 10-11-18		16	5	Sch	edule A (Form 990	0 or 990-EZ) 2018

2018.05040 AFRICAN WILDLIFE FOUNDATI AWF 1

### Schedule A (Form 990 or 990-EZ) 2018 AFRICAN WILDLIFE FOUNDATION, INC.

### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

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832024 10-11-18

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Schedule A (Form 990 or 990-EZ) 2018

10b

2018.05040 AFRICAN WILDLIFE FOUNDATIONFY

Yes No

# Schedule A (Form 990 or 990-EZ) 2018 AFRICAN WILDLIFE FOUNDATION, INC. Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	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 Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	•		
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's	3		
Sec	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> <i>below.</i>			
b	The organization statistical the Activities rest. Complete line 2 below.			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instru-	uctions		
2	Activities Test. Answer (a) and (b) below.	20110110/	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
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 Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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 Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

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832025 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

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**<u>P</u>PY** 2018.05040 AFRICAN WILDLIFE FOUNDATION

	dule A (Form 990 or 990-EZ) 2018 AFRICAN WILDLIFE FOUNDA			52-0781390 Page 6
	Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	-		Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	omplete S	ections A through E.	
Sect	ion 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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount 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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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	Distributable Amount. 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-functional	lly integrat	ted Type III supporting org	ganization (see

Schedule A (Form 990 or 990-EZ) 2018

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instructions).

# Schedule A (Form 990 or 990-EZ) 2018 AFRICAN WILDLIFE FOUNDATION, INC.

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in <b>Part VI</b> ). See instructions.	5		
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
с	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18



Schedule A (Form 990 or 990-EZ) 2018       AFRICAN WILDLIFE FOUNDATION, INC.       52-0781390       Page 8         Part VI       Supplemental Information.       Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;       Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
OTHER INCOME
2014 AMOUNT: \$ 10,000.
2015 AMOUNT: \$ 0.
2016 AMOUNT: \$ 0.
2017 AMOUNT: \$ 0.
2018 AMOUNT: \$ 0.
MERCHANDISE SALES
INSURANCE SETTLEMENT CLAIM
AMORTIZATION DISCOUNT
2014 AMOUNT: \$ 19,875.
2015 AMOUNT: \$ -2,072.
2016 AMOUNT: \$ -16,079.

2017 AMOUNT: \$ -4,279.

2018 AMOUNT: \$ 0.

SALE OF EQUIPMENT

2014 AMOUNT: \$ 0.

2015 AMOUNT: \$ 0.

2016 AMOUNT: \$ 103,766.

2017 AMOUNT: \$ 0.

2018 AMOUNT: \$ 0.

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1

### Schedule B

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

### \*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule of Contributors

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

2018

nber

Name of the organization	on	Employer identification num
	AFRICAN WILDLIFE FOUNDATION, INC.	52-0781390
Organization type (che	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	$\fbox{3}$ 501(c)( 3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, ,	tion is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule. See instructions.
General Rule		
	zation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totan any one contributor. Complete Parts I and II. See instructions for determining a contribu	<b>e</b> , , , , , , , , , , , , , , , , , , ,
Special Rules		
X For an organiz	zation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supp	ort test of the regulations under

(C)(S)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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

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

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) (2018)

COP

Name of organization

Employer identification number

52-0781390

AFRICAN WILDLIFE FOUNDATION, INC.

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>1,964,790.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,073,263.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,067,728.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>1,000,957.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>1,000,000.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>1,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
823452 11-08	8-18 24	Schedule B (Form	990, 990-EZ, or 990-PF) (2018)

2018.05040 AFRICAN WILDLIFE FOUNDATI AWF \_\_\_\_1

Name of organization

Employer identification number

52-0781390

AFRICAN WILDLIFE FOUNDATION, INC.

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
<u>    7                                </u>		\$953,036.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Occupient Payroll Payroll Payroll Payroll Payroll Payroll Payroll Payroll for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
823452 11-08-18	25	Schedule B (Forn	n 990, 990-EZ, or 990-PF) (2018)

2018.05040 AFRICAN WILDLIFE FOUNDATI AWF 1

Employer identification number

52-0781390

AFRICAN WILDLIFE FOUNDATION, INC.

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
	ERVATION BOND 1 AND CONSERVATION BOND 2		
		\$\$\$\$\$\$\$	02/01/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	

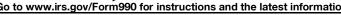
26 2018.05040 AFRICAN WILDLIFE FOUNDAR OF 1

Schedule B (Form 990, 990-EZ, or 990-PF) ( Name of organization	2018)	Page Employer identification number
from any one contributor. Complete	etc., contributions to organizations described in se ete columns (a) through (e) and the following line en usively religious, charitable, etc., contributions of \$1,000 or	52 - 0781390 ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations less for the year. (Enter this info. once.) $\blacktriangleright$ \$
(a) No. from (b) Purpose of gift Part I	(c) Use of gift	(d) Description of how gift is held
Transferee's name	(e) Transfer of gif e, address, and ZIP + 4	it Relationship of transferor to transferee
(a) No. from (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name	(e) Transfer of gif , address, and <b>ZIP</b> + 4	tt Relationship of transferor to transferee
(a) No. from (b) Purpose of gift Part I	(c) Use of gift	(d) Description of how gift is held
Transferee's name	(e) Transfer of gif	it Relationship of transferor to transferee
(a) No. from (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		
Transferee's name	(e) Transfer of gif , address, and ZIP + 4	t Relationship of transferor to transferee
323454 11-08-18 60214 150872 AWF	27 2018.05040	Schedule B (Form 990, 990-EZ, or 990-PF) (2018

SCHEDULE [	)
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Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.





Internal Revenue Service Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC. Employer identification number 52-0781390

Par	t I Organizations Maintaining Donor Advised	I Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
	-	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised f	iunds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be use	d only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose con	ferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, Part	t IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a historic	ally important land area
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed 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
а	Total number of conservation easements		2a
с	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at	fter 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		panization during the tax
	year ►		
4	Number of states where property subject to conservation ease	ement is located ►	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	YesNo
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing conserv	ation easements during the year
	▶		
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservation	easements during the year
	▶\$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4	)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservatio	n easements in its revenue and expense stat	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizati	on's financial statements that describes the	organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	ibition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
			► \$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financial ga	in, provide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2018
832051	10-29-18		

28 2018.05040 AFRICAN WILDLIFE FOUNDATION

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Sche		WILDLIFE F					52-07			age <b>2</b>	
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or (	Other S	Simila	r Assets	continu	ued)		
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that a	re a signi	ificant u	se of its c	ollection i	tems		
	(check all that apply):			C	0						
а	Public exhibition	d	Loan or exc	hange program	IS						
b	Scholarly research	е		51 5							
с	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how they further th	e organization'	s exemp	t purpo	se 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 ma		,	,				Yes		No	
Par	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" on Form 990, Part IV, line 9, or										
	reported an amount on Form 990, Par		ine in the englishment				, · ,				
1a	Is the organization an agent, trustee, custodia		ary for contribution	s or other asset	s not inc	cluded					
14								Yes		No	
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a						∟				
D D			owing table.					Amount			
•	Paginning balance					1c		Amount			
	Additions during the year					1d					
	Additions during the year					1e					
e د	Distributions during the year					1f					
20	Ending balance Did the organization include an amount on Fo				t.iability			Yes		No	
	If "Yes," explain the arrangement in Part XIII.		•			·	∟			]	
Par										1	
		(a) Current year	(b) Prior year	(c) Two years			/ears back	(e) Four	voare		
10	Paginning of year balance	28,547,774.	26,188,660.		``						
b	Contributions	1,740,423.	2,099,073.				13,550.		523,5		
C	Net investment earnings, gains, and losses	1,740,423.	2,000,073.	5,554,	501.	5	15,550.	±,	525,	<u></u>	
a	Grants or scholarships										
е	Other expenditures for facilities	550 573	125 500	3 820	100	2 7	02 558	2	967	152	
	and programs	550,573.	125,500.	3,829,	199.	2,1	02,558.	<u> </u>	967,4	452.	
Ť	Administrative expenses	20 727 624	20 547 774	26 199	660	25.4	E3 EE3	26	070 -	1 5 0	
g	End of year balance	29,737,624.	28,547,774.		000.	25,4	53,553.	20,	879,3	150.	
2	Provide the estimated percentage of the curr	-		) held as:							
a	Board designated or quasi-endowment	86.01	_%								
b	Permanent endowment  10.46	<u> </u>									
С	· · · <u> </u>	<u>3.53 %</u>									
_	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should										
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are held ar	nd administered	for the o	organiza	ation	Г			
	by:								Yes	<u>No</u>	
	(i) unrelated organizations							3a(i)		<u>X</u>	
								3a(ii)		X	
b	If "Yes" on line 3a(ii), are the related organization							3b			
4	Describe in Part XIII the intended uses of the		vment funds.								
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990			Part X, lin	ne 10.					
	Description of property	(a) Cost or of	• • •	or other	.,	umulate		<b>(d)</b> Book	value	Э	
		basis (investm	,	(other)	depre	eciation					
1a	Land			3,157.				993			
b	Buildings			7,014.		38,09		1,858			
с	Leasehold improvements			5,547.		41,8		1,053			
d	Equipment			0,713.		21,3			, 38		
	Other			9,481.	1,12	22,6'			, 81		
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part )	K. column (B). line 1	0c.)				4,462			
							Schedule	D (Form	990)	2018	

(1) Financial derivatives					
(a)       (b)         (b)       (c)         (c)	(1) Financial derivatives				
(A)	(2) Closely-held equity interests				
(B)         (C)           (G)         (C)           (G)         (C)           (B)         (C)           (C)         (C)           (D)	(3) Other				
Image: Constraint of the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 13.           Image: Constraint of Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 13.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 13.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 13.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 15.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 15.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 15.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 15.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 25.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 25.           Image: Constraint on Investment in the organization answered "Yes" on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 25.           Image: Constraint on Inswered 'Yes' on Form 990, Part IV, line 11c. Sae Form 990, Part X, line 25.           Image: Constance taxee         Image: Constance taxee <td>(A)</td> <td></td> <td></td> <td></td> <td></td>	(A)				
(0)					
(6)					
(F)					
(9)					
(i)       (i)         Tail. (Lob. (b) must equal Form 990, Part X, col. (B) line 12.) ▶         Part VIII investments - Program Related.         Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end of year market value         (i)         (a)         (b) Book value         (c) Method of valuation: Cost or end of year market value         (ii)         (c)         (c					
Total: (col: (b) must equal form 990, Part X, col: (B) line 12.)         Part VUII         Investments - Program Related.         (a) Description of investment       (b) Book value         (a) Description of investment       (b) Book value         (a)       (c) Method of valuation: Cost or end-of-year market value         (b)       (c) Method of valuation: Cost or end-of-year market value         (c)       (c) Method of valuation: Cost or end-of-year market value         (c)       (c) Method of valuation: Cost or end-of-year market value         (c)       (c)         (d)       (c)         (e)       (c)         (f)       (c)         (g)       (c) <td></td> <td></td> <td></td> <td></td> <td></td>					
Part VIII       Investments - Program Related.         Complete if the organization answered 'Ves' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a) Description of investment       (b) Book value         (a)       (c) Method of valuation: Cost or end-of-year market value         (a)       (c)         (a)       (c)         (b)       (c)         (c)       (c)					
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (1)         (c) Method of valuation: Cost or end-of-year market value         (c)           (d)         (c)         (c)           (d)         (c)         (c)           (e)         (c)         (c)           (f)         (c)         (c)           (e)         (c)         (c)           (f)         (c)         (c)           (g)         (c)         (c)           (e)         (c)         (c)           (f)         (c)         (c)           (g)         (c)         (c)           (g)         (c)         (c)           (e)         (c)         (c)           (f)					
(a) Description of investment       (b) Book value       (c) Method of valuation: Cost or end-of-year market value         (1)       (a)       (b)       (c)         (a)       (c)       (c)       (c)         (a)       (c)       (c)       (c)         (b)       (c)       (c)       (c)         (c)       (c)       (c)       (c)         (d)       (c)       (c)       (c)         (e)       (c)       (c)       (c)         (d)       (c)       (c)       (c)         (e)       (c)       (c)       (c)         (f)       (c)       (c)       (c)         (f)       (c)       (c)       (c)         (f)       (c)       (c)       (c)         (g)       (c)       (c)       (c)         (e)       (c)       (c)       (c)         (f)       (c)       (c)       (c)         (f)       (c)       (c)<		on Form 990, Part IV,	, line 11c. See Form 990, I	Part X, line 13.	
(2)       (3)         (4)       (4)         (5)       (5)         (6)       (7)         (8)       (9)         (9)       (1)         (1)       (2)         (2)       (3)         (1)       (1)         (2)       (2)         (3)       (1)         (4)       (2)         (3)       (1)         (4)       (2)         (5)       (1)         (6)       (1)         (7)       (2)         (8)       (2)         (9)       (2)         (9)       (2)         (1)       (2)         (2)       (3)         (4)       (5)         (5)       (2)         (6)       (2)         (1)       Federal income taxes         (2)       Description of liability         (4)       (4)         (5)       (5)         (6)       (6)         (7)       (6)         (6)       (6)         (7)       (9)         (1)       Federal income taxes         (2)       DE					of-year market value
[3]       [4]         [4]       [5]         [5]       [6]         [6]       [6]         [7]       [6]         [8]       [6]         [9]       [6]         [9]       [6]         [9]       [6]         [9]       [6]         [9]       [6]         [9]       [6]         [1]       [6]         [2]       [6]         [3]       [6]         [4]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [6]       [6]         [7]       [6]         [8]       [9]         Iotal. (Column (b) must equal Form 930, Part X, col. (2) line 15.)         [9]       [1]         [1]       [9]         [2]       DESCRPTOR DRN \$ LEASE INCENTIVES         [3]       [3]         [4]       [4]         [5]       [5]         [6]	(1)				
(4)       (5)         (6)       (7)         (8)       (9)         (9)       (1)         (1)       (2)         (3)       (2)         (3)       (4)         (4)       (5)         (6)       (2)         (3)       (4)         (4)       (4)         (5)       (6)         (7)       (1)         (9)       (1)         (1)       (1)         (2)       (3)         (4)       (4)         (5)       (6)         (7)       (3)         (9)       (2)         (1)       (2)         (3)       (4)         (9)       (1)         (1)       (2)         (2)       (2)         (3)       (2)         (4)       (4)         (5)       (6)         (7)       (1)         (6)       (2)         (1)       (2)         (2)       DEFERPED REDT SOL PLAT X col. (2) line 15.)         (1)       (2)       Description of liability         (2)       DEFERRED RENT & LEASE INCENTIVES 1					
(6)       (7)         (8)       (9)         (9)       (1)         (9)       (1)         (1)       (2)         (2)       (3)         (1)       (9)         (2)       (3)         (3)       (4)         (4)       (5)         (5)       (6)         (7)       (1)         (9)       (1)         (9)       (1)         (1)       (2)         (3)       (3)         (4)       (5)         (5)       (6)         (6)       (7)         (7)       (9)         (7)       (9)         (7)       (1)         (9)       (1)         (1)       (2)         (2)       (2)         (3)       (3)         (4)       (5)         (5)       (6)         (6)       (6)         (7)       (9)         (1)       Federal income taxes         (2)       DEFERRED RENT & LEASE INCENTIVES         (1)       Federal income taxes         (2)       DEFERRED RENT & LEASE INCENTIVES	(3)				
(6)       (7)         (8)       (9)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       (9)         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a)       (b) Book value         (2)       (a)       (b)         (3)       (a)       (b)         (4)       (c)       (c)         (5)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)         Total. (Column (b) must equal Form 990, Part X col. (B) line 15.)       (c)         (a)       (c)       (c)         (b)       Book value       (c)         (1)       Federal income taxes       (c)         (2)       DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3)       (a)       (b)       (c)         (6)       (c)       (c)       (c)         (7)       (c)       (c)         (6)       (c)       <	(4)				
[7]       [8]         (9)       [9]         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       [Part IX]         Other Assets.       [a] Description         (a) Description       (b) Book value         (1)       [a] Description         (2)       [b]         (3)       [c]         (4)       [c]         (6)       [c]         (7)       [c]         (8)       [c]         (9)       [c]         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       [c]         [f]       [c]         (a) Description of liability       [b] Book value         (1)       [c]         (9)       [c]         [f]       [c]         (a) Description of liability       [b] Book value         (1) Federal income taxes       [c]         [c] DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         [a]       [b]         (b)       [c]         (c)       [c]         (b)       [c]         (c)       [c]         (a) Description of liability       [b] Book value         (1) Federal income taxes       [c]	(5)				
(8)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►       (a) Description         (b) Book value       (b) Book value         (1)       (a) Description         (2)       (b) Book value         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c) Description of liability         (a) Description of liability       (b) Book value         (7)       (c)         (8)       (c)         (9)       (c) Description of liability         (a) Description of liability       (b) Book value         (1)       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUITIES PAYABLE       39, 028.         (4)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         (1) Liability for uncertain tax positions. In Part XII, provide the text of the footnote to the organiza	(6)				
(9)       Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1)       (a) Description         (a) Description       (b) Book value         (c)       (c)         (a)       (c)         (b)       (c)         (c)       (c)	(7)	ļ			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1)       (a)         (2)       (b) Book value         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       (c) DEFERRED RENT & LEASE INCENTIVES         (2) DEFERED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUITIES PAYABLE       39, 028.         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         (11) Federal Income taxes       (c)         (6)<	(8)				
Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a) Description       (b) Book value         (2)       (3)       (4)       (5)         (6)       (7)       (6)       (7)         (8)       (9)       (9)       (9)         Total. (c) ther Liabilities.       (a) Description of liability       (b) Book value         (1)       (a) Description of Size Form 990, Part X, col. (B) line 15.)       (b) Book value         (1)       Federal income taxes       (2) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3)       (3)       (9)       (b) Book value       (c)         (1)       Federal income taxes       (c)       (c)       (c)         (2)       DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.       (c)         (3)       ANNUITIES PAYABLE       39, 028.       (d)         (6)       (7)       (6)       (7)       (7)         (8)       (9)       1, 835, 648.       (2)       DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3)       ANNUITIES PAYABLE       39, 028.       (4)       (5)       (6)       (7)					
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a) Description       (b) Book value         (2)       (a)       (b) Book value         (3)       (a)       (b) Book value         (4)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (c)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on 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       (c) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUTTIES PAYABLE       39, 028.       (d)         (5)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)<					
(a) Description       (b) Book value         (1)       (b) Book value         (2)       (c)         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990. Part X, col. (B) line 15.)       (c)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990. Part IV, line 11e or 11f. See Form 990. Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       (c) DEFERRED RENT & LEASE INCENTIVES         (2) DEFERRED RENT & LEASE INCENTIVES       1,796,620.         (3) ANNUITIES PAYABLE       39,028.         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         (a)       (c) Liability for uncertain tax positions. In Part XII, provide the text of the foothore to the organization's financial statements that reports the					
(1)       (2)         (3)       (4)         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       (b) Book value         (1) Federal income taxes       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       (c) DEFERRED RENT & LEASE INCENTIVES         (2) DEFERRED RENT & LEASE INCENTIVES       1,796,620.         (3) ANNUITIES PAYABLE       39,028.         (4)       (5)         (6)       (7)         (8)       (9)         (9)       1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the			, line 11d. See Form 990, I	Part X, line 15.	
(2)       (3)         (4)       (4)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (6)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       (2) DEFERRED RENT & LEASE INCENTIVES         (2) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUITIES PAYABLE       39, 028.         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		Description			(b) BOOK value
(3)       (4)         (5)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15,)       (1)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on 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 & LEASE INCENTIVES         1, 796, 620.         (3) ANNUITIES PAYABLE         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1, 835, 648.					
(4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       >         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       1, 796, 620.         (2) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUITIES PAYABLE       39, 028.         (4)       (5)         (6)       (7)         (8)       (9)         (9)       1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
(5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15)       (b) Book value         (1)       (a) Description of liability       (b) Book value         (1)       Federal income taxes       (2) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUITIES PAYABLE       39, 028.         (4)       (5)       (6)         (7)       (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
(6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability         (1) Federal income taxes       (b) Book value         (2) DEFERRED RENT & LEASE INCENTIVES       1, 796, 620.         (3) ANNUITIES PAYABLE       39, 028.         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
(7)       (8)         (9)       Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on 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 & LEASE INCENTIVES         (3) ANNUITIES PAYABLE         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1, 835, 648.					
(8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on 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 & LEASE INCENTIVES         (3) ANNUITIES PAYABLE         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
(9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X         Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes         (2) DEFERRED RENT & LEASE INCENTIVES         1, 796, 620.         (3) ANNUITIES PAYABLE         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on 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 & LEASE INCENTIVES         (3) ANNUITIES PAYABLE         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the					
Part X       Other Liabilities.         Complete if the organization answered "Yes" on 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 & LEASE INCENTIVES         (3) ANNUITIES PAYABLE         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1, 835, 648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		15)			
1.       (a) Description of liability       (b) Book value         (1) Federal income taxes       (c) DEFERRED RENT & LEASE INCENTIVES       1,796,620.         (3) ANNUITIES PAYABLE       39,028.         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		<u> </u>		F I	
(1) Federal income taxes       (1) Federal income taxes         (2) DEFERRED RENT & LEASE INCENTIVES       1,796,620.         (3) ANNUITIES PAYABLE       39,028.         (4)       (5)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Complete if the organization answered "Yes" of	on Form 990, Part IV,	, line 11e or 11f. See Form	990, Part X, line 25.	
(2) DEFERRED RENT & LEASE INCENTIVES       1,796,620.         (3) ANNUITIES PAYABLE       39,028.         (4)       (5)         (5)       (6)         (7)       (8)         (9)       1,835,648.         I not all statements that reports the	1. (a) Description of liability		(b) Book value		
(3) ANNUITIES PAYABLE       39,028.         (4)       (5)         (5)       (6)         (7)       (8)         (9)       1,835,648. <b>1</b> ,835,648. <b>2.</b> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(1) Federal income taxes				
(4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(2) DEFERRED RENT & LEASE INCH	INTIVES	1,796,620.		
(5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(3) ANNUITIES PAYABLE		39,028.		
(6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(4)				
(7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         ▶       1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(5)				
(8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         ▶       1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(6)				
(9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         ▶       1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(7)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       ▶ 1,835,648.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(8)				
<ol> <li>Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the</li> </ol>	(9)				
	2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footno	ote to the organization's fir	nancial statements th	at reports the

832053 10-29-18

15230214 150872 AWF

### AFRICAN WILDLIFE FOUNDATION, INC. ner Securities. <u>Schedule D</u> (Form 990) 2018 Pa

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icuaic D	(1 01111 000) 2010	
art VII	Investments -	Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) 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)		
「otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

(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)		
Total. (Col. (b) must equal Form 990. Part X. col. (B) line 13.)		

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

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 [X]

Schedule D (Form 990) 2018

1

	dule D (Form 990) 2018 AFRICAN WILDLIFE FOUNDAT		52-0781390	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ements With Revenu	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)			
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expension	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	10-		
1		e 12a.	· · · ·	
	Total expenses and losses per audited financial statements		1	
2			1	
2 a	Total expenses and losses per audited financial statements		1	
	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a	1	
а	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a 2b	<u>1</u>	
а	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c	<b>1</b>	
а	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d		
a b c d	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines <b>2a</b> through <b>2d</b>	2a 2b 2c 2d		
a b c d e	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d		
a b c d e 3	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a 2b 2c 2d		
a b c d 3 4	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 2d		
a b c d 3 4	Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b	2e 3	
a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 2d	2e 3 4c	

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 FIVE
PERCENT OF THE BEGINNING INVESTED MARKET VALUE OF THE BOARD-DESIGNATED
ENDOWMENT IN CURRENT YEAR OPERATIONS, OR A LOWER AMOUNT AS AGREED THROUGH
AWF 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 STATED RETURN OBJECTIVE, THE
BOARD-DESIGNATED ENDOWMENT FUND IS EXPECTED TO ACHIEVE REAL GROWTH NET OF
INFLATION OVER THE LONG-RUN.
832054 10-29-18 Schedule D (Form 990) 2018

				FOUNDATION,	INC.	52-0781390	Page 5
Part XIII	Supplemental Inforn	nation (contin	ued)				

### PART X, LINE 2:

AWF PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE YEAR

ENDED JUNE 30, 2019, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD

REQUIRE RECOGNITION OR DISCLOSURE IN THESE CONSOLIDATED FINANCIAL

STATEMENTS OR WHICH MAY HAVE AN EFFECT ON THE TAX-EXEMPT STATUS OF AWF,

INC.

Schedule D (Form 990) 2018

1

832055 10-29-18

(Form 990)	Complete if	2018				
Department of the Treasury				Open to Public		
Internal Revenue Service	Go to	www.irs.gov/Fo	orm990 for instructions and the lates	t information.		Inspection
Name of the organization					Employer id	entification number
AFRICAN WILDL	IFE FOUNDA	TION, IN	с.		52-078	1390
		ctivities Out	side the United States. Compl	ete if the orgar	ization answer	ed "Yes" on
	art IV, line 14b.					
-	-		ds to substantiate the amount of its gra the selection criteria used to award the			X Yes No
2 For grantmakers. D United States.	Describe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance	outside the
3 Activities per Region	n. (The following Part	I, line 3 table ca	an be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, specific type (s) in the region	expenditures for and investments
SUB-SAHARAN AFRICA	0	149	EMPLOYEES			6,076,520.
SUB-SAHARAN AFRICA	22	0	MAINTAINING OFFICES			325,012.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING			3,333,714.
					N PROGRAMS,	
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	EDUCATION &	OUTREACH	15,447,456.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	3	EMPLOYEES			371,008.
						371,000.
EUROPE (INCLUDING						
ICELAND & GREENLAND)	2	0	MAINTAINING OFFICES			3,891.
3 a Subtotal	24	152				25,557,601.
<b>b</b> Total from continuat sheets to Part I		0				0.
c Totals (add lines 3a	24	152				25 557 601

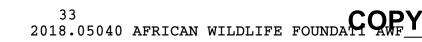
**Statement of Activities Outside the United States** 

OMB No. 1545-0047

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

832071 10-31-18



Schedule F (Form 990) 2018

1

SCHEDULE F

52-0781390

# 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>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		SUB-SAHARAN	SUPPORT TO FARO					
		AFRICA	NATIONAL PARK	100,964.	WIRE/EFT	0.		
			SUPPORT TO OLE NARIKA					
			& KITENDEN SCOUTS					
		SUB-SAHARAN	AND PAYMENT OF					
		AFRICA	KITENDEN LEASES	6,260.	WIRE/EFT	0.		
		SUB-SAHARAN						
		AFRICA	AIRPORT SNIFFER DOGS	68,794.	WIRE/EFT	٥.		
			PARTNERSHIP FOR	, -				
			IMPROVED					
		SUB-SAHARAN	ANTI-POACHING AND					
		AFRICA	COMPATIBLE LAND USE	11,498.	WIRE/EFT	0.		
		SUB-SAHARAN	AFRSG MEETING SUPPORT					
		AFRICA	FEB 2019	20,000.	WIRE/EFT	0.		
		SUB-SAHARAN						
		AFRICA	AIRPORT SNIFFER DOGS	129,364.	WIRE/EFT	0.		
		SUB-SAHARAN	MANYARA RANCH					
		AFRICA	ANTI-POACHING PROGRAM	105,640.	WIRE/EFT	0.		_
			MANAGEMENT OF THE					
		SUB-SAHARAN	BILI MBOMU FOREST					
		AFRICA	SAVANNA COMPLEX	342,257.	WIRE/EFT	0.		
2 Enter total number of	recipient organizatio	ns listed above that are	e recognized as charities by the	foreign country,	recognized as tax-exe	empt		
by the IRS, or for whi	ch the grantee or cou	insel has provided a se	ction 501(c)(3) equivalency lette	r		► _		15
3 Enter total number of						▶		26

SEE PART V FOR COLUMN (D) DESCRIPTIONS

chedule F (For				FOUNDATION, INC		52-07			Page 2
	ntinuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9			
1 (a) Name of or	rganization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM\ appraisal, other)
				KRUGER LIMPOPO RHINO					
			SUB-SAHARAN	PROTECTION PHASE					
			AFRICA	1-PAYMENT 2	12,500.	WIRE/EFT	0.		
				CENTRAL AFRICA FOREST					
				ECOSYSTEMS					
			SUB-SAHARAN	CONSERVATION					
			AFRICA	(CAFEC)MARINGA-LOPORI-	23,758.	WIRE/EFT	0.		
				SAFEGUARDING BONOBO					
				AND MARINGA-LOPORI-					
			SUB-SAHARAN	WAMBA FOREST					
			AFRICA	LANDSCAPE	148,843.	WIRE/EFT	0.		
			SUB-SAHARAN	COMMUNITY CONSERVANCY					
			AFRICA	SUPPORT	26,278.	WIRE/EFT	0.		
				WILDLIFE REGULATIONS					
				DRAFTING, NGULIA					
			SUB-SAHARAN	RHINO PROGRAM, TSAVO					
			AFRICA	WEST NATIONAL PARK	352,179.	WIRE/EFT	0.		
				MARA REGIONAL LION					
			SUB-SAHARAN	RESEARCH AND					
			AFRICA	CONSERVATION PROJECT	29,944.	WIRE/EFT	0.		
			SUB-SAHARAN	COMMUNITY CONSERVANCY					
			AFRICA	SUPPORT	43,379.	WIRE/EFT	0.		
				SUPPORTING					
			SUB-SAHARAN	ANTI-POACHING AND					
			AFRICA	TRAINING	139,089.	WIRE/EFT	0.		
			SUB-SAHARAN	CANIVE FOR					
			AFRICA	CONSERVATION SUPPORT	22,240.	WIRE/EFT	0.		

Schedule F (Form 990)	AFRIC	AN WILDLIFE	FOUNDATION, INC.	•	52-07	81390		Page <b>2</b>
Part II Continuation	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1		-
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		SUB-SAHARAN AFRICA	SUPPORT VEGETATION IN A CONSERVANCY	104,673.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	SUPPORT TO LAND USE PLANNING KILOMBERO	39,885.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	ADC-MUTARA RANGERS SUPPORT_UNIFORMS& TRAINING	87,700.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION (CAFEC)MARINGA-LOPORI-	6 457.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	PAINTED DOG CONSERVATION		WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	CANIVE FOR CONSERVATION SUPPORT		WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	CENTRAL AFRICA FOREST ECOSYSTEMS CONSERVATION (CAFEC)MARINGA-LOPORI-		WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	REFORESTATION PLANNING FOR THE UDZUNGWA-KILOMBERO ECOSYSTEM		WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	FORMATION OF KILOMBERO CATCHMENT COMMITTEE	5,521.	WIRE/EFT	0.		

chedule F (Form 990)			FOUNDATION, INC		52-07			Page
	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9			
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, FM appraisal, other)
		SUB-SAHARAN	COMMUNITY SCOUTS					
		AFRICA	ANTIPOACTING SUPPORT	19,676.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	RHINO CONSERVATION	21 465	WIRE/EFT	0.		
		AFRICA	MIINO CONSERVATION	21,403.	WIRE/EFT			
		SUB-SAHARAN	SUPPORT FOR RHINO					
		AFRICA	PROTECTION	194,400.	WIRE/EFT	0.		
		SUB-SAHARAN	SUPPORT TO THE UGANDA					
		AFRICA	INVESTMENT PROJECT	84,993.	WIRE/EFT	0.		
		SUB-SAHARAN		10.075				
		AFRICA	LUKOSI RESTORATION SUSTAINABILITY AND	18,277.	WIRE/EFT	0.		
			INCLUSION STRATEGY					
		SUB-SAHARAN	FOR GROWTH CORRIDORS					
		AFRICA	IN AFRICA (HEREAFTER	138,674.	WIRE/EFT	0.		
		SUB-SAHARAN	TANZANIA GIRAFFE CONSERVATION STATUS					
		AFRICA	ASSESSMENT	133 819	WIRE/EFT	0.		
			HUMAN-LION CONFLICT					
			MITIGATION IN THE					
		SUB-SAHARAN	MAASAI STEPPE,					
		AFRICA	NORTHERN TANZANIA	10,416.	WIRE/EFT	0.		
			PARTNERSHIP FOR					
		SUB-SAHARAN	IMPROVED ANTI-POACHING AND					
		AFRICA	COMPATIBLE LAND USE	41 410	WIRE/EFT	0.		

Schedule F (Form 990)			FOUNDATION, INC		52-07			Page <b>2</b>
Part II     Continuation of       1     (a) Name of organization	of Grants and Other (b) IRS code section and EIN (if applicable)	(c) Region	tions or Entities Outside the (d) Purpose of grant	United States. (e) Amount of cash grant	(f) Manner of	90), Part II, line 1 (g) Amount of non-cash assistance	) (h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		SUB-SAHARAN AFRICA	VILLAGE SCOUTS SUPPORT	6,108.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	SUPPORT TO DJA NATIONAL PARK	108,102.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	HEAVY ROAD EQUIPMENT FOR PARK MAINTENANCE	16,553.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	PARTNERSHIP FOR IMPROVED ANTI-POACHING AND COMPATIBLE LAND USE	180,181.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	SUPPORT TO MANA POOLS NATIONAL PARK	38 753.	WIRE/EFT	0.		
		SUB-SAHARAN AFRICA	ENHANCING AFRICAN WILDLIFE LWA ENFORCEMENT AND NETWROKING		WIRE/EFT	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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
DIPLOMA WILDLIFE	SUB-SAHARAN						
MANAGEMENT-MWEKA	AFRICA	1	7,001.	EFT	0.		
MANAGEMENT	AFRICA	1	6,437.	EFT	0.		
MASTER OF LAWS IN WILDLIFE	SUB-SAHARAN						
CRIME	AFRICA	1	8,013.	RFT	0.		
KABALE ROTARY CLUB	SUB-SAHARAN						
SCHOLARSHIP PROGRAM	AFRICA	9	13,050.	EFT	0.		
RESEARCH FEES PHD-	SUB-SAHARAN						
BIODIVERSITY CONSERVATION	AFRICA	1	7,155.		0.		
BIODIVERSITI CONSERVATION	AFRICA		7,155.	5F 1	0.		

Schedule F (Form 990) 2018

Part IV Foreign Form			1001001110117	11101
Schedule F (Form 990) 2018	AFRICAN	WILDLIFE	FOUNDATION,	INC.

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the		
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes	No No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	No 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	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865. Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

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

PART I, LINE 2:

Schedule F (Form 990) 2018

AWF OCCASIONALLY WORKS WITH SUB-RECIPIENTS. IN SUCH CASES, ONLY KNOWN,

VETTED ORGANIZATIONS ARE CHOSEN THAT CAN DEMONSTRATE AN ABILITY TO

AFRICAN WILDLIFE FOUNDATION, INC.

ACCOMPLISH THE PROGRAM OBJECTIVES. SUB-RECIPIENTS ARE OFTEN INCLUDED BY

NAME IN GRANT PROPOSALS.

Part V | Supplemental Information

SUB-RECIPIENTS ARE GENERALLY PROVIDED WITH ADVANCES AND ARE 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 COO FOR ADDED SCRUTINY AND APPROVALS PRIOR TO DISTRIBUTION.

PART I, LINE 3:

IN ACCORDANCE WITH IRS INSTRUCTIONS, ALL AMOUNTS REPORTED ON PARTS I, II, AND III OF SCHEDULE F ARE REPORTED USING THE ACCRUAL BASIS OF ACCOUNTING, THE SAME METHOD OF ACCOUNTING USED IN THE FINANCIAL STATEMENTS.

PART II, COLUMN (D):

**REGION: SUB-SAHARAN AFRICA** 

(D) PURPOSE OF GRANT: PARTNERSHIP FOR IMPROVED ANTI-POACHING AND

COMPATIBLE LAND USE IN COMMUNITY LANDS LOZA

832075 10-31-18

Schedule F (Form 990) 2018 AFRICAN WILDLIFE FOUNDATION, INC.
Part V Supplemental Information

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

REGION: SUB-SAHARAN AFRICA

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

(CAFEC)MARINGA-LOPORI-WAMBA FOREST LANDSCAPE

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: WILDLIFE REGULATIONS DRAFTING, NGULIA RHINO

PROGRAM, TSAVO WEST NATIONAL PARK RHINO ANTIPOACHING & WATER IMPROVEMENT

REGION: SUB-SAHARAN AFRICA

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

(CAFEC)MARINGA-LOPORI-WAMBA FOREST LANDSCAPE

REGION: SUB-SAHARAN AFRICA

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

(CAFEC)MARINGA-LOPORI-WAMBA FOREST LANDSCAPE

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: SUSTAINABILITY AND INCLUSION STRATEGY FOR GROWTH

CORRIDORS IN AFRICA (HEREAFTER ALTERNATIVELY REFERRED TO AS "SUSTAIN

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: PARTNERSHIP FOR IMPROVED ANTI-POACHING AND

COMPATIBLE LAND USE IN COMMUNITY LANDS MANA POOLS

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: PARTNERSHIP FOR IMPROVED ANTI-POACHING AND

COMPATIBLE LAND USE IN COMMUNITY LANDS MANA POOLS

832075 10-31-18

SCHEDULE G	Suppleme	ental Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	or if the	2018					
Department of the Treasury		Attach to Form 990	or Fo	rm 99	0-EZ.			Open to Public
Internal Revenue Service	► Go	o to www.irs.gov/Form990 for instr	uction	s and	the latest informati	on.		Inspection
Name of the organization	ו							ntification number
	AFRICAN	WILDLIFE FOUNDATI	ON,	INC	2.		52-0781	390
	complete this par	Complete if the organization answe t.	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
1 Indicate whether the	e organization rais	ed funds through any of the followin	ig activ	vities. (	Check all that apply.			
a X Mail solicitat	•		•		overnment grants			
<b>b</b> X Internet and	email solicitations							
c X Phone solici		g 📃 Special		-	-			
d X In-person so		<b>3</b> 1		0				
		or oral agreement with any individual	(includ	ling of	ficers, directors, trus	tees,	or	
•		art VII) or entity in connection with p	•	Ũ		,	X Yes	No
		viduals or entities (fundraisers) pursu			e	ne fur		
compensated at le	•			0				
·		Ĵ						
(i) Name and addres	s of individual		(iii) fundr	Did	(iv) Gross receipts		Amount paid or retained by)	(vi) Amount paid
or entity (fund		(ii) Activity		ustody trol of	from activity		fundraiser	to (or retained by)
5.0			contrib	utions?	,	lis	ted in col. <b>(i)</b>	organization
SANKY COMMUNICATION	NS, INC	MANAGEMENT OF DIRECT MAIL	Yes	No				
599 11TH AVENUE, 61	TH FLOOR,	PROGRAM		x	6,097,463.		462,700.	5,934,763.
SHARPE GROUP - 855	RIDGE LAKE	CONSULTING FOR LEGACY						
BOULEVARD, SUITE 30	00,	GIVING PROGRAM		x	2,062,009.		14,400.	2,047,609.
STELTER - 10435 NEW	V YORK	CONSULTING FOR LEGACY						
AVENUE, DES MOINES,	, IA 50322	GIVING PROGRAM		x	0.		65,853.	-65,853.
Total					8,159,472.		542,953.	7,916,519.
<ol> <li>List all states in whi or licensing.</li> </ol>	ich the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	exempt from re	gistration

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990 or 990-EZ) 2018

1

832081 10-03-18

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

		of fundraising event contributions and gro		(b) Event #2		
			(a) Event #1	(ס) בvent #2	(c) Other events	(d) Total events (add col. (a) through
۵			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts				
ш	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	5					
	4	Cash prizes				
se	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
		Direct expense summary. Add lines 4 through	· / · · · · · · · · · · · · · · · · · ·			
D	11	Net income summary. Subtract line 10 from li				
Pa	nrt I	<b>II Gaming.</b> Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form		reported more than	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Be	1	Gross revenue				
	•					
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			<b>Yes</b> %	<b>Yes</b> %	<b>Yes</b> %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
~	<b>F</b>	ex the state(s) is which the exception condu	ete comina estivition			
9		er the state(s) in which the organization condu he organization licensed to conduct gaming ac		states?		Yes No
		No," explain:				
		re any of the organization's gaming licenses re Yes," explain:			/ear?	Yes No
8320	32 10	-03-18			Schedule G (For	rm 990 or 990-EZ) 2018

Schedule G (Form 990 or 990 EZ) 2018 AFRICAN WILDLIFE FOUNDATION, INC. 52-0	0781390	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	No
<b>13</b> Indicate the percentage of gaming activity conducted in:	1 1	
a The organization's facility		%
<b>b</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		
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	🗌 No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
of gaming revenue retained by the third party $\blacktriangleright$ \$		
<b>c</b> 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		<b></b> .
retain the state gaming license?	Yes	
<b>b</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 <b>b \$</b>		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	art III, lines 9, 9	b, 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	c.	
DEMEDDIE G, TAKI I, HIME ZD, HIDI OF TEM HIGHEDI TAID FONDATIDEK.	5.	
(I) NAME OF FUNDRAISER: SANKY COMMUNICATIONS, INC.		
(I) ADDRESS OF FUNDRAISER: 599 11TH AVENUE, 6TH FLOOR, NEW YORK,	NY 100	)36
(I) NAME OF FUNDRAISER: SHARPE GROUP		
(I) ADDRESS OF FUNDRAISER:		
855 RIDGE LAKE BOULEVARD, SUITE 300, MEMPHIS, TN 38120		
832083 10-03-18 Schedule G (For	m 990 or 990-	EZ) 2018

Schedule G (Form 990 or 990-EZ) AFRICAN WILDLIFE FOUNDATION, INC. 52-078139 Part IV Supplemental Information (continued)	
Schedule G (Form 99	
832084 04-01-18	) or 990-E7)

46 2018.05040 AFRICAN WILDLIFE FOUNDATION 1

15230214 150872 AWF

SCHEDULE I			irants and Oth					OMB No. 1545-0047
(Form 990)			vernments, an ete if the organization					2018
Department of the Treasury Internal Revenue Service		Comp	-	Attach to Fori s.gov/Form990 for	m 990.			Open to Public Inspection
Name of the organization		ILDLIFE F	OUNDATION,	INC.				Employer identification number $52 - 0781390$
Part I General Info	rmation on Grants a	nd Assistance						
<ol> <li>Does the organizati criteria used to awa</li> <li>Describe in Part IV</li> </ol>	ard the grants or assis	tance?					stance, and the selecti	
						anization answered "Y	′es" on Form 990, Part	IV line 21 for any
		•	be duplicated if addition		1 0			
<b>1 (a)</b> Name and address or gover	ess of organization	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
INTERNATIONAL FUND WELFARE, INC 290 - YARMOUTH PORT, MA	SUMMER STREET	31-1594197	501(C)(3)	101,700.	0.			ENHANCING AFRICAN WILDLIFE LAW ENFORCEMENT AND NETWORKING
	01075	51 155 1157	501(0)(3)	101,700.				CENTRAL AFRICA FOREST
UNIVERSITY OF MARYL	AND							ECOSYSTEMS CONSERVATION
UNIVERSITY OF MARYL	AND							(CAFEC)MARINGA-LOPORI-WAMB
COLLEGE PARK, MD 20	742	52-6002033	501(C)(3)	11,748.	0.			A FOREST LANDSCAPE
NATURE'S BEST PHOTO 1930 ISSAC NEWTON S RESTON, VA 20910		27-0222344	501(C)(3)	17,555.	0.			NATURE'S BEST PHOTOGRAPHY SPONSORSHIP
		<b>v</b>	anizations listed in the	e line 1 table				
	of other organizations eduction Act Notice,							Schedule I (Form 990) (2018)

#### Schedule I (Form 990) (2018) AI

AFRICAN	WILDLIFE	FOUNDATION	, INC.
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52-0781390

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	1		1	1	

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

 Schedule 1 (Form 990)
 AFRICAN WILDLIFE FOUNDATION, INC.
 52-0781390
 Page 2

 Part IV
 Supplemental Information
 IANDSCAPE/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 COO FOR ADDED SCRUTINY AND APPROVALS PRIOR TO

 DISTRIBUTION.

Schedule I (Form 990)

1

832291 04-01-18

sc	HEDULE J	Compensation Information	I	OMB No. 1	545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	10	)
		Compensated Employees		20	10	)
Dono	tment of the Treasury	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to		ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	ne of the organizatio			identificatio		nber
		AFRICAN WILDLIFE FOUNDATION, INC.	52-0	078139	0	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or					
	Travel for con					
		cation and gross-up payments				
	Discretionary	spending account Personal services (such as maid, chauffer	ır, chet)			
b		on line 1a are checked, did the organization follow a written policy regarding payment or		4		
•	-			1b		
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		2		
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		Z		<u> </u>
3	Indicate which if a	ny, of the following the filing organization used to establish the compensation of the organiza	tion's			
5		ector. Check all that apply. Do not check any boxes for methods used by a related organization				
		ation of the CEO/Executive Director, but explain in Part III.	51110			
	X Compensatio					
		compensation consultant X Compensation survey or study				
	X Form 990 of c		ommittee			
			ommittee			
4	During the year, di	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	-	e payment or change-of-control payment?		4a	Х	
b		ceive payment from, a supplemental nonqualified retirement plan?				X
с		ceive payment from, an equity-based compensation arrangement?				X
	If "Yes" to any of li	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	-					
	Only section 501(	:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the	evenues of:				
а						X
b		ation?				X
		or 5b, describe in Part III.				
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the	-				
а						X
b		ation?		6b		X
_		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		_		v
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				v
~				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
	Regulations section					0040
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Schee	dule J (Forn	n 990)	2018

### 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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	reported as deferred on prior Form 990
(1) KADDU SEBUNYA	(i)	233,648.	0.	0.	23,296.	14,505.	271,449.	0.
CEO - AS OF 01/2019	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TOM OGILVIE GRAHAM	(i)	255,503.	0.	0.	0.	10,028.	265,531.	0.
CEO - UNTIL 09/2018	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEFF CHRISFIELD	(i)	237,267.	0.	0.	23,755.	12,518.	273,540.	0.
COO - UNTIL 11/2018	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CRAIG SHOLLEY	(i)	197,410.	0.	0.	19,669.	9,205.	226,284.	0.
SENIOR VP, PHILANTHROPY AND MKTG	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CHARLY FACHEUX	(i)	187,350.	0.	0.	18,735.	20,008.	226,093.	0.
VP OF CONSERVATION PROJECTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) PHILIP MURUTHI	(i)	187,350.	0.	0.	18,735.	5,447.	211,532.	0.
VP OF SPECIES CONSERVATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LINDSAY KOSNIK	(i)	186,290.	0.	0.	11,563.	15,164.	213,017.	0.
VP OF PHILANTRHOPY & MKTG	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) KATHLEEN FITZGERALD	(i)	185,450.	0.	0.	18,500.	8,025.	211,975.	0.
VICE PRESIDENT, LAND PROTECTION	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) TYRENE HARALSON, VP OF	(i)	49,885.	0.	85,385.	4,625.	13,543.	153,438.	0.
FINANCE & ADMIN UNTIL 03/2018	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ERIC COPPENGER	(i)	134,244.	0.	0.	8,571.	14,195.	157,010.	0.
VP OF PROGRAM DESIGN	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) BRIAN MCBREARITY	(i)	159,450.	0.	0.	15,900.	5,334.	180,684.	0.
VP OF MANAGEMENT SYSTEMS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2018

#### 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 4A:

TYRENE HARALSON, VP OF FINANCE AND ADMINISTRATION, WAS COMPENSATED \$85,385

IN SEVERANCE DURING THE YEAR ENDING DECEMBER 31, 2018.

THE SEVERANCE PAID TO TOM OGILVIE GRAHAM, CEO, WAS PAID ON 2/22/2019. THE

PAYMENT WAS MADE DURING AWF'S 2019 FISCAL YEAR BUT NOT IN THE 2018 CALENDAR

YEAR.

Schedule J (Form 990) 2018

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047 2018

**Open to Public** 

Inspection

Employer identification number

52-0781390

Department of the Treasury	
Internal Revenue Service	

31

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

► G

Name of the	organization
-------------	--------------

io to www.irs.gov/f	Form990 for instruction	is and the latest information.	

# AFRICAN WILDLIFE FOUNDATION, INC.

Pa	rt I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	eterminin	•	3
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	45	612,091.	FAIR MARKET	VAL	UE	
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 ► (RECEIVABLES )	X	1	1,000,000.	FMV			
26	Other ► ()							
27	Other ► ()							
28	Other  ( )							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for which the organization completed Form 828	33, Part IV, [	Donee Acknowledg	gement 29				
						- Y	/es	N
30a	During the year, did the organization receive by							
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?	,				30a		Х
b	If "Yes," describe the arrangement in Part II.							

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 didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

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

Schedule M (Form 990) 2018

31

32a

Х

Х

1

832141 10-18-18

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

SCHEDULE M, PART I, COLUMN (B):

# AWF REPORTS THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN (B).

Schedule M (Form 990) 2018

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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. Go to www.irs.gov/Form990 for the latest information.

INC.



Employer identification number 52-0781390

FORM 990, PART III, LINE 4A:

WE OPERATE WITHIN STRATEGICALLY IMPORTANT LANDSCAPES, APPLYING OUR

AFRICAN WILDLIFE FOUNDATION,

DECADES OF CONSERVATION EXPERIENCE TO CREATE PRAGMATIC SOLUTIONS IN

PARTNERSHIP WITH RURAL COMMUNITIES AND AFRICAN GOVERNMENTS ALIKE. WE

ALSO PROVIDE CRITICAL ASSISTANCE TO NATIONAL PARKS AND RESERVES AND

PROMOTE TRANSBOUNDARY COOPERATION IN THE PROTECTION OF ESSENTIAL

WILDLIFE POPULATIONS. AWF WORK FALLS INTO THE FOLLOWING CORE AREAS:

LAND AND HABITAT CONSERVATION, WILDLIFE PROTECTION, AND EDUCATION &

ADVOCACY. BELOW ARE DESCRIPTIONS OF AWF WORK AND KEY ACHIEVEMENTS

WITHIN THE LAST FISCAL YEAR.

LAND AND HABITAT CONSERVATION

AWF'S SELECTS CROSS-BOUNDARY AREAS OF EXCEPTIONAL NATURAL VALUE, WHICH CALL "LARGE LANDSCAPES," FOR INTEGRATED INTERVENTIONS. THE GOAL IS WE PROTECT, AND EXPAND HABITAT FOR SPECIES THAT REQUIRE LARGE TO RESTORE, TRACTS OF RANGELAND IN ORDER TO THRIVE. AWF'S HOLISTIC APPROACH INCLUDES ENTERPRISE PROJECTS AND PROGRAMS THAT ENSURE LOCAL COMMUNITIES BENEFIT FROM WILDLIFE CONSERVATION IN LARGE LANDSCAPES.

SOUTHERN TANZANIA IS RESOURCE-RICH, WITH WATER CATCHMENTS, FERTILE AND DIVERSE WILDLIFE SPECIES. BUT INTENSIFIED LAND USE IS SOIL. CROWDING OUT WILDLIFE, AND HUMAN-WILDLIFE CONFLICT (HWC) IS A GROWING PROBLEM. ESSENTIAL ECOSYSTEM SERVICES SUCH AS WATER SUPPLY ARE AT RISK, TOO. AWF ADDRESSES THESE ISSUES THROUGH A SUITE OF PROJECTS DESIGNED TO DELIVER SUSTAINABLE RESOURCE MANAGEMENT THAT IMPROVES FARMER INCOMES; Schedule O (Form 990 or 990-EZ) (2018) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832211 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization AFRICAN WILDLIFE FOUNDATION, INC.	Employer identification number 52-0781390
AGRICULTURAL SOLUTIONS THAT ENHANCE RESILIENCE; HWC TOOLS;	ENGAGEMENT
WITH THE PRIVATE SECTOR TO PROMOTE SUSTAINABILITY; AND INC	ENTIVES TO
CONSERVE WILD LANDS. THESE EFFORTS OFFER A MODEL FOR CONSE	RVATION
THROUGHOUT AFRICA, DEMONSTRATING THAT ECONOMIC DEVELOPMENT	CAN GO
HAND-IN-HAND WITH CONSERVATION. SINCE 2015, AWF HAS HELPED	IMPROVE
INCOMES FOR 2,000 SMALLHOLDER FARMERS IN 13 VILLAGES IN IH	EMI AND
KILOMBERO, TWO "CLUSTERS" MARKED BY THE TANZANIAN GOVERNME	NT AS
PRIORITIES FOR AGRICULTURAL DEVELOPMENT. WE SUPPORT PRIMAR	ILY COCOA AND
SUGAR-CANE FARMERS THROUGH TRAINING IN BEST PRACTICES, EST	ABLISHING
NURSERIES, AND PROVIDING SEEDLINGS AND EQUIPMENT. WE DISTR	IBUTED OVER
8,000 TONS OF TREATED SEEDS TO 735 AREA FARMERS, WHO'VE SI	NCE NEARLY
DOUBLED AGRICULTURAL YIELDS. THE CANE GROWN FROM THE SEEDS	IS A
SWEETER, DROUGHT-TOLERANT, SHORT-SEASONED VARIETY THAT HEL	PS BUILD
CLIMATE RESILIENCE. TO REACH MORE FARMERS, AWF AND FARM RA	DIO
INTERNATIONAL HAVE PRODUCED PROGRAMS THAT DISCUSS HWC STRA	TEGIES SUCH
AS BEEHIVE FENCES, CLIMATE-SMART AGRICULTURE, AND MORE. RA	DIO IS A
FIXTURE IN RURAL AFRICA, AND THE BROADCASTS HAVE A REACH O	F OVER 1
MILLION LISTENERS.	

B. DJA FAUNAL RESERVE IN SOUTHEASTERN CAMEROON SPANS OVER 5,200 SQUARE KILOMETERS OF DENSE, TROPICAL FOREST. TO BEGIN TO HAVE A CONSERVATION IMPACT IN THIS REMOTE LOCALE, AWF NEEDED TO KNOW MORE ABOUT THE SPECIFIC POPULATIONS, MOVEMENT, AND OTHER BEHAVIOR OF WILDLIFE INHABITANTS, INCLUDING CHIMPANZEES, LOWLAND GORILLAS, AND FOREST ELEPHANTS. AWF SUPPLIED AND TRAINED DJA RANGERS TO USE CUTTING-EDGE MONITORING TECHNOLOGY SO THEY COULD EASILY RECORD (ON SMARTPHONES) OBSERVATIONS OF WILDLIFE SUCH AS DUNG OR TRACKS AS WELL AS EVIDENCE OF THREATS SUCH AS SNARES, AMMUNITION, AND HUNTING CAMPS. WE ALSO TRAINED Schedule O (Form 990 or 990-EZ) (2018) 832212 10-10-18 56 ΡЯ

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Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization AFRICAN WILDLIFE FOUNDATION, INC.	Employer identification number 52-0781390
AFRICAN WIDDIFF FOONDATION, INC.	52 0701390
THE PARK STAFF TO ANALYZE THE COLLECTED DATA WITH MONITORI	NG AND
REPORTING SOFTWARE. THE RESULTS PRODUCED A WEALTH OF ACTIO	NABLE
INFORMATION FOR DJA FAUNAL RESERVE MANAGERS, INCLUDING MAP	S OF WILDLIFE
SIGHTINGS, GRAPHS OF TRENDS IN SNARES AND HUNTING CAMPS EN	COUNTERED,
AND OTHER REPORTS USEFUL FOR PATROL PLANNING. THE DATA SHO	WED THAT THE
NORTHERN HALF OF DJA WAS UNDER THE MOST THREAT, SO PARK MA	NAGERS
ENHANCED RANGER PRESENCE THERE VIA FOUR OUTPOSTS IN HOTSPO	TS WHERE A
HIGH DENSITY OF WILDLIFE AND THREATS OVERLAPPED. IN 2018,	THE PARK
CONTINUED TO SEE A DECLINE IN HUNTING CAMPS AND EVEN EARLY	SIGNS OF
WILDLIFE POPULATION RECOVERY.	
C. SIMIEN MOUNTAINS NATIONAL PARK OFFERS STUNNING VIEWS, I	NCREDIBLE
LANDSCAPES, AND UNIQUE WILDLIFE. WORKING WITH THE ETHIOPIA	N WILDLIFE
CONSERVATION AUTHORITY (EWCA), AWF HAS HELPED DEVELOP A TE	N-YEAR PLAN
THAT WILL ADDRESS ONE OF THE PARK'S MOST PRESSING NEEDS, B	ETTER TOURISM

MANAGEMENT FOR A GROWING NUMBER OF VISITORS. A LOAN FROM AWF'S

INVESTMENT BRANCH HELPED DEVELOP THE LIMALIMO LODGE, WHICH OPENED IN

2015. THE NEW TOURISM PLAN CALLS FOR THE DEVELOPMENT OF AT LEAST TWO

ADDITIONAL LODGES, AS WELL AS IMPROVING CAMPSITES WITHIN THE PARK. AWF

IS SUPPORTING THE PLAN'S IMPLEMENTATION, PROVIDING TRAINING, MANAGING

RELATIONSHIPS WITH PRIVATE OPERATORS, AND ADVANCING THE MANAGEMENT AND

CONSERVATION OF THE PARK THROUGH A GENERAL MANAGEMENT PLAN. THROUGH A

PARTNERSHIP WITH EWCA AND THE GERMAN DEVELOPMENT BANK KFW, AWF HAS BEEN

WORKING TO ALLEVIATE OVERGRAZING PRESSURES WITHIN THE LANDSCAPE AS

WELL. THE KFW PROJECT IS HELPING TO REALIZE A NEW GRAZING PLAN, SPREAD

AWARENESS OF PARK BOUNDARIES, AND INCREASE THE CAPACITY OF COMMUNITY

GUARDS TO PREVENT ILLEGAL INCURSIONS INTO THE PARK.

WILDLIFE PROTECTION

CERTAIN SPECIES FACE UNIQUE THREATS AND REQUIRE A TARGETED CONSERVATION APPROACH. POPULATIONS OF RARE AND ENDANGERED SPECIES SUCH AS THE RHINOCEROS, ELEPHANT, LION, AND GORILLA HAVE BEEN DIMINISHED DUE TO POACHING, DISEASE, AND CONFLICT WITH HUMANS. AWF USES MANY METHODS, INCLUDING LAW ENFORCEMENT, TO MONITOR AND PROTECT CRITICAL POPULATIONS AND ENSURE THESE SPECIES SURVIVE AND THRIVE IN THEIR NATIVE HABITAT.

A. CANINES FOR CONSERVATION, A FLAGSHIP AWF PROGRAM, IS PART OF A STRATEGICALLY DESIGNED ECOSYSTEM OF SERVICES, INTERVENTIONS, AND ADVOCACY EFFORTS HELPING TO THWART THE ILLEGAL TRADE THAT THREATENS AFRICA'S ICONIC WILDLIFE. DETECTION DOG-AND-HANDLER UNITS TRAINED AND SUPPORTED BY AWF WERE FIRST STATIONED AT TRANSPORTATION HUBS IN KENYA, UGANDA, TANZANIA. THEY WERE MORE RECENTLY DEPLOYED TO SMUGGLING HOTSPOTS IN NORTHERN TANZANIA, AS WELL AS TO BOTSWANA, CAMEROON, AND MOZAMBIQUE. AWF HAS PLANS TO ESTABLISH UNITS IN ETHIOPIA AS WELL. SINCE CANINES FOR CONSERVATION STARTED, THE DETECTION UNITS HAVE UNCOVERED HUNDREDS OF CACHES IVORY, RHINO HORN, PANGOLIN SCALES, OR OTHER ILLICIT WILDLIFE PRODUCTS WORTH MILLIONS OF DOLLARS. THE SKILLED DOGS AND THEIR HANDLERS, WHO UNDERGO THREE MONTHS OF INTENSIVE TRAINING, CAN DETECT THE SMALLEST AMOUNT OF CONTRABAND, INCLUDING IVORY AND RHINO HORN DUST. THE CANINES FOR CONSERVATION UNITS ALSO WORK AS TRACKING TEAMS THAT CAN FOLLOW THE SCENT OF POACHERS BACK TO VILLAGES OR HIDEOUTS AFTER AN ILLEGAL KILL OR CAPTURE. BY RAISING THE STAKES OF POACHING AND OF MOVING ILLEGAL WILDLIFE PRODUCTS TO MARKET, BOTH TRACKING AND AIRPORT DOG-AND-HANDLER UNITS MAKE THE ILLICIT WILDLIFE TRADE MUCH LESS ATTRACTIVE TO WOULD-BE OFFENDERS.

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Name of the organization

AFRICAN WILDLIFE FOUNDATION, INC.

B. THROUGH TRAINING, LONG-TERM MENTORSHIPS, AND SENSITIZATION TO THE COSTS OF WILDLIFE CRIME, AWF IS HELPING TO STRENGTHEN WILDLIFE LAW ENFORCEMENT IN AFRICA. TO DATE, AWF'S WILDLIFE LAW ENFORCEMENT PROGRAM HAS TRAINED 1,370 INDIVIDUALS FROM 16 COUNTRIESPROSECUTORS, RANGERS, AIRPORT PERSONNEL, ANTI-CORRUPTION OFFICERS, AND OTHERS. WORKSHOPS COVER TOPICS INCLUDING WILDLIFE-CRIME INVESTIGATIONS, ADMISSIBILITY OF CANINE EVIDENCE, WILDLIFE RANGERS AS WITNESSES, AND HANDLING OF ELECTRONIC EVIDENCE. IN 2019 AWF CONDUCTED TRAINING PROGRAMS IN KEY AFRICAN REGIONS TO IMPROVE AND SUSTAIN TRANSBOUNDARY PROSECUTORIAL COOPERATION. ENCOURAGING COLLABORATION AMONG AGENCIES IS ESSENTIAL, GIVEN THE DYNAMIC AND CROSS-BOUNDARY NATURE OF WILDLIFE CRIME. AWF ALSO INFLUENCES THE DEVELOPMENT OF LAWS AND POLICIES THAT CAN HELP DETER CRIME. TO DATE, AWF HAS DELIVERED ANALYSES OF NATIONAL WILDLIFE LEGISLATION TO BOTSWANA, CAMEROON, DRC, ETHIOPIA, KENYA, MOZAMBIQUE, SOUTH AFRICA, SWAZILAND, TANZANIA, AND UGANDA. AWF'S STILL-GROWING LAW ENFORCEMENT PROGRAM HIGHLIGHTS OUR COMMITMENT TO DELIVERING ORGANIC, HOLISTIC SOLUTIONS THAT SUPPORT AFRICAN-LED CONSERVATION.

C. AWF WAS INTEGRAL TO KENYA'S DEVELOPMENT OF A NATIONAL GIRAFFE RECOVERY AND ACTION PLAN, WHICH WAS RELEASED IN LATE 2018. KENYA IS A GIRAFFE STRONGHOLD, BUT IN RECENT DECADES HAS LOST A SIGNIFICANT NUMBER OF ITS THREE GIRAFFE SUBSPECIES (THE MAASAI, ROTHSCHILD'S, AND RETICULATED GIRAFFE). THE RECOVERY PLAN, DEVELOPED BY A SPECIAL TASK FORCE THAT INCLUDED AWF SENIOR STAFF MEMBERS, SEEKS TO MITIGATE THREATS AND REVERSE GIRAFFE DECLINES WHILE ENSURING BENEFITS ACCRUE TO COMMUNITIES. STRATEGIES THE TASK FORCE DELINEATED INVOLVE: SECURING HABITAT AND STOPPING POACHING; IMPROVING MANAGEMENT OF PROTECTED AREAS 802212 10-10-18 Schedule O (Form 900 or 990-EZ) (2018) 59

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Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization AFRICAN WILDLIFE FOUNDATION, INC.	Employer identification number 52-0781390
AND GIRAFFE POPULATIONS; MITIGATING HUMAN-WILDLIFE CONFLIC	T, AND
INSPIRING COMMUNITY SUPPORT FOR GIRAFFE CONSERVATION. AWF	ALSO PROVIDED
TECHNICAL AND FINANCIAL SUPPORT FOR THE KENYA WILDLIFE SER	VICE'S (KWS)
UNDERCOVER INVESTIGATION OF TRADE IN GIRAFFE MEAT. THROUGH	DNA ANALYSIS
KWS FOUND THAT THE MEAT SOME BUTCHERIES WERE SELLING AS BE	EF CONTAINED
MEAT OF GIRAFFE AND OTHER WILDLIFE. KWS AND AWF CONTINUE T	O PARTNER ON
WILDLIFE LAW ENFORCEMENT THROUGH BUTCHERIES' MONITORING.	
FORM 990, PART III, LINE 4A:	
AWF ALSO IS IMPLEMENTING A COMPREHENSIVE PROGRAM TO ENSURE	LONG-TERM
GIRAFFE SURVIVAL IN ONE OF THE SPECIES' FAVORED HABITATS,	ТНЕ
CROSS-BORDER TSAVO-MKOMAZI LANDSCAPE.	

FORM 990, PART III, LINE 4B:

AWF IS THE VOICE OF WILDLIFE IN MEETING ROOMS WHEN IMPORTANT DECISIONS

ARE MADE THAT WILL HAVE LASTING CONSERVATION IMPACTS.

A. AS MORE YOUNG AFRICANS ENTER THE FIGHT FOR ENVIRONMENTAL ACTION AND INCLUSIVITY, AWF IS HELPING TO BUILD YOUTH LEADERSHIP AND ADVOCACY SKILLS IN THE POLICY ARENA. ONE OF OUR MOST SIGNIFICANT RECENT SUCCESSES OCCURRED IN NOVEMBER 2018 IN SHARM EL-SHEIKH, EGYPT, AT THE CONFERENCE OF THE PARTIES TO THE CONVENTION FOR BIOLOGICAL DIVERSITY (CBD), THE WORLD'S LARGEST BIODIVERSITY MEETING. THE CONVENTION IS A MULTILATERAL TREATY THAT SEEKS TO ENSURE CONSERVATION AND THE WORLD'S SUSTAINABLE AND EQUITABLE USE OF BIODIVERSITY. AHEAD OF THE NEGOTIATIONS IN EGYPT, 50 YOUNG AFRICANS FROM 17 COUNTRIES ATTENDED AN INTENSIVE FIVE-DAY WORKSHOP THAT AWF HOSTED IN NAIROBI. AWF STAFF MEMBERS FACILITATED IN-DEPTH DISCUSSIONS ABOUT YOUNG PEOPLE'S ROLE IN Schedule O (Form 990 or 990-EZ) (2018) 832212 10-10-18 60 2018.05040 AFRICAN WILDLIFE FOUNDATION

Schedule O (Form 990 or 990-EZ) (2018)		Page 2
Name of the organization AFRICAN WILDLIFE FOUNDATION, I	NC.	Employer identification number 52-0781390
AFRICA'S SOCIO-ECONOMIC DEVELOPMENT AND PROV	IDED EXPERTISE	ON RESOURCE
MOBILIZATION, LOBBYING FOR CHANGE, AND ADVOC.	ACY CAMPAIGNS.	PERHAPS MOST
IMPORTANTLY, THE WEEK-LONG SUMMIT HELPED THE	STUDENTS TRAN	SLATE
LARGE-SCALE GOALS INTO ACHIEVABLE ACTIONS. I	N FY19, AWF HO	STED SEVERAL
SUCH TRAINING AND MOBILIZATION EVENTS FOR YO	UNG AFRICANS A	ND YOUNG
PEOPLE FROM AROUND THE WORLD, SEEKING TO EMP	OWER THE NEXT	GENERATION OF
CONSERVATION LEADERS.		
B. AWF'S CLASSROOM AFRICA PROGRAM REDESIGNS	AND RENOVATES	LOCAL PRIMARY
SCHOOLS WHILE INCENTIVIZING CONCRETE CONSERV.	ATION ACTIONS	WITHIN THE
SCHOOLS' COMMUNITIES. THROUGH PARTICIPATION	IN ECO-CLUBS,	CLASSROOM
AFRICAN STUDENTS LEARN ABOUT CONSERVATION AN	D WHY IT IS ES	SENTIAL TO
PROTECT WILDLIFE AND WILDLIFE HABITAT. IN TH	E SEKUTE COMMU	NITY IN
ZAMBIA, THE LUPANI COMMUNITY SCHOOL WAS BUIL	T AS AN INCENT	IVE TO
PROTECT ALMOST 50,000 ACRES OF CRITICAL ELEP	HANT HABITAT.	SCHOOL
ENROLLMENT TRIPLED, AND LUPANI HAS BECOME ON	E OF THE REGIO	N'S TOP
PERFORMERS. THE COMMUNITY IS ENTHUSIASTIC AB	OUT THE SCHOOL	, AND IN 2019
THE SEVENTH-GRADE CLASS HAD A 99 PERCENT PAS	S RATE ON NATI	ONAL EXAMS.
IN TANZANIA, MANYARA PRIMARY SCHOOL IS THE O	NLY CLASSROOM	AFRICAN
BOARDING SCHOOL, SERVING ABOUT 900 STUDENTS.	FORMERLY LOCA	TED ON
45,000-ACRE MANYARA RANCH, THE SCHOOL WAS DI	LAPIDATED, HAV	ING SEEN NO
PHYSICAL MAINTENANCE OR REPAIR IN OVER 20 YE	ARS. ITS BUILD	INGS LACKED
ELECTRICITY AND A PROPER WATER DISTRIBUTION	SYSTEM. IT WAS	OVERCROWDED,
AT ALMOST DOUBLE CAPACITY. ADDITIONALLY, THE	SCHOOL ITSELF	WAS IN AN
IMPORTANT WILDLIFE CORRIDOR, WHICH MEANT THA	T STUDENTS SHA	RED THEIR
SCHOOLYARD WITH ELEPHANTS AND OTHER WILDLIFE	, WHICH DISRUP	TED CLASSES
AND ENDANGERED STUDENTS. IN 2018, THE MANYAR	A PRIMARY SCHO	OL, NOW AWAY
FROM THE WILDLIFE CORRIDOR, SAW THE COMPLETI	ON OF THE FIRS	T PHASE OF
832212 10-10-18 61	Scheo	lule O (Form 990 or 990-EZ) (2018)
30214 150872 AWF 2018.05040	) AFRICAN WILDI	IFE FOUNDATI AWF

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization AFRICAN WILDLIFE FOUNDATION, INC.	Employer identification number 52-0781390
ITS RENOVATION, CUTTING THE RIBBON ON BEAUTIFUL NEW DORMIT	·
MANYARA STUDENT PERFORMANCE REMAINS EXEMPLARY, WITH A RECE	NT
100-PERCENT PASS RATE ON 7TH-GRADE EXAMS AND A RANK OF SEC	OND
DISTRICT-WIDE.	
C. DESPITE CHINA'S LANDMARK IVORY BAN, DEMAND FOR IVORY PR	ODUCTS STILL
DRIVES POACHING. RECOGNIZING THE INFLUENCE OF CONSUMER CHO	ICES IN

CHINA, AWF ENGAGES WITH STRATEGIC PARTNERS ON THE MAINLAND TO PROMOTE

CONSERVATION AND ENDANGERED-SPECIES AWARENESS. IN SEPTEMBER 2018, AWF

LAUNCHED A TWO-MONTH EXHIBIT AT THE BEIJING ZOO, ONE OF CHINA'S LARGEST

ZOOS, RECEIVING MORE THAN 8 MILLION VISITORS PER YEAR. THE "SAVING

AFRICA'S ENDANGERED SPECIES" EXHIBITION FEATURED ENGAGING PROFILES OF

SOME OF AFRICA'S MOST ICONIC WILDLIFE, COMPLETE WITH UNFORGETTABLE

IMAGES. AND IT DETAILED AWF'S EFFORTS TO PROMOTE AFRICAN-LED

CONSERVATION, PROTECT WILDLIFE, AND BENEFIT LOCAL COMMUNITIES. AWF TOOK

THE SAME EXHIBIT TO THE SHANGHAI ZOO IN 2019. ANOTHER RECENT AWARENESS

EFFORT INVOLVED ONE OF THE MOST GLOBALLY RECOGNIZED AND WIDELY

DISTRIBUTED MULTIMEDIA ENTERTAINMENT BRANDS FOR KIDS AND FAMILY --

NICKELODEON INTERNATIONAL. AWF PARTNERED WITH NICKELODEON'S 'TOGETHER

FOR GOOD' PROGRAM TO INSPIRE KIDS WHILE RAISING AWARENESS ABOUT

ENDANGERED AFRICAN WILDLIFE. NICKELODEON ACTRESS BREANNA YDE HOSTED

BEHIND-THE-SCENES SEGMENTS FEATURING CONSERVATION HEROES, INCLUDING

IVORY-DETECTING CANINES, PARK RANGERS, FARMERS WHO LIVE NEAR WILDLIFE,

AND TEACHERS. THE TOGETHER FOR GOOD WILDLIFE SPECIAL AIRED ACROSS

NICKELODEON'S INTERNATIONAL NETWORK OF CHANNELS, REACHING A VIEWERSHIP

MARK OF 3.3 MILLION. THE CAMPAIGN CULMINATED WITH A CELEBRATION AT THE

UNITED NATIONS GENERAL ASSEMBLY IN NEW YORK IN SEPTEMBER.

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Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization	Employer identification number
AFRICAN WILDLIFE FOUNDATION, INC.	52-0781390

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

CONGO, DEM REP, ETHIOPIA, KENYA, SOUTH AFRICA,

TANZANIA, UGANDA, UNITED KINGDOM, ZAMBIA,

MAURITIUS, CANADA, RWANDA, CAMEROON

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

DATA AND INFORMATION FOR THE FEDERAL FORM 990 ARE COMPILED BY THE FINANCE DEPARTMENT AND REVIEWED BY THE DIRECTOR OF FINANCE. UPON RECEIPT OF THE DRAFT VERSION OF THE FEDERAL FORM 990 FROM AWF'S TAX ACCOUNTANTS, THE COMPLETED RETURN UNDERGOES A SECOND LEVEL OF REVIEW BY THE CFO. CHANGES ARE COMMUNICATED TO THE TAX ACCOUNTANTS AS NECESSARY AND APPROPRIATE. AFTER A SUBSEQUENT REVIEW BY THE CFO, THE FINAL DRAFT IS REVIEWED BY THE AUDIT COMMITTEE. THEREAFTER, A COPY OF THE FINAL DRAFT 990 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 COO AND OTHER MEMBERS OF EXECUTIVE MANAGEMENT 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018) 63

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Name of the organization

#### AFRICAN WILDLIFE FOUNDATION, INC.

Employer identification number 52 - 0781390

AS NECESSARY.

WITH REGARD TO CONTRACT REVIEW, THE 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 CEO/COO FOR REVIEW.

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

A SALARY REVIEW FOR OFFICERS AND KEY EMPLOYEES IS PERFORMED ANNUALLY BY THE HUMAN RESOURCES DEPARTMENT. FORMALIZED SALARY SURVEYS BY AN OUTSIDE FIRM ARE CONDUCTED EVERY 3-5 YEARS FOR OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES. FOR ALL OFFICERS AND KEY STAFF LOCATED WITHIN THE UNITED STATES, INFORMATION FROM COMPARABLE ORGANIZATIONS IS COLLECTED THROUGH PUBLICLY AVAILABLE FEDERAL FORM 990S. 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 CHIEF EXECUTIVE OFFICER (CEO), AND PROVIDES GUIDELINES FOR THE CEO TO SET OTHER EXECUTIVE SALARIES.

VARIOUS SALARY SURVEY TOOLS AND BENCHMARK STUDIES ARE EMPLOYED WHEN

# DETERMINING COMPENSATION FOR NEW HIRES AND FOR PROMOTIONS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

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Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990 EZ) (2018) Name of the organization	Employer identification num
AFRICAN WILDLIFE FOUNDATION, INC.	52-0781390
AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY,	NC, OR, PA, RI, SC, TN
JT,VA,WV,WI	
FORM 990, PART VI, SECTION C, LINE 19:	
AWF GOVERNING DOCUMENTS, POLICIES, FINANCIAL STATEMENTS,	AND FEDERAL FORM
990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST. ADDITIONALI	Y, COPIES OF THE
FEDERAL FORM 990 AND ANNUAL REPORTS ARE MAINTAINED ON THE	E WEBSITE.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	1,526,496
MANAGEMENT AND GENERAL EXPENSES	22,714
FUNDRAISING EXPENSES	44,697
TOTAL EXPENSES	1,593,907
CONSTRUCTION CONTRACTOR:	
PROGRAM SERVICE EXPENSES	1,494,926
MANAGEMENT AND GENERAL EXPENSES	0
FUNDRAISING EXPENSES	0
TOTAL EXPENSES	1,494,926
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	3,088,833

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<b>/</b>		

# (Form 990)

# Related Organizations and Unrelated Partnerships

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

Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 52 - 0781390

Department of the Treasury Internal Revenue Service

# AFRICAN WILDLIFE FOUNDATION, INC.

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

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

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity	contr	<b>(g)</b> 1512(b)(13) htrolled ntity?	
				501(c)(3))		Yes	No	

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

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

		,									
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	l or <sup>ing</sup> ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	10
	1										
	-										
										+	
	-										
	-										
	-										
	1										
	1										

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	Sec 512(l contr ent	
		country)						Yes	No
UMILIKI LIMITED	PROVISION OF CAPITAL		AFRICAN						
C/O AXIS FIDUCIARY, 18N FRERE FELIX DE VALOIS	FOR CONSERVATION		WILDLIFE						
PORT LOUIS, PORT LOUIS, MAURITIUS	ENTERPRISES	MAURITIUS	FOUNDATION	C CORP	339,321.	٥.	100%	X	
AWC CB1 LIMITED	PROVISION OF CAPITAL								
C/O AXIS FIDUCIARY, 18N FRERE FELIX DE VALOIS	FOR CONSERVATION								
PORT LOUIS, PORT LOUIS, MAURITIUS	ENTERPRISES	MAURITIUS	UMLIKI LIMITED	C CORP	159,700.	1,350,329.	100%	X	
AWC CB2 LIMITED	PROVISION OF CAPITAL								
C/O AXIS FIDUCIARY, 18N FRERE FELIX DE VALOIS	FOR CONSERVATION								
PORT LOUIS, PORT LOUIS, MAURITIUS	ENTERPRISES	MAURITIUS	UMLIKI LIMITED	C CORP	328,434.	4,050,063.	100%	X	
	-								

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# Schedule R (Form 990) 2018 AFRICAN WILDLIFE FOUNDATION, INC.

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

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X	
<b>b</b> Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)		X	
e Loans or loan guarantees by related organization(s)		X	T
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)			
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	1i		
j Lease of facilities, equipment, or other assets to related organization(s)			_
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
o Sharing of paid employees with related organization(s)			_
p Reimbursement paid to related organization(s) for expenses	<u>1p</u>		
<b>q</b> Reimbursement paid by related organization(s) for expenses			+
r Other transfer of cash or property to related organization(s)	<u>1r</u>		
s Other transfer of cash or property from related organization(s)	1s		

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>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) UMLIKI LIMITED	A	339,321.	FMV
(2) AWC CB1 LIMITED	A	159,700.	FMV
(3) AWC CB2 LIMITED	A	328,434.	FMV
(4) AWC CB1 LIMITED	D	929,913.	FMV
(5) AWC CB2 LIMITED	D	3,424,104.	FMV
(6) AWC CB1 LIMITED	E	2,521,500.	FMV

# Schedule R (Form 990)

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

(a) Name of other organization	<b>(b)</b> Transaction type (a-r)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amount involved
(7) AWC CB2 LIMITED	Е	3,896,000.	FMV
(8)			
(9)			
_ (10)			
_ (11)			
_ (12)			
_ (13)			
_ (14)			
_ (15)			
_ (16)			
_ (17)			
_ (18)			
_ (19)			
_ (20)			
_ (21)			
(22)			
(23)			
(24)			

# Schedule R (Form 990) 2018 AFRICAN WILDLIFE FOUNDATION, INC.

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

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

(-)	(1-)		(-1)			(0)	(.)			(*)	12	(1)
(a)	(b)	(c)	(d)	(e) Are al	dl I	(f)	(g)		h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c)( orgs.	sec. (3)	Share of	Share of	UISPI tio	ropor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General o managin	Percentage
of entity		(state or foreign	excluded from tax under	orgs.		total	end-of-year		tions?	of Schedule K-1	partner?	ownersnip
		country)	sections 512-514)	Yes N	No	income	assets	Yes	No	(Form 1065)	Yes No	
	-											
					_							
					-							+
												1

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