TAX RETURN FILING INSTRUCTIONS

PUBLIC INSPECTION COPY

Prepared by	Grant Thornton LLP 1000 Wilson Boulevard, Suite 1400 Arlington, VA 22209
Special Instructions	Returns should be signed and dated by the appropriate officer(s). Exempt organizations are required to provide copies of their most recent Forms 990, and their Application for Recognition of Exemption (Form 1023 or 1024) for public inspection upon request. Charities must also make available Forms 990-T filed after August 17, 2006. Schedules, attachments, and supporting documents filed with Form 990-T that do not relate to the imposition of unrelated business income tax are not required to be made available for public inspection and copying (e.g. Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations and Form 8886, Reportable Transaction Disclosure Statement). Forms 990 and 990-T must be made available for the three-year period beginning on the last day prescribed for filing such return (determined with regard to any extension of time for filing). The names of any contributors should not be disclosed, so we have deleted them.
Application for Recognition of Exemption	The copy of the Application for Recognition of Exemption must include any papers submitted in support of such application and any letter or other document issued by the Internal Revenue Service with respect to such application. An organization that submitted its Form 1023 or 1024 on or before July 15, 1987 must make this form available for public inspection only if they had a copy of the Application on July 15, 1987.
Requests made in person	In the request is made in person, the organization must respond by the end of the business day.
Requests made in writing	If the request is made in writing, the organization must respond within 30 days.
Fees charged for copies	The organization can make a reasonable charge for copying and posting. The regulations limit the copying charge to that charged by the IRS for providing copies, currently \$0.20 for each page.
What if we post Form 990 on our website?	The requirement to provide copies can be eliminated if the organization posts the relevant documents on its website. The public must be able to download the documents and print them in the exact form they were filed with the IRS (except for disclosing contributors). The download must be free and use software that is available without charge. Even if the documents are posted on the web, the organization must still have a copy available for inspection at its offices.
What if we fail to comply with requests?	The IRS may impose significant monetary penalties on an organization that does not adhere to the disclosure requirements.

Electronic Filing Page 1 of 1

Cumulative e-File History 2015									
Federal									
Locator:	90340H								
Taxpayer Name:	World Resources Institute								
Return Type:	990, 990 & 990T (Corp)								
Submitted Date:	02/15/2017 15:52:20								
Acknowledgement Date:	02/15/2017 16:27:00								
Status:	Accepted								
Submission ID:	54681420170465000004								

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization For calendar year 2015, or fiscal year beginning 10/01 , 2015, and ending 09/30

Department of the Treasury	▶ Do not send to the IRS. Keep for your records.		
Internal Revenue Service	► Information about Form 8879-EO and its instructions is at www.irs.gov	/form8879eo.	
Name of exempt organization	1	Employer iden	tification number
WORLD RESOUR	CES INSTITUTE	52-125	7057
Name and title of officer	020 2210 22 2 0 2 2		
CALLL BYDKED	, CFO, VP ADMIN		,
Part Type of R	eturn and Return Information (Whole Dollars Only)		
	return for which you are using this Form 8879-EO and enter the applicable	lo amount if any fr	om the return If you
check the box on line leave line 1b, 2b, 3b, the applicable line below.	1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return be 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you enter bow. Do not complete more than 1 line in Part I.	eing filed with this f ered -0- on the retu	orm was blank, then rn, then enter -0- on
1a Form 990 check l 2a Form 990-EZ chec			
3a Form 1120-POL c	heck here b Total tax (Form 1120-POL, line 22)	3b _	
4a Form 990-PF che	ck here ▶ b Tax based on investment income (Form 990-PF, Pa		
5a Form 8868 check			
oa i omi oooo oncok	A TIOLO PER CONTROL DE CARROLLE DE CARROLL		
Part II Declarati	ion and Signature Authorization of Officer		
	rjury, I declare that I am an officer of the above organization and that I have	o overnined a convio	f tho
are true, correct, and organization's electror to send the organizatio the transmission, (b) the authorize the U.S. Tre financial institution accreturn, and the financi Agent at 1-888-353-45 involved in the process resolve issues related	ectronic return and accompanying schedules and statements and to the becomplete. I further declare that the amount in Part I above is the amount shic return. I consent to allow my intermediate service provider, transmitter, on's return to the IRS and to receive from the IRS (a) an acknowledgement he reason for any delay in processing the return or refund, and (c) the date easury and its designated Financial Agent to initiate an electronic funds with a count indicated in the tax preparation software for payment of the organizal institution to debit the entry to this account. To revoke a payment, I must say no later than 2 business days prior to the payment (settlement) date. I sing of the electronic payment of taxes to receive confidential information to the payment. I have selected a personal identification number (PIN) as if applicable, the organization's consent to electronic funds withdrawal.	shown on the copy of or electronic return of receipt or reasor of any refund. If app hdrawal (direct debi ation's federal taxes of contact the U.S. Ti I also authorize the necessary to answe	the originator (ERO) in for rejection of olicable, I to entry to the owed on this reasury Financial financial institutions or inquiries and
Officer's PIN: check of	one box only		1
X I authorize G	RANT THORNTON LLP to enter my PIN ERO firm name	1 4 2 4 1 Enter five numbers, b	as my signature
being filed wit ERO to enter	zation's tax year 2015 electronically filed return. If I have indicated within the hastate agency(ies) regulating charities as part of the IRS Fed/State promy PIN on the return's disclosure consent screen. of the organization, I will enter my PIN as my signature on the organization	gram, I also authoriz	e the aforementioned
If I have indicate	ated within this return that a copy of the return is being filed with a state ago State program, I will enter my PIN on the return's disclosure consent screen.	gency(ies) regulating	g charities as part of
Officer's signature	Date	× 2/15/1	7
	tion and Authentication	- / /	
	er your six-digit electronic filing identification		
	ed by your five-digit self-selected PIN.	5 4 6 8 1 4 do not enter	3 6 6 0 5
indicated above. I con	e numeric entry is my PIN, which is my signature on the 2015 electronically after that I am submitting this return in accordance with the requirements of ized IRS e-file Providers for Business Returns. Aug Jour	r filed return for the f Pub. 4163, Moder	organization rnized e-File (MeF)
7	ERO Must Retain This Form - See Instructions		
	Do Not Submit This Form To the IRS Unless Requested T	To Do So	
For Paperwork Redu	ction Act Notice, see back of form.		Form 8879-EO (2015)
	entre control of the state of t		\-'-'/

JSA 5E1676 1.000

Return of Organization Exempt From Income Tax

Form **990**

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

Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

<u>A</u>	For ti	he 201	5 calendar year, or tax year beginning 10/01, 2015, a	and ending		09/30	, 20 ₁₆					
В	Check if a		C Name of organization		D Employer id	entification	number					
_	_		WORLD RESOURCES INSTITUTE									
	Addi		Doing Business As	****	52-125	7057						
	Nam	e change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone n	umber						
	Initia	l return	10 G STREET, NE		(202) 72	9-7600						
	Tern	ninated	City or town, state or province, country, and ZIP or foreign postal code									
	Ame		WASHINGTON, DC 20002		G Gross receip	ots \$ 10	08,780,143.					
	Appl pend	ication ling	F Name and address of principal officer: ANDREW STEER		H(a) Is this a gro	up return for	Yes X No					
			10 G STREET, NE WASHINGTON, DC 20002		subordinates H(b) Are all subord		Yes No					
ī	Tax-ex	xempt st	atus: X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) or	527		ا ch a list. (see ir						
J	Webs	ite: 🕨	WWW.WRI.ORG		H(c) Group exem	ption number	•					
K	Form	of organ	ization: X Corporation Trust Association Other	L Year of fo	ormation: 1982 M	State of lega	al domicile: DE					
P	art I	Sur	mmary	329								
	1	Briefly	describe the organization's mission or most significant activities: WRI FOC	CUSES ON	THE INTERSE	CTION (OF THE					
e	I		IRONMENT AND SOCIO-ECONOMIC DEVELOPMENT. WE WOR									
Jan			INESS, AND CIVIL SOCIETY TO BUILD SOLUTIONS- GO									
Veri	2		this box if the organization discontinued its operations or disposed									
Governance	3	Numb	er of voting members of the governing body (Part VI, line 1a)			3	32.					
රේ	4	Numb	er of independent voting members of the governing body (Part VI, line 1b)			4	31.					
ties	5	Total r	number of individuals employed in calendar year 2015 (Part V, line 2a)			5	426.					
Activities &	6	Total r	number of volunteers (estimate if necessary)			6	31.					
Ac	7a	Total u	unrelated business revenue from Part VIII, column (C), line 12			7a	-513.					
	b	Net ur	nrelated business taxable income from Form 990-T, line 34			7b	-513.					
				····	Prior Year	-	Current Year					
a)	8	Contri	butions and grants (Part VIII, line 1h)		72,738,60		97,506,285.					
nue	9	Progra	am service revenue (Part VIII, line 2g). Ment income (Part VIII, column (A) lines 3, 4, and 7d) PUBLIC INS	FOR	127130700	0.	0					
Revenue	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)	PECTION	504,65		2,711,734.					
œ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-554,89		-878,947.					
	12	Total r	evenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		72,688,35		99,339,072.					
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		12,000,55		24,053,673.					
	14	Benefi	ts paid to or for members (Part IX, column (A), line 4)			0.	21,033,073.					
s	4 =	Salarie	es, other compensation, employee benefits (Part IX, column (A), lines 5-10)		30,366,86		33,534,315.					
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)	• • • • •	30,300,00	0.	0.					
dbei	b	Total f	undraising expenses (Part IX, column (D), line 25) ▶ 2,082,174.	• • • • •		0.						
ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		47,173,03	3	32,235,856.					
	18	Total e	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	77,539,89		89,823,844.					
	19	Reven	ue less expenses. Subtract line 18 from line 12	• • • • • •	-4,851,54	-	9,515,228.					
or	20 21 22	1101011	as less expenses. Subtract into 10 from line 12		Beginning of Current Y		End of Year					
ets	20	Total a	assets (Part X, line 16)	F	97,500,99		08,201,902.					
Ass Ba	21		abilities (Part X, line 26)	· · · · ·	16,487,49		17,455,768.					
Net	22		sets or fund balances. Subtract line 21 from line 20	• • • • -	81,013,50		90,746,134.					
Pa	rt II		nature Block	• • • • • •	01,013,30		20,740,134.					
Un	der ner	nalties of	perjury, I declare that I have examined this return, including accompanying schedules	s and statemer	nts, and to the best of	my knowled	dge and helief it is					
true	e, corre	ct, and o	complete. Declaration of preparer (other than officer) is based on all information of which	preparer has a	ny knowledge.		age and belief, it is					
			the for		02/1	5/2017						
Sig		3	Signature of officer		Date	3/2017						
He	re		STEVEN BARKER VP, CFO	& COO								
		1 -	Type or print name and title	w coo								
			ype preparer's name Preparer's signature	Date	Chart	; PTIN						
Paid		MARY	11 04 7/0	02/15/	Check 2.017 self-employe	11	2/7051					
	parer	Firm's		104/13/	2027	36-6055	347851					
Use	Only		address > 1000 WILSON BLVD, SUITE 1400 ARLINGTON, VA 22209			703-847						
May	the IF	RS disc	suss this return with the preparer shown above? (see instructions)		Phone no.							
			Reduction Act Notice, see the separate instructions.	· · · · · ·	· · · · · · · · · · · · · · · · · · ·		Yes No Form 990 (2015)					
			and the second s			,	rom 330 (2015)					

Form 990 (2015) Page 2

1	Briefly describe the organization's mission:	
	SEE SCHEDULE O.	
	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.	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as mean expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	
	(Code:) (Expenses \$	_)
	(Code:) (Expenses \$28,713,853. including grants of \$9,228,867.) (Revenue \$FOOD, FOREST AND WATER PROGRAM - SEE SCHEDULE O.	_)
	(Code:) (Expenses \$	_)

Form 990 (2015) Page **3**

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A, Schedule B, Schedule of Contributors (see instructions)?	Part	Checklist of Required Schedules			
complete Schedule A. 2 Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Nes." complete Schedule A. Part I. 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Nes." complete Schedule C. Part I. 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 O. Part II. 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 89-19? If "Yes." complete Schedule C. Part III. 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 II. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D. Part II. 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D. Part IV. 9 Did the organization assets are to any of the following questions is "Yes," complete Schedule D. Part VI. 10 Did the organization services? If "Yes," complete Schedule D. Part VI. 11 If the organization services? If "Yes," complete Schedule D. Part VII. 12 Did the organization service of a mount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. Part VII. 13 Did the organization separate in dependent audited financial statements for the tax year "Yes," complete Schedule D. Part VIII. 14 Did the organization as a				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?. 2 X 3 Did the organization required to complete Schedule C, Part I. 3 X Section 501(c)(3) organization repose in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Nes." complete Schedule C, Part II. 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 delined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III. 5 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 II. 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. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quesi-endowments? If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for investments-other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI. 11 Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI. 12 Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of the total assets reported in Part X,	1				
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offices in If Vess, "complete Schedule C, Part I." 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 "Pes." complete Schedule C, Part II. 5 Is the organization as soil of 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Pes," complete Schedule C, Part III. 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Pes," complete Schedule D, Part I. 7 Yes," complete Schedule D, Part I. 8 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Pes," complete Schedule D, Part II. 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 10 Did the organization's answer to any of the following questions is "Yes," complete Schedule D, Part V. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10			1		
candidates for public office? If "Yes," complete Schedule C, Part I. Section 501(c)(3) organizations. Did the organization regards and the section of the complete Schedule C, Part II. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6)	2	·	2	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 "xes," complete Schedule C, Part III. 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. 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I. 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 III. 8 Did the organization report an amount in Part X, line 21, for escrow or oustodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repart, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 10 Did the organization is listed in Part X, or provide credit counseling, debt management, credit repart, or debt negotiation services? If "Yes," complete Schedule D, Part V. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 19 Have, organization report an amount for investments-other securities in Part X, line 10? If "Yes," organization report an amount for investments-order securities in Part X, line 19 Have is self-due D, Part X. 11 Did the organization report an amount for other assets in Part X, line 19 Have is complete Schedule D, Part X. 12 Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X. 13 Did the organization betain separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X. 14 Did the orga	3				
election in effect during the tax year? If "Yes," complete Schedule C, Part II. Is the organization a section 501(c)(4), 501(c)(6) or			3		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. 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 II. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 8 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. line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X. or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V, VII, VIII, IV, X is a spiplicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. c Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. d Did the organization report an amount for other assets in Part X, line 10 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. d Did the organization have aggregate revenues or expenses of more tha	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III. 5			4	X	
Part III. 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. Did the organization report an amount of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for lollowing questions is "Yes," then complete Schedule D, Part VI. Did the organization report an amount for investments-other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for investments-other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of the organization report an amount for other liabilities in Part X, line 16? If "Yes," complete Schedule D, Part XII. Did the organization is separate or consolidated inancial statements for the tax year? If "yes," complete Schedule D, Part XII. Did the organization have a	5	- · · · · · · · · · · · · · · · · · · ·			
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. 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. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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, in provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes, "orpolete Schedule D, Part IV. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 If the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 13 Did the organization report an amount for investments-program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 14 Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 15 Did the organization separate, independent audited financial statements for the tax year? II "Yes," complete Schedule D, Part X X and XII. 16 Did the organization obtain separate, independent audited financial statements for the tax year? III X X Did the organization have aggregate revenues or ex		assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
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,			5		X
"Yes," complete Schedule D, Part I. 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. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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, complete Schedule D, Part IV. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V, VII, VIII, X, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments-program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization is permanent of the properties Schedule D, Part VII. Did the organization is separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, line 15 that is 5% or more of its total assets report	6	, ,			
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VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			10	X	
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c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	b	· ·			
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			11b	X	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	С				37
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization slubility for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		·	11c		X
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Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	T	·	445	v	
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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	40-	• • • • • • • • • • • • • • • • • • • •	1111	^	
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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	ıza		420		v
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	h		12a		- 21
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	b		12h	x	
Did the organization maintain an office, employees, or agents outside of the United States?	13			21	x
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		= 11111111		х	
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			144		
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	-				
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			14b	x	
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	- · · · · · · · · · · · · · · · · · · ·			
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	. •		15	х	
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16				
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	•		16		Х
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	- · · · · · · · · · · · · · · · · · · ·			
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			17		Х
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18				
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-		18		Х
	19				
			19		X

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Part l	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		X
b	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
22	$ \hbox{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
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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	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	0.4		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		Х
h	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		Λ
b	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	200		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
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 instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	24		v
22	Part I	31		X
32	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		21
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
• .	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
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		Х
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		Х
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	X	

Form 990 (2015)
Part V Statements Regarding Other IPS Fillings and Tax Compliance

Par				
	Check if Schedule O contains a response or note to any line in this Part V			_ X
_			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-20 included in line 1a. Enter-0-1 not applicable.			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c	X	
٥-	reportable gaming (gambling) winnings to prize winners?	16	Λ	
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 426			
h	Statements, filed for the calendar year ending with or within the year covered by this return . $2a$ 426 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 2	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
Tu	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: ► <u>ATTACHMENT 1</u>			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		3.5
_	required to file Form 8282?	7с		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	7.		v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	/ 11		
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
0	sponsoring organization have excess business holdings at any time during the year?			
	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	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.)			
	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		
	Note. 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			
	Enter the amount of reserves on hand	4.6		7.7
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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52-1257057 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year <u>1a</u> 32	2					
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 31	_					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
-	any other officer, director, trustee, or key employee?	2		Х			
3	Did the organization delegate control over management duties customarily performed by or under the direct						
Ū	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х			
6	Did the organization have members or stockholders?	6		Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint						
'a		7a		X			
b	one or more members of the governing body?						
D	stockholders, or persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
0							
_	the year by the following:	8a	Х				
a	The governing body?	8b	X				
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at						
Э	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	_	,)				
	on bit one content biroqueete intermation about penereo hetroquired by the internal revenue	- Cou	Yes	No			
100	Did the ergenization have level chanters branches or effiliates?	10a	Х				
	Did the organization have local chapters, branches, or affiliates?	100					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	Х				
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	X				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	124					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b	Х				
	rise to conflicts?	120	21				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	Х				
40	describe in Schedule O how this was done	13	X				
13	Did the organization have a written whistleblower policy?	14	X	 			
14	Did the organization have a written document retention and destruction policy?	14	21				
15	Did the process for determining compensation of the following persons include a review and approval by						
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	Х				
a	The organization's CEO, Executive Director, or top management official	15a	-25	Х			
b	Other officers or key employees of the organization	130		21			
40-	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	16a		Х			
	with a taxable entity during the year?	Toa		21			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Secti	on C. Disclosure	100		<u> </u>			
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 2	5041	-) (6)				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)			
	X Own website Another's website X Upon request Other (explain in Schedule O)						
4.0							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	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 record	s: >					

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

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

- 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.

L	_ Check this box if neither the organization nor	any related	organization compensate	ed any current office	er, director, or trus	stee.

(A) Name and Title	(B) Average	,		Pos neck		e than c		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any					is both or/trust		compensation from	compensation from related	amount of other
	hours for related organizations below dotted line)	Individu: or direct	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)ANDREW STEER	40.00									
PRESIDENT & CEO	0.	Х		Х				402,799.	0.	25,667.
(2) JAMES A. HARMON	1.00									
CHAIRMAN	0.	X						0.	0.	0
_(3)HARRIET_BABBITT	1.00									
VICE CHAIR	0.	X						0.	0.	0
_(4)WILLIAM D. RUCKELSHAUS	1.00									
CHAIRMAN EMERITUS	0.	X						0.	0.	0
(5)DRALICE_FEMERSON VICE CHAIR EMERITUS	1.00	Х						0.	0.	0
(6)DR. DINO PATTI DJALAL	1.00									
DIRECTOR	0.	Х						0.	0.	0
(7)FRANCES G. BEINECKE	1.00									
DIRECTOR	0.	Х						0.	0.	0
(8)ROBIN CHASE	1.00								0	0
DIRECTOR	0.	X						0.	0.	0
_(9)TIFFANY CLAY	1.00	Х						_	0.	0
DIRECTOR	1.00	Λ						0.	0.	0
(10)DANIEL L. DOCTOROFF DIRECTOR		Х						0.	0.	0
(11)JAMSHYD N. GODREJ	1.00							0.	0.	0
DIRECTOR		Х						0.	0.	0
(12) PRESTON R. MILLER, JR.	1.00	21						0.	· ·	
DIRECTOR		Х						0.	0.	0
(13)JONATHAN LASH	1.00									
DIRECTOR	0.	Х						0.	0.	0
(14)JAMIE LERNER	1.00									
DIRECTOR	0.	Х						0.	0.	0
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Form 990 (2015) Page **8**

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title		age Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	am	(F) stimated nount of other pensation	f
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org: and	om the anizatio d related anization	b
15)	MICHAEL POLSKY	1.00											
	DIRECTOR	0.	X						0.	0.			0.
16)	DR. SUSAN TIERNEY	1.00											
	VICE CHAIR	0.	X						0.	0.			0.
17)	STEPHEN M. ROSS	1.00											
	DIRECTOR	0.	X						0.	0.			0.
18)	JAMES GUSTAVE SPETH	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
19)	D. JAMES UMPLEBY	1.00											
	VICE CHAIR	0.	Х						0.	0.			0.
20)	FELIPE CALDERON	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
21)	DANIEL CRUISE	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
22)	CLINTON A. VINCE	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
23)	ROGER W. SANT	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
24)	DANIEL WEISS	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
25)	BILL RICHARDSON	1.00											
	DIRECTOR	0.	Х						0.	0.			0.
1b	Sub-total	I.						_	402,799.	0.		25,6	67.
	Total from continuation sheets to Part VII, S	ection A		• •	• •	• •		•	3,456,462.	0.		11,1	
	Total (add lines 1b and 1c)							•	3,859,261.	0.		36,8	
	Total number of individuals (including but not							o re	·	\$100.000 of			
	reportable compensation from the organization						-,			,,			
												Yes	No
3	Did the organization list any former office	er directo	or or	tri	ıcta	Δ.	kev e	mn	Novee or highes	t compensated			
Ū	employee on line 1a? If "Yes," complete Schede										3		Х
4	For any individual listed on line 1a, is the organization and related organizations greater												
	individual										4	х	
5	Did any person listed on line 1a receive or										•		
5	for services rendered to the organization? If "Yo										5		Х

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 34

art VII Section A. Officers, Directors, 7 (A)	(B)	y ⊑ii	ipio	yee (C		and F	ngi	(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Posi neck ss pe	ition more rson irect	e than oo had been so or/trustore is or/trustore employee	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
) PAMELA FLAHERTY DIRECTOR	1.00	Х						0.	0.	
) CAIO KOCH-WESER DIRECTOR	1.00	Х						0.	0.	
) DAVID BLOOD DIRECTOR	1.00	Х						0.	0.	
) YOKA BRANDT DIRECTOR	1.00							0.	0.	
) CHRISTIANA FIGUERES	1.00	X								
DIRECTOR) JENNIFER SCULLY	1.00	X						0.	0.	
DIRECTOR) WANJIRA MATHAI	1.00	X						0.	0.	
DIRECTOR) GORAN PERSSON	1.00	X						0.	0.	
DIRECTOR, END 3/1/2016) ALLISON SANDER	1.00	X						0.	0.	
DIRECTOR, END 3/1/2016) RENEE JONES-BOS	1.00	Х						0.	0.	
DIRECTOR, END 3/1/2016) MANISH BAPNA	40.00	Х						0.	0.	
EXEC VP/MANAGING DIR • Sub-total	0.			Х			_	260,236.	0.	58,94
Total from continuation sheets to Part VII, d Total (add lines 1b and 1c) Total number of individuals (including but no reportable compensation from the organization)	Section A ot limited to t		liste				re	ceived more than	\$100,000 of	
Did the organization list any former of employee on line 1a? If "Yes," complete School	ficer, directo	or, or	tru							Yes N
For any individual listed on line 1a, is the organization and related organizations individual	greater than	\$15	0,0	00?	lf	"Yes	,"	complete Schedu	le J for such	4 X
Did any person listed on line 1a receive for services rendered to the organization? If										5

year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

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Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es,	and F	ligl	hest Compensat	ed Employees (c	ontinued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do n	ot al	Pos		than a	20	Reportable	Reportable	Estimated
	hours per week (list any	,				than o is both		compensation from	compensation from related	amount of other
	hours for					or/trust	_	the	organizations	compensation
	related	Indi or d	Insti	Officer	E ey	High emp	Forme	organization	(W-2/1099-MISC)	from the organization
	organizations below dotted	/idua	tutic	ĕ	emp	lest	ner	(W-2/1099-MISC)		and related
	line)	or tr	nal		Key employee	com				organizations
		Individual trustee or director	Institutional trustee		Ф	pens				
			ee			Highest compensated employee				
37) STEVEN BARKER	40.00									
CFO, VP FINANCE ADMINISTRATION	0.			Х				235,091.	0.	43,512.
38) ELIZABETH COOK	40.00									•
VP FOR INSTITUTIONAL	0.			Х				227,439.	0.	28,724.
39) JANET RANGANATHAN	40.00									
VP FOR SCIENCE	0.			Х				219,399.	0.	20,418.
40) JENNIFER MORGAN	40.00									
CLIMATE, ENERGY & POLLUTION	0.				Х			208,407.	0.	26,076.
41) ARTHUR DROE	40.00									
CONTROLLER	0.				Х			136,430.	0.	43,306.
42) HELEN MOUNTFORD	40.00									
DIR. ECONOMICS	0.				Х			193,989.	0.	28,446.
43) CRAIG HANSON	40.00									
DIR. FFW	0.				Х			189,356.	0.	40,688.
44) NEIL PRAKASH	40.00									
DIR. HUMAN RESOURCES	0.				Х			166,101.	0.	41,578.
45) NIGEL SIZER	40.00									
DIRECTOR, GLOBAL FOREST	0.				Х			181,939.	0.	43,687.
(46) LAWRENCE MACDONALD	40.00									
VP COMMUNICATIONS	0.				Х			256,509.	0.	40,763.
47) HOLGER DALKMANN	40.00									
DIRECTOR EMBARQ	0.				Х			172,800.	0.	36,359.
1b Sub-total										
c Total from continuation sheets to Part VII, S										
d Total (add lines 1b and 1c)							_		M 400,000 - f	
2 Total number of individuals (including but not reportable compensation from the organization		nose i 77		a ai	OOV	e) wnc	re	eceived more than	\$100,000 of	
reportable compensation from the organization		/ /								Yes No
C. Did the considering list and former office	Parata							Lancas and Edukasa		res no
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schede										3 X
										J
4 For any individual listed on line 1a, is the organization and related organizations great										
individual								•		4 X
manada										7 22

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated			
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual			
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

(A)	(B)			(C	:)			(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for related organizations	s per (do not check more box, unless person i s for officer and a director				re than one n is both an ctor/trustee)		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount o other compensati from the organizatio	stimated nount of other pensatio om the anizatior	on n
	below dotted line)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	7	,			d related anization	
8) PETER VEIT	40.00											
DIR. LAND & RRI	0.				Х			170,985.	0.		25,4	25
9) PANKAJ BHATIA	40.00											
DIR. GHG PROTOCOL	0.					Х		182,544.	0.		36,5	16
0) ELIZABETH OTTO	40.00											
DIR. WATER	0.					Х		149,369.	0.		24,0	32
1) CHRISTINA DECONCINI	40.00											
DIR. GOVERNMENT AFFAIRS	0.					X		166,649.	0.		15,8	1:
2) ATHENA BALLESTEROS	40.00											
DIR. FINANCE CENTER	0.					Х		156,103.	0.		40,2	7
3) MARK ROBINSON	40.00											
DIR. GOVERNANCE CENTER	0.					X		183,116.	0.		16,6	1
1b Sub-total c Total from continuation sheets to Part VII,	Section A						>					_
d Total (add lines 1b and 1c)							•					_
2 Total number of individuals (including but no reportable compensation from the organization)	t limited to t		isted				re	ceived more than	\$100,000 of			
											Yes	N
3 Did the organization list any former officemployee on line 1a? If "Yes," complete Scheen										3		Σ
For any individual listed on line 1a, is the organization and related organizations g individual	reater than	\$15	0,00	00?	lf	"Yes,	"	complete Schedu	le J for such	4	Х	
5 Did any person listed on line 1a receive o												
for services rendered to the organization? If " Section B. Independent Contractors										5		2
												_

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form 990 (2015	5) WORLD I	RESOURCES INSTI	TUTE		52-12570)5'/ Page
Part VIII	Statement of Revenue					
	Check if Schedule O contains a	response or note to ar	ny line in this Part	VIII		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512-514
s s la Fe	ederated campaigns	1a				

					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		775,000.				
s, C Am	С	Fundraising events	1 - 1					
Gift Ilar	d	Related organizations	1 1					
ıs,	e	Government grants (contribution	1 - 1	7,323,328.				
er S	f	All other contributions, gifts, grain	·					
äξ		and similar amounts not included ab		89,407,957.				
ont od (g	Noncash contributions included in lin	nes 1a-1f: \$					
	h	Total. Add lines 1a-1f	<u> </u>	<u></u> ▶	97,506,285.			
Program Service Revenue				Business Code				
e e	2a							
Š	b							
ς̈	С							
Sei	d							
am	е							
ogr	f	All other program service revenu	ле					
<u> </u>	g	Total. Add lines 2a-2f		<u></u>	0.			
	3	Investment income (include	ding dividen	ds, interest,				
		and other similar amounts)		▶	447,399.		-513.	447,912.
	4	Income from investment of tax-	-exempt bond	proceeds . >	0.			
	5	Royalties			14,297.			14,297.
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	_ d	Net rental income or (loss)			0.			
	7a		(i) Securities	(ii) Other				
		assets other than inventory	11,705,406.					
	b	Less: cost or other basis						
		and sales expenses	9,441,071.					
	C d	Gain or (loss)			0.064.225			0.064.335
	_	Net gain or (loss)			2,264,335.			2,264,335.
/enne	8a	Gross income from fundraisin	٠ ا					
		events (not including \$						
r Re		of contributions reported on line See Part IV, line 18						
Other	b	Less: direct expenses						
0	C	Net income or (loss) from fundr			0.			
	9a	Gross income from gaming ac	-					
	""	See Part IV, line 19						
	b	Less: direct expenses	b					
	С	Net income or (loss) from gam		<u></u> ▶	0.			
	10a	Gross sales of inventory,	less					
		returns and allowances	a					
	b c	Less: cost of goods sold Net income or (loss) from sales			0.			
		Miscellaneous Revenue		Business Code	ÿ.			
	11a	FOREIGN REALIZED LOSS		900099	-911,325.			-911,325.
	b	CREDIT CARD REBATES		900099	18,037.			18,037.
	C	MISCELLANEOUS REVENUE		900099	44.			44.
	d	All other revenue						
	e	Total. Add lines 11a-11d			-893,244.			
	12	Total revenue. See instructions.			99,339,072.		-513.	1,833,300.

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Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	0.			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	04 052 652	04 052 653		
	individuals. See Part IV, lines 15 and 16	24,053,673.	24,053,673.		
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	4,281,102.	2,786,009.	1,318,537.	176,556.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	0			
_	persons described in section 4958(c)(3)(B)	19,524,922.	17 746 407	010 061	859,454.
	Other salaries and wages	19,524,922.	17,746,407.	919,061.	039,434.
8	Pension plan accruals and contributions (include	1,684,675.	1,453,260.	158,178.	73,237.
_	section 401(k) and 403(b) employer contributions)	6,264,803.	5,371,265.	605,057.	288,481.
	Other employee benefits	1,778,813.	1,534,467.	167,017.	77,329.
10	Payroll taxes	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,551,107.	10,,01,.	,,,,,,,,,,
	Management	0.			
	Legal	94,845.		94,845.	
	Accounting	345,396.		345,396.	
	Lobbying	34,836.	34,836.		
	Professional fundraising services. See Part IV, line 17	0.			
1	f Investment management fees	191,206.		191,206.	
ç	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	135,156.		135,156.	
12	Advertising and promotion	0.			
13	Office expenses	208,218.	200,425.		7,793.
14	Information technology	0.			
15	Royalties	2,901,942.	2,456,999.	321,135.	123,808.
16	Occupancy	3,787,004.	3,429,260.	270,192.	87,552.
17	Travel	3,707,004.	3,423,200.	270,172.	07,332.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	1,667,588.	1,563,241.	79,764.	24,583.
20	Interest	0.			·
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	1,627,901.	1,566,977.		60,924.
23	Insurance	0.			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			10- 110	
_	RESEARCH EXPENSES	6,956,632.	6,807,406.	105,662.	43,564.
	OTHER DIRECT COST	2,127,914.	980,432.	1,063,591.	83,891.
	PUBLICATION EXPENSES	1,507,356.	1,435,780.	46,010.	25,566.
	EQUIPMENT RENTAL AND MAINT All other expenses ATCH 4	9,752,204.	864,063. 9,636,069.	294.	33,595.
		89,823,844.	81,920,569.	5,821,101.	2,082,174.
_	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		01,720,303.	3,021,101.	2,002,171.
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Part X **Balance Sheet**

Пе	ILA	Dalatice Stieet					
		Check if Schedule O contains a response of	r not	e to any line in this P	art X		
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,500.	1	2,500.
	2	Savings and temporary cash investments			8,296,247.	2	15,144,209.
	3	Pledges and grants receivable, net	44,594,398.	3	46,247,058.		
	4	Accounts receivable, net	0.	4	0.		
	5	Loans and other receivables from current and t	forme	er officers, directors,			
		trustees, key employees, and highest co	ompe	nsated employees.			
		Complete Part II of Schedule L			0.	5	0.
	6	Loans and other receivables from other disqualified personal					
		4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu	, and	contributing employers			
		organizations (see instructions). Complete Part II of Sche	intary edule L	employees beneficiary	0.	6	0.
Assets	7	Notes and loans receivable, net		`	0.	7	0.
SS	8	Inventories for sale or use			0.	8	0.
٩	9	Prepaid expenses and deferred charges			2,853,548.	9	1,443,417.
	10 a	Land, buildings, and equipment: cost or	Ī				
			10a	14,421,968.			
	b	Less: accumulated depreciation			3,898,925.	10c	8,637,170.
	11				15,963,521.	11	15,487,920.
	12	Investments - other securities. See Part IV, line 11			21,891,853.	12	21,239,628.
	13	Investments - program-related. See Part IV, line 11			0.	13	0.
	14	Intangible assets		F	0.	14	0.
	15	Other assets. See Part IV, line 11			0.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal			97,500,992.	16	108,201,902.
	17	Accounts payable and accrued expenses			9,109,235.	17	9,487,579.
	18	Grants payable			0.	18	0.
	19	Deferred revenue	1,202,739.	19	1,262,221.		
	20	Tax-exempt bond liabilities			0.	20	0.
	21	Escrow or custodial account liability. Complete Pa	74,157.	21	65,956.		
S	22	Loans and other payables to current and for					
Liabilities		trustees, key employees, highest compen	sated	employees, and			
abi		disqualified persons. Complete Part II of Schedule	L		0.	22	0.
	23	Secured mortgages and notes payable to unrelate	ed thir	d parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated	third p	parties	0.	24	0.
	25	Other liabilities (including federal income tax,	payab	oles to related third			
		parties, and other liabilities not included on lines	17-2	4). Complete Part X			
		of Schedule D			6,101,360.	25	6,640,012.
_	26	Total liabilities. Add lines 17 through 25			16,487,491.	26	17,455,768.
es		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	chec 34.	k here 🕨 🗓 and			
Fund Balances	27	Unrestricted net assets			3,579,888.	27	4,261,571.
3al	28	Temporarily restricted net assets			52,333,613.	28	61,384,563.
뒫	29	Permanently restricted net assets			25,100,000.	29	25,100,000.
or Fui		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.					
ts (30	Capital stock or trust principal, or current funds				30	
Se	31	Paid-in or capital surplus, or land, building, or equ	iipmei			31	
¥	32	Retained earnings, endowment, accumulated inco				32	
Net Assets	33				81,013,501.	33	90,746,134.
_	34	Total liabilities and net assets/fund balances			97,500,992.	34	108,201,902.
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	10 (2010)				· ~;	90
Part						
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		99,3		
2						
3	3 Revenue less expenses. Subtract line 2 from line 1					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		81,013,501.		
5	Net unrealized gains (losses) on investments	5		2	09,5	38.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			7,8	367.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		90,7	46,1	.34.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, e	xplair	า in			
	Schedule O.					
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		the		Х	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.					

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

WOI	RLD	RESOURCES INSTITUTE	Ε				52	-1257057	
Pa	rt I	Reason for Public Cha	rity Status (All o	organizations must o	omplete	e this pa	art.) See instructions		
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 11, ch	eck only	one box.)		
1		A church, convention of chu	urches, or associa	tion of churches descr	ribed in s	ection 1	70(b)(1)(A)(i).		
2		A school described in secti	nool described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)						
3		A hospital or a cooperative	operative hospital service organization described in section 170(b)(1)(A)(iii).						
4		A medical research organiz	zation operated in	conjunction with a hos	spital des	scribed in	n section 170(b)(1)(A)	(iii). Enter the	
		hospital's name, city, and st	tate:						
5		An organization operated t	for the benefit of	a college or universit	y owned	d or ope	erated by a governme	ental unit described in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local go	vernment or gove	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).		
7	Х	An organization that norma	ally receives a sub	ostantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public	
		described in section 170(b)	(1)(A)(vi). (Compl	ete Part II.)					
8	Щ	A community trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	Part II.)				
9		An organization that norma	ally receives: (1) m	nore than 331/3% of	its suppo	ort from	contributions, member	ership fees, and gross	
		receipts from activities rela	ated to its exemp	t functions - subject	to certa	in excep	tions, and (2) no mo	re than 331/3% of its	
		support from gross invest					•	tax) from businesses	
		acquired by the organizatio	n after June 30, 19	975. See section 509	(a)(2). (C	Complete	Part III.)		
10		An organization organized	•	•	-				
11		An organization organized	•	•	-				
		one or more publicly suppo							
		the box in lines 11a through	n 11d that describe	es the type of support	ing orga	nization	and complete lines 11e	e, 11f, and 11g.	
а			anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving	
		the supported organization	on(s) the power to	regularly appoint or e	elect a m	ajority o	f the directors or trus	tees of the supporting	
		_ organization. You must c e	omplete Part IV, S	ections A and B.					
b		☐ Type II. A supporting org	anization supervise	ed or controlled in co	nnection	with its	supported organization	on(s), by having	
		control or management of	of the supporting o	rganization vested in	the sam	e persor	ns that control or man	age the supported	
		_ organization(s). You must	=						
С								lly integrated with,	
		$_{ m extstyle extstyle$		-					
d		Type III non-functionally						= ::	
		that is not functionally inte	-	-	-		· ·	d an attentiveness	
		requirement (see instruct	•	-					
е		☐ Check this box if the orga						I, Type III	
	Г	functionally integrated, or		ionally integrated sup	porting c	organizat	tion.		
t ~		ter the number of supported							
9		ovide the following information		(iii) Type of organization	God to the		(v) Amount of monotony	(vi) Amount of	
	(1) 14	ame of supported organization	(II) EIN	(described on lines 1-9		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see	
				above (see instructions))	docur	ment?	instructions)	instructions)	
					Yes	No			
					1.00				
(A)									
(D)									
(B)									
(C)									
(D)									
(E)									
Tot:	al								

Page 2 Schedule A (Form 990 or 990-EZ) 2015

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	44,171,816.	49,834,180.	81,917,245.	72,738,600.	97,506,285.	346,168,126.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	44,171,816.	49,834,180.	81,917,245.	72,738,600.	97,506,285.	346,168,126.
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)						31,381,452.
6	Public support. Subtract line 5 from line 4.						314,786,674.
Sec	tion B. Total Support						311/100/011.
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	44,171,816.	49,834,180.	81,917,245.	72,738,600.	97,506,285.	346,168,126.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	428,524.	430,232.	433,515.	541,909.	462,209.	2,296,389.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	114,846.	25,308.	-180,115.	-611,394.	-893,244.	-1,544,599.
11	Total support. Add lines 7 through 10						346,919,916.
12	Gross receipts from related activities, etc. (s	ee instructions)				12	1,523,850.
13	First five years. If the Form 990 is for organization, check this box and stop here						
Sec	tion C. Computation of Public Supp	port Percenta	ge				
14	Public support percentage for 2015 (lin	ne 6, column (f)	divided by line	11, column (f))		14	90.74%
15	Public support percentage from 2014	Schedule A, Pa	rt II, line 14			15	89.83%
16a	33 1/3% support test - 2015. If the o this box and stop here. The organization	-					.
b	331/3% support test - 2014. If the o	rganization did	not check a bo	ox on line 13 o	r 16a, and line	15 is 331/3%	or more,
	check this box and stop here. The orga						
	7a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line						
b	10%-facts-and-circumstances test - 2 15 is 10% or more, and if the orga Explain in Part VI how the organization supported organization	nization meets on meets the "	the "facts-and facts-and-circum	l-circumstances' stances" test.	' test, check th The organizatio	nis box and sto n qualifies as a	publicly
18	Private foundation. If the organization instructions	did not check a	a box on line 13,	16a, 16b, 17a	, or 17b, check	this box and see	. .

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

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

Sec	tion A. Public Support			· · · · · · · · · · · · · · · · · · ·	·	·	
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
-	unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
. u	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly						
40	carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
-	and 12.)						
14	First five years. If the Form 990 is for	or the organiza	ation's first. seco	nd, third. fourth	, or fifth tax v	ear as a section	501(c)(3)
	organization, check this box and stop here .	•	·				` ` ` ` _
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2015 (line 8,			mn (f))		15	%
16	Public support percentage from 2014 Sche					16	%
	tion D. Computation of Investmen					- 1	,3
17	Investment income percentage for 2015 (lin			3, column (f))		17	%
18	Investment income percentage from 2014 S					18	%
	331/3% support tests - 2015. If the org						
	17 is not more than 331/3%, check this						
h	331/3% support tests - 2014. If the orga						
~	line 18 is not more than 331/3%, check						. \square
20	Private foundation. If the organization of		•	•			

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Part IV Supporting Organizations

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

Section A. Al	l Supporting	Organizations
---------------	--------------	----------------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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).	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.	3a		
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.	3b		
С	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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
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.	4b		
С	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)	4c		
5а	purposes. 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).	7		
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).	8		
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 .	9a		
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.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yos" appear 10h below	102		
b	supporting organizations)? If "Yes," answer 10b below. 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.)	10a 10b		

	ne A (1 0111 330 01 330 EZ) 2013			age •
Part	N Supporting Organizations (continued)		\ <u>'</u>	
			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		
	A family member of a person described in (a) above?	11b		
	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		
Secti	on B. Type I Supporting Organizations		V	NIa
			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.			
Cooti	7	2		
Secti	on C. Type II Supporting Organizations		Yes	No
			162	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			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	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 Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see insection The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instruc		
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
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. <i>Answer (a) and (b) below.</i>			
a	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? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Page 6 Schedule A (Form 990 or 990-EZ) 2015

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

Schedule A (Form 990 or 990-EZ) 2015

Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	•	<i>(</i> 2)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	(I) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С	Excess from 2013			
d	Excess from 2014			
е	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

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

SCHEDULE A, PART II -	OTHER INCOME	:			ATTACHMENT 1	L
DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
OTHER REVENUE	114,846.	25,308.	-180,115.	-611,394.	-893,244.	-1,544,599.
TOTAL S	114.846	25.308		-611.394	-893.244	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

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

OMB No. 1545-0047

Department of the Treasury ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. Internal Revenue Service **Employer identification number** Name of the organization WORLD RESOURCES INSTITUTE 52-1257057 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the

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

General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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) (2015)

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_		\$\$ 11,385,779.	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		\$\$,242,465.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 8,405,902.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 8,403,959.	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_		\$ 5,663,197.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
7_		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$\$ \$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
9		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
10		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
11		\$\$, 6,959,449.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

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			
		 _ _				
(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			
		- - -				

	organization WORLD RESOURCES INSTITU			52-1257057		
Part III	(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions.	the year from any one coons completing Part III, enter this information	ntributor. Com er the total of <i>e</i> .	plete columns (a) through (e) and xclusively religious, charitable, etc.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	T	(e) Transfer of gift				
	Transferee's name, address, an	0 ZIP + 4	Kelationsnij	o of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship	o of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship	o of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship	o of transferor to transferee		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

Гах)	(see separate instructions), ther		Tax) (see separate in	structions) or Form 990-E	EZ, Part V, line 35c (Prox
	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name of organization					ntification number
WOR	RLD RESOURCES INSTITU			52-125	
Par	rt I-A Complete if the c	organization is exempt under	section 501(c) or i	s a section 527 orgar	nization.
1	Provide a description of the	organization's direct and indirect p	olitical campaign ac	tivities in Part IV.	
2	Political expenditures			▶ \$	
3	Volunteer hours				
Par	rt I-B Complete if the c	organization is exempt under s	ection 501(c)(3)		
1		cise tax incurred by the organization		<u> </u>	
2		cise tax incurred by the organization m			
3		a section 4955 tax, did it file Form			
-	=		-		
	If "Yes," describe in Part IV.				Yes No
	rt I-C Complete if the c	organization is exempt under	section 501(c). ex	cept section 501(c)(3	<u>).</u>
1	•	expended by the filing organization			<i>ן-</i>
•					
2		ng organization's funds contributed			
		es			
3		enditures. Add lines 1 and 2. En			
4 5	Did the filing organization file Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numb is. For each organization listed, en tributions received that were promind or a political action committee (I	er (EIN) of all section ter the amount paid ptly and directly de	on 527 political organiza I from the filing organiza livered to a separate po	Yes No
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2015

d Grassroots nontaxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line 2d, column (e)) 250,000.

Schedule C (Form 990 or 990-EZ) 2015	WORLD RESOURCE	S INSTITUTE		52-1	257057 Page 2			
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	501(c)(3) and	filed Form 5768 (elec	ction under			
name, address, E	IN, expenses, and	share of excess lo	bbying expend	•	oup member's			
B Check ► if the filing organ	nization checked b	oox A and "limited	control" provisi	ons apply.				
Limits	on Lobbying Expend	ditures		(a) Filing	(b) Affiliated			
(The term "expendite	ures" means amour	nts paid or incurred.))	organization's totals	group totals			
1a Total lobbying expenditures to in	nfluence public opini	on (grass roots lobb	ying)					
b Total lobbying expenditures to in		,•		34,836.				
c Total lobbying expenditures (ad	_			34,836.				
d Other exempt purpose expendit				81,885,733.				
e Total exempt purpose expenditu				81,920,569.				
f Lobbying nontaxable amount.								
columns.				1,000,000.				
If the amount on line 1e, column (a	or (h) is. The lobbyin	a nontavable amount i	e.	= 100011000				
Not over \$500,000		amount on line 1e.	<u>. </u>					
Over \$500,000 but not over \$1,000		us 15% of the excess	over \$500,000					
Over \$1,000,000 but not over \$1,50		us 10% of the excess						
Over \$1,500,000 but not over \$1,50	·	us 5% of the excess of						
Over \$17,000,000	\$1,000,000		ver \$1,500,000.					
g Grassroots nontaxable amount				250,000.				
h Subtract line 1g from line 1a. If				0.	0.			
i Subtract line 1f from line 1c. If z				0.	0.			
j If there is an amount other th			id the organizat		0.			
					Yes No			
reporting section 4911 tax for the		aging Period Under			Yes No			
(Some organizations that				ata all of the five colum	una halaur			
(Some organizations that		e instructions for li	_		ins below.			
	Lobbying Exper	ditures During 4-Ye	ear Averaging Pe	riod				
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,00	0. 1,000,000.	4,000,000.			
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.			
c Total lobbying expenditures	34,489.	44,302.	40,11	.7. 34,836.	153,744.			

250,000.

Schedule C (Form 990 or 990-EZ) 2015

1,000,000.

1,500,000.

250,000.

250,000.

	dule C (Form 990 or 990-EZ) 2015					P	age 3
Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	d For	m 576	8		
For	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed lescription of the lobbying activity.		1)	(b)			
			No		Amour	nt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c d	Media advertisements? Mailings to members, legislators, or the public?						
e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g							
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i	Other activities?						
j	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
2a b	If "Yes," enter the amount of any tax incurred under section 4912						
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectio	n		
	00.(0)(0).				,	/es	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?						
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501						
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	OR (I	o) Pa	rt III-A	i, iine 3	, IS	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou	ınts (of				
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible to						
	and political expenditure next year?	JUUYII	9	4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
Pai	t IV Supplemental Information		'				
	ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate see instructions); and Part II-B, line 1. Also, complete this part for any additional information.	d grou	up list); Part	II-A, line	es 1	and
DIF	ECT CONTACT						
SCI	IEDULE C, PART II-A, LINE 1G						
WE	WORK WITH CONGRESS IN DRAFTING LEGISLATIONS ON CLIMATE CHANGE. WE	ARE					
<u>C</u> AI	LED ON CAPITAL HILL FROM TIME TO TIME TO TESTIFY. EXPENSES ARE TR	<u>ACK</u> EI)				

Schedule C (Form 990 or 990-EZ) 2015

IN PROJECT # 00162, 02103.

Schedule C (Form 990 or 990-EZ) 2015

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE D (Form 990)

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

► 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.

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

2015
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

Employer identification number

WOF	RLD RESOURCES INSTITUTE	52-1257057
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(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 writing that the assets held i	n donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant ful	nds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for ar	ny other purpose
	conferring impermissible private benefit?	Yes No_
Pa	rt I Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education) Preservation of	of a historically important land area
		of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
_	historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or termina	ated by the organization during the
	tax year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection violations, and enforcement of the conservation easements it holds?	-
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cons	
O	Stair and volunteer hours devoted to monitoring, inspecting, handling of violations, and emoticing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	nservation easements during the year
•	S	noorvation oddoments during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	on 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financia	al statements that describes the
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	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 958), not to report in its reworks of art, historical treasures, or other similar assets held for public exhibition, educ	evenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educ public service, provide, in Part XIII, the text of the footnote to its financial statements that described as the control of the footnote to its financial statements that described as the control of the footnote to its financial statements that described as the control of the footnote to its financial statements.	cation, or research in furtherance of
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	
-	works of art, historical treasures, or other similar assets held for public exhibition, educ	
	public service, provide the following amounts relating to these items:	
	(i) Revenue included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	<u> </u>
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	:
a	Revenue included in Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	▶ \$

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 Page **2**

Par	t Organizations Maintaining	Collections of	Art, Hist	orical T	reasure	s, or Otl	ner Similar	Asse	ts (conti	inued)
3	Using the organization's acquisition,	, accession, and c	ther recor	ds, check	any of	the follow	ing that are	e a sigr	nificant us	se of its
	collection items (check all that apply)	:								
а	Public exhibition		d _	Loan c	r exchan	ge progra	ms			
b	Scholarly research		е	Other						
С	Preservation for future general	tions								
4	Provide a description of the organiz	zation's collections	and expla	ain how t	hey furth	er the or	ganization's	exemp	t purpose	in Part
	XIII.									
5	During the year, did the organization							_	_	
	assets to be sold to raise funds rather		ined as pa	rt of the c	organizati	on's colle	ction?		Yes	No
Par	Complete if the organization 990, Part X, line 21.		" on Form	990, Pa	art IV, lin	e 9, or re	ported an a	amount	on Form	1
1 a	Is the organization an agent, trustee,							_	_	
	included on Form 990, Part X?							L	Yes	X No
b	If "Yes," explain the arrangement in I	Part XIII and comp	lete the fol	lowing tab	ole:					
							Am	ount		
С	Beginning balance					С				
d	Additions during the year					d				
е	Distributions during the year					е				
f	Ending balance				1	f			1	
2a	Did the organization include an amou								X Yes	No No
	If "Yes," explain the arrangement in	Part XIII. Check he	ere if the ex	(planation	has beer	provided	on Part XIII			X
Par	Endowment Funds. Complete if the organizatio	n angward "Van	" on Form	000 Da	ort IV / lim	o 10				
	Complete if the organizatio	(a) Current year					(d) Thusa was	wa haali	(a) Fauru	
	_	28,422,342.	(b) Prio 32,835			ears back	(d) Three year 30,715		(e) Four y	22,753
1a	Beginning of year balance	20,422,342.	32,03.	3,193.	31,75	,,,,,,,,	30,713	, 424.	20,4.	
b	Contributions									
С	Net investment earnings, gains,	2,673,548.	-2 434	4,865.	2 94	19,487.	3,172	044	4 0:	86,295
_	and losses	2,073,310.	2,13	1,003.	4,7	17,107.	3,112	, 0 1 1 .	1,0	
d	Grants or scholarships									
е	Other expenditures for facilities	2,020,717.	1.978	8,588.	1.85	72,136.	2,129	.024.	1.7	93,624
	and programs	2,020,1211		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				, 0211		
f	Administrative expenses	29,075,173.	28.422	2,342.	32.83	35,795.	31,758	.444.	30.7	15,424
g	End of year balance	L		l				,		
2 a	Provide the estimated percentage of Board designated or quasi-endowment	nt ▶ 11.6100	%	e (iirie 1g,	Column (a	a)) rieiu as	•			
b	Permanent endowment ► 86.32		_							
С	Temporarily restricted endowment	2.0700 %								
	The percentages on lines 2a, 2b, and	d 2c should equal 1	00%.							
3a	Are there endowment funds not in th	e possession of th	e organiza	tion that	are held	and admir	nistered for th	ne	_	
	organization by:								Y	es No
	(i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
b	If "Yes" on line 3a(ii), are the related	•	•						3b	
4	Describe in Part XIII the intended use		ion's endo	wment fur	nds.					
Par	Land, Buildings, and Equip Complete if the organization	ment. on answered "Ye	s" on Forn	n 990 P	art IV/ lir	na 11a S	ee Form 0	0∩ Par	t X line	10
	Description of property	(a) Cost or			r other basis		cumulated		l) Book value	
4 -	Land		ment)	(ot	ther)	depr	eciation			
1a	Land									
b	Buildings				40 000		45 040		4 00	1
C	Leasehold improvements				47,354		45,849.			1,505.
d	Equipment				02,041		09,370.			2,672.
e Tata	Other	d) must source! To	. 000 Dest		72,573		29,580.			2,993.
ı ota	II. Add lines 1a through 1e. (Column (a) must equal Forn	1 990, Part	x, columr	ı (B), line	10C.)	<u></u>		8,63	7,170.

Schedule D (Form 990) 2015 Page **3**

Part VII	Investments - Other Securities. Complete if the organization answere	d "Yes" on Form 990) Part IV line 11b See Form 9	90 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	uation:
	· · · · · · · · · · · · · · · · · · ·		Cost of end-or-year m	larket value
	al derivatives			
	-held equity interests			
(3) Other _ (A) AT.T	ERNATIVE INVESTMENTS	21,239,628.	FMV	
(B)		21,233,020.	11.17	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)	21,239,628.		
Part VIII	Investments - Program Related. Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11c. See Form 99	90, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year m	
_(1)				
_(2)				
_(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. Complete if the organization answere), Part IV, line 11d. See Form 9	
	(a) De	escription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B)	line 15.)		•
Part X	Other Liabilities. Complete if the organization answered line 25.	d "Yes" on Form 990), Part IV, line 11e or 11f. See F	form 990, Part X,
1.	(a) Description of liability	(b) Book valu	ıe	
(1) Feder	ral income taxes			
(2) OBLI	GATION UNDER CAPITAL LEASE	26,	268.	
	RRED REVENUE	4,631,		
(4) TERM		1,904,		
	REST-RATE SWAP AGREEMENT	77,	140.	
(6)				
(7)				
(8)				
(9)	mn (h) must equal Form 000. Part V. col. (R) line 25.	6 640 1	012	

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

JSA 5E1270 1.000 X

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Schedule D (Form 990) 2015 Page **4**

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	۱.	
1	Total revenue, gains, and other support per audited financial statements	1	99,365,271.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
- a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	217,405.
3	Subtract line 2e from line 1	3	99,147,866.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 191, 206.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	191,206.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	99,339,072.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	rn.	
1	Total expenses and losses per audited financial statements	1	89,632,638.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	89,632,638.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 191, 206.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	191,206.
_ 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	89,823,844.
	XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	-+ \ / I	ing 4. Dowt V line
2; Pai	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		

Page 5

ESCROW OR CUSTODIAL ACCOUNT LIABILITY

SCHEDULE D, PART IV, LINE 2B

WRI HOLDS MONEY WHICH IT RECEIVES ON BEHALF OF ANOTHER TAX-EXEMPT ORGANIZATION. THE CUSTODIAL MONIES ARE SPENT FOR THE SOLE PURPOSE OF PROVIDING SCHOLARSHIPS.

INTENDED USE OF ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

PROCEEDS FROM THE ENDOWMENTS ARE TO BE USED TO FUND THE OPERATIONS. THE ORGANIZATION HAS TWO ENDOWMENTS. THE LARGEST IS \$25,000,000 FROM THE MACARTHUR FOUNDATION. THE SMALLER ENDOWMENT FUNDS INTERNSHIPS AT THE ORGANIZATION.

FIN 48 (ASC 740) FOOTNOTE

SCHEDULE D, PART X, LINE 2

THE INSTITUTE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE. THE INSTITUTE HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. NO MATERIAL TAXABLE UNRELATED BUSINESS INCOME WAS GENERATED AND, ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. THE TAX YEARS ENDING SEPTEMBER 30, 2013, 2014, 2015 AND 2016 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES.

Part XIII Supplemental Information (continued)

THE INSTITUTE FOLLOWS THE ACCOUNTING GUIDANCE THAT CREATES A SINGLE MODEL TO ADDRESS UNCERTAINTY IN TAX POSITIONS AND CLARIFIES ACCOUNTING FOR INCOME TAXES BY PRESCRIBING THE MINIMUM RECOGNITION THRESHOLD A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. UNDER THE REQUIREMENTS OF THIS GUIDANCE, ORGANIZATIONS COULD NOW BE REQUIRED TO RECORD AN OBLIGATION AS THE RESULT OF TAX POSITIONS THEY HAVE HISTORICALLY TAKEN ON VARIOUS TAX EXPOSURE ITEMS. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS 'MORE-LIKELY-THAN-NOT' TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. THE INSTITUTE IS NOT REQUIRED TO RECORD SUCH AN OBLIGATION.

OTHER DECREASES TO FINANCIAL STATEMENT REVENUE

SCHEDULE D, PART XI, LINE 2D

UNREALIZED FOREIGN TRANSLATION GAIN \$7,867

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

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

	For grantmakers. Does the orga assistance, the grantees' eligibili grants or assistance?	ty for the grant	s or assistance		a used to award the	X Yes No
2	For grantmakers. Describe in assistance outside the United Sta	_	ganization's pi	rocedures for monitoring	the use of its grants a	and other
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		289,008.
(2)	EAST ASIA AND THE PACIFIC	2.	75.	GRANTMAKING		4,854,846.
(3)	EUROPE	1.	4.	GRANTMAKING		6,238,620.
(4)	NORTH AMERICA	1.	40.	GRANTMAKING		1,774,905.
(5)	RUSSIA/INDEPENDENT STATES			GRANTMAKING		36,686.
(6)	SOUTH AMERICA	2.	70.	GRANTMAKING		6,200,802.
(7)	SOUTH ASIA	2.	40.	GRANTMAKING		1,386,101.
(8)	SUB-SAHARAN AFRICA			GRANTMAKING		3,272,705.
(9)						
10)						
11)						
12)						
13)						
14)						
15)						
16)						
17)						
	Sub-total	8.	229.			24,053,673.
	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)	8.	229.			24.053.673.

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

Schedule F (Form 990) 2015

1	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of valuation
	organization	(b) IRS code section and EIN (if applicable)	(c) region	grant	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	REVERSE RAPI	166,426.	EFT OR WIRE			
()			CENT. AMERICA/CARIBBEAN	REVERSE RAPI	100,420.	EFI OR WIRE			
(2)			CENT. AMERICA/CARIBBEAN	SUPPORT ENVI	85,217.	EFT OR WIRE			
(3)			CENT. AMERICA/CARIBBEAN	REVERSE RAPI	23,250.	EFT OR WIRE			
(4)			CENT. AMERICA/CARIBBEAN	REVERSE RAPI	14,114.	EFT OR WIRE			
(5)			EAST ASIA/PACIFIC	PROTECT CLIM	8,267.	EFT OR WIRE			
				TROTECT CELL	0,20,1	DIT ON WIND			
(6)			EAST ASIA/PACIFIC	SUPPORT ENVI	40,867.	EFT OR WIRE			
(7)			EAST ASIA/PACIFIC	PROMOTE ENVI	200,000.	EFT OR WIRE			
(8)			EAST ASIA/PACIFIC	PROMOTE ENVI	100,000.	EFT OR WIRE			
(9)			EAST ASIA/PACIFIC	PROMOTE ENVI	260,000.	EFT OR WIRE			
				DDOMOSE THE	20.001				
(10)			EAST ASIA/PACIFIC	PROMOTE ENVI	38,291.	EFT OR WIRE			
(11)			EAST ASIA/PACIFIC	PROMOTE ENVI	247,834.	EFT OR WIRE			
(12)			EAST ASIA/PACIFIC	PROMOTE ENVI	130,056.	EFT OR WIRE			
(13)			EAST ASIA/PACIFIC	PROMOTE ENVI	20,000.	EFT OR WIRE			
(14)			EAST ASIA/PACIFIC	PROMOTE ENVI	20,000.	EFT OR WIRE			
(15)			EAST ASIA/PACIFIC	PROMOTE ENVI	154,000.	EFT OR WIRE			
(16)			EAST ASIA/PACIFIC	PROMOTE ENVI	20,000.	EFT OR WIRE			

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Part II	Grants and Other Assi Part IV, line 15, for any							ed "Yes" on F	orm 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	PROMOTE ENVI	27,962.	EFT OR WIRE			
(2)			EAST ASIA/PACIFIC	SUPPORT ENVI	52,157.	EFT OR WIRE			
(3)			EAST ASIA/PACIFIC	PROMOTE ENVI	10,000.	EFT OR WIRE			
(4)			EAST ASIA/PACIFIC	REVERSE RAPI	122,802.	EFT OR WIRE			
(5)			EAST ASIA/PACIFIC	SUPPORT ENVI	14,000.	EFT OR WIRE			
(6)			EAST ASIA/PACIFIC	SUPPORT ENVI	24,228.	EFT OR WIRE			
(7)			EAST ASIA/PACIFIC	PROGRAM DEVE	14,355.	EFT OR WIRE			
(8)			EAST ASIA/PACIFIC	PROMOTE ENVI	20,000.	EFT OR WIRE			
(9)			EAST ASIA/PACIFIC	SUPPORT ENVI	75,000.	EFT OR WIRE			
(10)			EAST ASIA/PACIFIC	PROTECT CLIM	30,000.	EFT OR WIRE			
(11)			EAST ASIA/PACIFIC	SUPPORT ENVI	14,000.	EFT OR WIRE			
(12)									
			EAST ASIA/PACIFIC	PROTECT CLIM	165,490.	EFT OR WIRE			
(13)			EAST ASIA/PACIFIC	SUPPORT ENVI	5,895.	EFT OR WIRE			
(14)			EAST ASIA/PACIFIC	REVERSE RAPI	17,000.	EFT OR WIRE			
(15)			EAST ASIA/PACIFIC	PROMOTE ENVI	35,000.	EFT OR WIRE			
(16)			EAST ASIA/PACIFIC	PROTECT CLIM	170,363.	EFT OR WIRE			

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

Schedule F (Form 990) 2015

Part II			tions or Entities Outside red more than \$5,000. F					ed "Yes" on F	orm 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	PROMOTE ENVI	10,945.	EFT OR WIRE			
(2)									
			EAST ASIA/PACIFIC	PROGRAM DEVE	14,738.	EFT OR WIRE			
(3)			EAST ASIA/PACIFIC	PROMOTE ENVI	74,064.	EFT OR WIRE			
(4)			EAST ASIA/PACIFIC	PROMOTE ENVI	170,000.	EFT OR WIRE			
(5)			EAST ASIA/PACIFIC	SUPPORT ENVI	33,043.	EFT OR WIRE			
(6)			EAST ASIA/PACIFIC	REVERSE RAPI	2,120,008.	EFT OR WIRE			
(7)			EAST ASIA/PACIFIC	PROMOTE ENVI	56,738.	EFT OR WIRE			
(8)			EAST ASIA/PACIFIC	REVERSE RAPI	237,742.	EFT OR WIRE			
(9)			EAST ASIA/PACIFIC	PROMOTE ENVI	100,000.	EFT OR WIRE			
(10)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	29,400.	EFT OR WIRE			
(11)									
			EUROPE (INCLUDING ICELAN	SUPPORT ENVI	23,651.	EFT OR WIRE			
(12)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	50,000.	EFT OR WIRE			
(13)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	8,730.	EFT OR WIRE			
(14)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	65,549.	EFT OR WIRE			
(15)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	36,082.	EFT OR WIRE			
(16)			EUROPE (INCLUDING ICELAN	PROMOTE ENVI	431,718.	EFT OR WIRE			

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

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Schedule F (Form 990) 2015 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV. line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	33,551.	EFT OR WIRE			
(2)			EUROPE (INCLUDING ICELAN	SUPPORT ENVI	40,000.	EFT OR WIRE			
(3)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	387,245.	EFT OR WIRE			
(4)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	21,500.	EFT OR WIRE			
(5)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	82,000.	EFT OR WIRE			
(6)			EUROPE (INCLUDING ICELAN	PROGRAM DEVE	113,484.	EFT OR WIRE			
(7)			EUROPE (INCLUDING ICELAN	PROMOTE ENVI	40,738.	EFT OR WIRE			
(8)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	1,347,500.	EFT OR WIRE			
(9)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	111,691.	EFT OR WIRE			
(10)			EUROPE (INCLUDING ICELAN	PROMOTE ENVI	99,859.	EFT OR WIRE			
(11)			EUROPE (INCLUDING ICELAN	PROGRAM DEVE	146,280.	EFT OR WIRE			
(12)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	38,054.	EFT OR WIRE			
(13)			EUROPE (INCLUDING ICELAN	PROGRAM DEVE	1,689,376.	EFT OR WIRE			
(14)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	119,238.	EFT OR WIRE			
(15)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	25,083.	EFT OR WIRE			
(16)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	33,000.	EFT OR WIRE			

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

Schedule F (Form 990) 2015

Part II	Grants and Other Assist Part IV, line 15, for any re							ed "Yes" on F	orm 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	127,141.	EFT OR WIRE			
(2)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	225,080.	EFT OR WIRE			
(3)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	103,532.	EFT OR WIRE			
(4)			EUROPE (INCLUDING ICELAN	PROMOTE ENVI	15,000.	EFT OR WIRE			
(5)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	7,345.	EFT OR WIRE			
(6)			EUROPE (INCLUDING ICELAN	SUPPORT ENVI	10,900.	EFT OR WIRE			
(7)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	193,163.	EFT OR WIRE			
(8)			EUROPE (INCLUDING ICELAN	PROTECT CLIM	46,385.	EFT OR WIRE			
(9)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	110,020.	EFT OR WIRE			
(10)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	77,819.	EFT OR WIRE			
(11)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	16,202.	EFT OR WIRE			
(12)			EUROPE (INCLUDING ICELAN	REVERSE RAPI	32,099.	EFT OR WIRE			
(13)			EUROPE (INCLUDING ICELAN	PROGRAM DEVE	160,206.	EFT OR WIRE			
(14)			EUROPE (INCLUDING ICELAN	PROMOTE ENVI	120,000.	EFT OR WIRE			
(15)			EUROPE (INCLUDING ICELAN	PROMOTE ENVI	20,000.	EFT OR WIRE			
(16)			NORTH AMERICA	PROMOTE ENVI	235,657.	EFT OR WIRE			

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

Schedule F (Form 990) 2015

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
									J
(1)			NORTH AMERICA	PROMOTE ENVI	13,000.	EFT OR WIRE			
(2)			NORTH AMERICA	SUPPORT ENVI	9,000.	EFT OR WIRE			
(3)			NORTH AMERICA	PROMOTE ENVI	124,960.	EFT OR WIRE			
(4)			NORTH AMERICA	PROMOTE ENVI	1,119,465.	EFT OR WIRE			
(5)			NORTH AMERICA	REVERSE RAPI	82,823.	EFT OR WIRE			
(6)			NORTH AMERICA	REVERSE RAPI	80,000.	EFT OR WIRE			
(7)			NORTH AMERICA	REVERSE RAPI	10,000.	EFT OR WIRE			
(8)			NORTH AMERICA	REVERSE RAPI	35,000.	EFT OR WIRE			
(9)			NORTH AMERICA	PROMOTE ENVI	65,000.	EFT OR WIRE			
(10)			RUSSIA AND NEIGHBORING S	REVERSE RAPI	36,686.	EFT OR WIRE			
(11)			SOUTH AMERICA	REVERSE RAPI	17,500.	EFT OR WIRE			
(12)			SOUTH AMERICA	PROMOTE ENVI	325,904.	EFT OR WIRE			
(13)			SOUTH AMERICA	PROMOTE ENVI	1,123,153.	EFT OR WIRE			
(14)			SOUTH AMERICA	REVERSE RAPI	150,000.	EFT OR WIRE			
(15)			SOUTH AMERICA	REVERSE RAPI	101,132.	EFT OR WIRE			
(16)			SOUTH AMERICA	PROMOTE ENVI	234,321.	EFT OR WIRE			

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Schedule F (Form 990) 2015

Part II	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.									
	Part IV, line 15, for any re	cipient who receiv	ed more than \$5,000. F	art II can be	duplicated if addit	ional space i	s needed.	1		
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
(1)			SOUTH AMERICA	REVERSE RAPI	11,157.	EFT OR WIRE				
			DOUTH AMERICA	KEVERSE KAFI	11,137.	EFT OR WIRE				
(2)			SOUTH AMERICA	REVERSE RAPI	178,758.	EFT OR WIRE				
(3)			SOUTH AMERICA	SUPPORT ENVI	38,041.	EFT OR WIRE				
(4)			SOUTH AMERICA	PROGRAM DEVE	9,414.	EFT OR WIRE				
(5)			SOUTH AMERICA	REVERSE RAPI	20,488.	EFT OR WIRE				
(-)			000111 11112111011	TELVERGE TUTE	20, 100.	DIT OR WILL				
(6)			SOUTH AMERICA	PROGRAM DEVE	63,342.	EFT OR WIRE				
(7)			SOUTH AMERICA	REVERSE RAPI	18,063.	EFT OR WIRE				
(8)			SOUTH AMERICA	PROMOTE ENVI	3,909,530.	EFT OR WIRE				
(9)										
(3)			SOUTH ASIA	PROTECT CLIM	52,000.	EFT OR WIRE				
(10)			SOUTH ASIA	PROTECT CLIM	8,000.	EFT OR WIRE				
(11)			SOUTH ASIA	PROGRAM DEVE	12,762.	EFT OR WIRE				
(12)			SOUTH ASIA	REVERSE RAPI	105,000.	EFT OR WIRE				
(13)			SOUTH ASIA	PROMOTE ENVI	152,144.	EFT OR WIRE				
			500111 115111	TROHOTE BRVT	132/111	DIT OR WILL				
(14)			SOUTH ASIA	PROGRAM DEVE	72,847.	EFT OR WIRE				
(15)			SOUTH ASIA	SUPPORT ENVI	22,000.	EFT OR WIRE				
(16)			SOUTH ASIA	PROMOTE ENVI	881,995.	EFT OR WIRE				
by th	er total number of recipient organe IRS, or for which the grantee er total number of other organiz	or counsel has prov	rided a section 501(c)(3) ed	quivalency lette						

Schedule F (Form 990) 2015

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
1)			COMPU ACTA	DDOMDGM GLIM	54.000	EEE OD MIDE			
<u>'', </u>			SOUTH ASIA	PROTECT CLIM	54,990.	EFT OR WIRE			
2)			SOUTH ASIA	REVERSE RAPI	24,362.	EFT OR WIRE			
3)			SUB-SAHARAN AFRICA	PROMOTE ENVI	27,500.	EFT OR WIRE			
4)			SUB-SAHARAN AFRICA	SUPPORT ENVI	9,000.	EFT OR WIRE			
5)			SUB-SAHARAN AFRICA	SUPPORT ENVI	12,171.	EFT OR WIRE			
(6)			SUB-SAHARAN AFRICA	REVERSE RAPI	45,109.	EFT OR WIRE			
7)			SUB-SAHARAN AFRICA	SUPPORT ENVI	41,862.	EFT OR WIRE			
(8)			SUB-SAHARAN AFRICA	REVERSE RAPI	71,865.	EFT OR WIRE			
(9)									
			SUB-SAHARAN AFRICA	REVERSE RAPI	587,240.	EFT OR WIRE			
10)			SUB-SAHARAN AFRICA	PROGRAM DEVE	106,472.	EFT OR WIRE			
(11)			SUB-SAHARAN AFRICA	REVERSE RAPI	135,552.	EFT OR WIRE			
(12)			SUB-SAHARAN AFRICA	REVERSE RAPI	383,703.	EFT OR WIRE			
13)			SUB-SAHARAN AFRICA	REVERSE RAPI	41,218.	EFT OR WIRE			
14)			SUB-SAHARAN AFRICA	REVERSE RAPI	1,430,518.	EFT OR WIRE			
(15)			SUB-SAHARAN AFRICA	REVERSE RAPI	50,882.	EFT OR WIRE			
(16)			SUB-SAHARAN AFRICA	REVERSE RAPI	100,000.	EFT OR WIRE			

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

Part II	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	REVERSE RAPI	64,100.	EFT OR WIRE			
(2)			SUB-SAHARAN AFRICA	PROGRAM DEVE	7,676.	EFT OR WIRE			
			SUB-SANAKAN AFRICA	PROGRAM DEVE	7,070.	EFT OR WIRE			
(3)			SUB-SAHARAN AFRICA	REVERSE RAPI	59,690.	EFT OR WIRE			
(4)			SUB-SAHARAN AFRICA	SUPPORT ENVI	10,421.	EFT OR WIRE			
(5)			SUB-SAHARAN AFRICA	PROTECT CLIM	27,500.	EFT OR WIRE			
(6)			SUB-SAHARAN AFRICA	SUPPORT ENVI	40,032.	EFT OR WIRE			
(7)			SUB-SAHARAN AFRICA	REVERSE RAPI	20,195.	EFT OR WIRE			
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2 En	ter total number of recipient orga the IRS, or for which the grantee ter total number of other organiz	or counsel has prov	vided a section 501(c)(3) e	quivalency lette	er			1	35.

Schedule F (Form 990) 2015

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
_(1)							
_(2)							
_(3)							
_(4)							
_(5)							
_(6)							
_(7)							
_(8)							
_(9)							
<u>(10)</u>							
<u>(11)</u>							
(12)							
<u>(13)</u>							
<u>(14)</u>							
(15)							
(16)							
(17)							
<u>(</u> 18)							

Page 4 Schedule F (Form 990) 2015

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

Schedule F (Form 990) 2015 Page **5**

Part V Supplemental Information

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

PROCEDURE FOR MONITORING USE OF GRANT FUNDS OUTSIDE U.S.

SCHEDULE F, PART I, LINE 2

MONITORING GRANT FUNDS IS DONE THROUGH A COMBINATION OF REVIEWING

REQUIRED PROGRESS AND FINANCIAL REPORTS SUBMITTED BY ALL SUBRECIPIENTS,

RANDOM SITE VISITS TO SUBRECIPIENTS TO REVIEW FINANCIAL AND PROJECT

RECORDS AND OBSERVE OPERATIONS, AND REQUIRING AUDITS OF SUBRECIPIENTS, IN

ACCORDANCE WITH OMB CIRCULAR A-133. ALL OF THE ORGANIZATION'S SUBGRANTS

ARE MADE TO FURTHER ITS TAX-EXEMPT PURPOSE AND MISSION.

ACCOUNTING METHOD USED

SCHEDULE F, PART I, LINE 3, COLUMN F

THE EXPENDITURES, PER REGION, ARE PRESENTED ON THE ACCRUAL BASIS OF

ACCOUNTING.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
-	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The results and street and persons and provide the approache amounts is easily non-time and in-			
	Only section 501(c)(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			
•	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
-	If "Yes" to line 5a 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 contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		X
D	If "Yes" on line 6a or 6b, describe in Part III.	OD		21
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2015

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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of	of W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ANDREW STEER	(i)	384,235.	15,000.	3,564.	24,227.	1,440.	428,466.	0.
1PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
MANISH BAPNA	(i)	251,376.	8,050.	810.	21,651.	37,297.	319,184.	0.
2EXEC VP/MANAGING DIR	(ii)	0.	0.	0.	0.	0.	0.	0.
STEVEN BARKER	(i)	223,575.	9,342.	2,174.	18,869.	24,643.	278,603.	0.
3 ^{CFO} , VP FINANCE ADMINISTRATION	(ii)	0.	0.	0.	0.	0.	0.	0.
ELIZABETH COOK	(i)	218,579.	7,763.	1,097.	17,897.	10,827.	256,163.	0.
4VP FOR INSTITUTIONAL	(ii)	0.	0.	0.	0.	0.	0.	0.
JANET RANGANATHAN	(i)	215,087.	3,247.	1,065.	17,445.	2,973.	239,817.	0.
5 ^{VP} FOR SCIENCE	(ii)	0.	0.	0.	0.	0.	0.	0.
JENNIFER MORGAN	(i)	202,759.	5,000.	648.	16,389.	9,687.	234,483.	0.
6 ^{CLIMATE} , ENERGY & POLLUTION	(ii)	0.	0.	0.	0.	0.	0.	0.
ARTHUR DROE	(i)	129,697.	5,500.	1,233.	11,560.	31,746.	179,736.	0.
7 ^{CONTROLLER}	(ii)	0.	0.	0.	0.	0.	0.	0.
HELEN MOUNTFORD	(i)	183,392.	10,000.	597.	9,549.	18,897.	222,435.	0.
8DIR. ECONOMICS	(ii)	0.	0.	0.	0.	0.	0.	0.
CRAIG HANSON	(i)	178,772.	10,000.	584.	15,001.	25,687.	230,044.	0.
9 ^{DIR. FFW}	(ii)	0.	0.	0.	0.	0.	0.	0.
NEIL PRAKASH	(i)	158,730.	5,000.	2,371.	8,732.	32,846.	207,679.	0.
10 ^{DIR.} HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
NIGEL SIZER	(i)	170,373.	11,000.	566.	14,601.	29,086.	225,626.	0.
11DIRECTOR, GLOBAL FOREST	(ii)	0.	0.	0.	0.	0.	0.	0.
LAWRENCE MACDONALD	(i)	245,524.	8,000.	2,985.	10,676.	30,087.	297,272.	0.
12 ^{VP} COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
HOLGER DALKMANN	(i)	172,244.	0.	556.	14,341.	22,018.	209,159.	0.
13 ^{DIRECTOR EMBARQ}	(ii)	0.	0.	0.	0.	0.	0.	0.
PETER VEIT	(i)	165,462.	3,206.	2,317.	13,718.	11,707.	196,410.	0.
14 ^{DIR. LAND & RRI}	(ii)	0.	0.	0.	0.	0.	0.	0.
PANKAJ BHATIA	(i)	181,948.	0.	596.	15,267.	21,249.	219,060.	0.
15 ^{DIR. GHG PROTOCOL}	(ii)	0.	0.	0.	0.	0.	0.	0.
ELIZABETH OTTO	(i)	148,041.	0.	1,328.	12,325.	11,707.	173,401.	0.
16 ^{DIR. WATER}	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2015

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 are not listed on Form 990, Part VII.

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

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
CHRISTINA DECONCINI	(i)	165,858.	0.	791.	13,457.	2,355.	182,461.	0.
1DIR. GOVERNMENT AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
ATHENA BALLESTEROS	(i)	147,214.	8,410.	479.	12,633.	27,646.	196,382.	0.
2DIR. FINANCE CENTER	(ii)	0.	0.	0.	0.	0.	0.	0.
MARK ROBINSON	(i)	182,235.	0.	881.	8,453.	8,157.	199,726.	0.
3DIR. GOVERNANCE CENTER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2015

Part || Supplemental Information

Complete this part to 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.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

ORGANIZATION'S MISSION

FORM 990, PART III, LINE 1

WRI'S MISSION IS TO MOVE HUMAN SOCIETY TO LIVE IN WAYS THAT PROTECT EARTH'S ENVIRONMENT AND ITS CAPACITY TO PROVIDE FOR THE NEEDS AND ASPIRATIONS OF CURRENT AND FUTURE GENERATIONS.

PROGRAM SERVICES

FORM 990, PART III

WRI IS A GLOBAL RESEARCH ORGANIZATION THAT SPANS MORE THAN 50 COUNTRIES, WITH OFFICES IN THE UNITED STATES, CHINA, INDIA, BRAZIL, INDONESIA AND MORE. OUR MORE THAN 450 EXPERTS AND STAFF WORK CLOSELY WITH LEADERS TO TURN BIG IDEAS INTO ACTION TO SUSTAIN OUR NATURAL RESOURCES-THE FOUNDATION OF ECONOMIC OPPORTUNITY AND HUMAN WELL-BEING. OUR WORK FOCUSES ON SIX CRITICAL ISSUES AT THE INTERSECTION OF ENVIRONMENT AND DEVELOPMENT: CLIMATE, ENERGY, FOOD, FORESTS, WATER, AND CITIES AND TRANSPORT. WRI DEVELOPS RESEARCH-BASED SOLUTIONS THAT CREATE REAL CHANGE ON THE GROUND. WE RELY ON A THREE-STEP APPROACH: COUNT IT, CHANGE IT, SCALE IT.

PROGRAM SERVICE ACTIVITY 1

FORM 990, PART III, LINE 4A

CLIMATE PROGRAM: WRI ENGAGES BUSINESSES, POLICYMAKERS AND CIVIL SOCIETY

AT THE LOCAL, NATIONAL AND INTERNATIONAL LEVELS TO ADVANCE TRANSFORMATIVE

Name of the organization

WORLD RESOURCES INSTITUTE

52-1257057

SOLUTIONS THAT MITIGATE CLIMATE CHANGE AND HELP COMMUNITIES ADAPT TO ITS IMPACTS.

OUR INTERNATIONAL CLIMATE WORK USES ANALYSIS, INNOVATION AND PARTNERSHIPS
TO ACHIEVE EFFECTIVE NATIONAL POLICIES AND AN AMBITIOUS, EQUITABLE GLOBAL
CLIMATE ACTION AGREEMENT. OUR U.S. CLIMATE ACTION INITIATIVE IDENTIFIES
COST-EFFECTIVE SOLUTIONS FOR THE UNITED STATES TO REDUCE ITS EMISSIONS IN
THE SHORT- AND LONG-TERM. CAIT (A SUITE OF ONLINE DATA AND VISUALIZATION
TOOLS THAT SUPPORT THE MANY DIMENSIONS OF CLIMATE POLICY MAKING) PROVIDES
A PLATFORM FOR STAKEHOLDERS TO EXPLORE, UNDERSTAND AND COMMUNICATE
CLIMATE AND EMISSIONS DATA. THE GREENHOUSE GAS PROTOCOL HELPS HUNDREDS OF
COMPANIES AND ORGANIZATIONS MEASURE, MANAGE, AND REPORT THEIR GREENHOUSE
GAS EMISSIONS.

PROGRAM SERVICE ACTIVITY 2

FORM 990, PART III, LINE 4B

FOOD, FOREST AND WATER PROGRAM

FOOD: WRI'S WORLD RESOURCES REPORT PROJECT DEVELOPS SOLUTIONS TO THE WORLD'S FOOD PRODUCTION AND CONSUMPTION PROBLEMS. WE IDENTIFY WAYS TO REDUCE FOOD LOSS AND WASTE. WE ANALYZE STRATEGIES TO SUSTAINABLY INCREASE FOOD PRODUCTION, SUCH AS RESTORING DEGRADED LANDS BACK INTO PRODUCTIVITY, INCREASING PASTURELAND YIELDS, AND IMPROVING LAND AND WATER MANAGEMENT. WE ADVANCE METHODS TO REDUCE FOOD PRODUCTION'S IMPACT ON THE ENVIRONMENT, SUCH AS CLIMATE-SMART AGRICULTURE.

FORESTS: WRI WORKS WITH GOVERNMENTS, BUSINESSES, AND CIVIL SOCIETY TO SUSTAIN FORESTS FOR FUTURE GENERATIONS. WE AIM TO CURB DEFORESTATION WORLDWIDE AND HELP TO RESTORE AND REFOREST ALREADY-CLEARED LAND.

WRI'S GLOBAL FOREST WATCH INITIATIVE USES THE MOST ADVANCED SATELLITE

DATA AND CROWD-SOURCED INFORMATION TO TRACK DEFORESTATION THROUGHOUT THE

WORLD IN NEAR-REAL-TIME. OUR GLOBAL RESTORATION INITATIVE IDENTIFIES WAYS

TO RESTORE TREES AND PRODUCTIVITY TO DEFORESTED AND DEGRADED LANDS. OUR

FOREST LEGALITY ALLIANCE HELPS BUSINESSES ELIMINATE ILLEGALLY SOURCED

WOODS FROM THEIR SUPPLY CHAINS. WE ALSO DEVELOP POLICY RECOMMENDATIONS TO

ENSURE EFFECTIVE AND INCLUSIVE GOVERNANCE OF THE WORLD'S FOREST

RESOURCES.

WATER: WRI WORKS WITH BUSINESSES, GOVERNMENTS, AND CIVIL SOCIETY TO
ENSURE A WATER-SECURE FUTURE. WE SEEK TO ADDRESS BOTH WATER QUANTITY AND
QUALITY CHALLENGES.

OUR AQUEDUCT PROJECT USES THE MOST UP-TO-DATE DATA TO PRODUCE GLOBAL WATER RISK MAPS, ALLOWING STAKEHOLDERS TO ASSESS CURRENT AND FUTURE CHALLENGES. WE CONDUCT ECONOMIC AND OTHER ANALYSES TO IDENTIFY THE MOST COST-EFFECTIVE STRATEGIES TO REDUCE WATER POLLUTION. WE IDENTIFY SOLUTIONS-SUCH AS RESTORING ECOSYSTEM SERVICES-TO ALLEVIATE STRESSES ON THE WORLD'S WATER SUPPLIES.

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

PROGRAM SERVICE ACTIVITY 3

FORM 990, PART III, LINE 4C

WRI ROSS CENTER FOR SUSTAINABLE CITIES: WRI AIMS TO ENSURE THAT CITIES DRIVE ECONOMIC OPPORTUNITY WHILE SUSTAINING NATURAL RESOURCES AND IMPROVING QUALITY OF LIFE. THROUGH OUR WRI ROSS CENTER FOR SUSTAINABLE CITIES, WE USE TECHNICAL EXPERTISE, CUTTING-EDGE RESEARCH, AND ON-THE-GROUND PARTNERSHIPS TO DESIGN SOLUTIONS THAT ENABLE SUSTAINABLE CITY GROWTH.

OUR ANALYSIS AND TOOLS ALLOW CITIES TO EFFECTIVELY MANAGE THEIR NATURAL RESOURCES AND REDUCE THEIR GREENHOUSE GAS EMISSIONS WHILE IMPROVING QUALITY OF LIFE. WORKING ACROSS OUR NETWORK, WE DEVELOP AND SUPPORT THE IMPLEMENTATION OF RESEARCH-BASED SOLUTIONS IN SUSTAINABLE MOBILITY, URBAN FORM, AS WELL AS URBAN EFFICIENCY & CLIMATE THAT REDUCE POLLUTION, IMPROVE HEALTH, AND CREATE SAFE, ACCESSIBLE PUBLIC SPACES FOR ALL PEOPLE TO THRIVE.

WE COLLABORATE WITH LOCAL AND NATIONAL DECISION-MAKERS IN BRAZIL, CHINA, INDIA, MEXICO, AND TURKEY TO IMPLEMENT PROJECTS THAT OVERCOME THE CHALLENGES OF URBANIZATION AND MAKE FOR GREATER CITIES. WE PARTNER WITH BUSINESSES, GOVERNMENTS, AND CIVIL SOCIETY TO SCALE OUR SUCCESSFUL PILOT PROJECTS GLOBALLY.

FORM 990, PART III, LINE 4D

OUR CENTERS: WE DESIGN SOLUTIONS FOR AND ANALYZE OUR SIX CRITICAL GOALS THROUGH THE LENSES OF OUR FOUR CENTERS:

- 1) OUR BUSINESS CENTER HARNESSES THE PRIVATE SECTOR TO SPUR ACTION,
 INNOVATION, AND AMBITION IN SUPPORT OF SUSTAINABLE DEVELOPMENT OUTCOMES.
 WE COMBINE RESEARCH, ANALYSIS, TOOLS, AND DIRECT ENGAGEMENT WITH
 BUSINESSES TO CREATE SOLUTIONS THAT ADVANCE ENVIRONMENTAL SUSTAINABILITY
 AND DRIVE VALUE.
- 2) OUR ECONOMICS CENTER HELPS DECISION-MAKERS IDENTIFY OPPORTUNITIES FOR COST-EFFECTIVE ACTION TO PROTECT OR ENHANCE NATURAL RESOURCES, AND ENSURE THE DELIVERY OF ESSENTIAL ECOSYSTEM SERVICES. WE PROVIDE RESEARCH AND TOOLS TO HELP IDENTIFY AND COMPARE THE FULL COSTS AND BENEFITS OF CONTINUING ON A BUSINESS-AS-USUAL GROWTH PATH VERSUS MORE SUSTAINABLE OPTIONS.
- 3) OUR FINANCE CENTER AIMS TO MOBILIZE AND SHIFT PUBLIC AND PRIVATE

 SECTOR INVESTMENTS TOWARD SUSTAINABLE DEVELOPMENT PARTICULARLY IN

 DEVELOPING NATIONS. WE ADVANCE TRANSPARENCY, SOUND GOVERNANCE,

 ENVIRONMENTAL AND SOCIAL SAFEGUARDS, AND PUBLIC-PRIVATE PARTNERSHIPS TO

 ENSURE THIS FINANCE IS AMBITIOUS, ACCOUNTABLE, AND EFFECTIVE.
- 4) OUR GOVERNANCE CENTER WORKS TO EMPOWER PEOPLE AND SUPPORT INSTITUTIONS TO FOSTER SOCIALLY EQUITABLE AND ENVIRONMENTALLY SOUND DECISION-MAKING.

Name of the organization	Employer identification number
WORLD RESOURCES INSTITUTE	52-1257057

PROGRAM DESCRIPTION	GRANTS	EXPENSES
ENERGY PROGRAM	\$203,225	\$2,041,334
BUSINESS CENTER	\$0	\$1,164,250
FINANCE CENTER	\$52,260	\$2,890,091
GOVERNANCE CENTER	\$433,794	\$3,689,616
SPECIAL PROJECTS	\$2,323,160	\$10,070,106
COMMUNICATIONS	\$0	\$1,644,761
TOTAL	\$3,012,439	\$21,500,158

OUR SIX GOALS

OUR WORK FOCUSES ON SIX CRITICAL ISSUES AT THE INTERSECTION OF

ENVIRONMENT AND DEVELOPMENT: CLIMATE, ENERGY, FOOD, FORESTS, WATER, AND

CITIES AND TRANSPORT. EACH OF THESE AREAS ARE DESCRIBED IN THE NARRATIVES

FOR FORM 990, PART III, LINES 4A THROUGH 4C PREVIOUSLY, EXCEPT 'ENERGY'

WHICH IS DESCRIBED BELOW:

ENERGY:

WRI WORKS WITH BUSINESSES, POLICYMAKERS, AND CIVIL SOCIETY TO TRANSFORM
THE GLOBAL ENERGY SYSTEM. WE AIM TO DRAMATICALLY REDUCE GREENHOUSE GAS
POLLUTION WHILE MEETING THE ENERGY NEEDS OF THE POOREST AND BUILDING
COMPETITIVE ECONOMIES.

OUR CHARGE INITIATIVE WORKS TO SECURE UNIVERSAL ACCESS TO CLEAN,
AFFORDABLE POWER. WE SHED LIGHT ON THE COSTS, BENEFITS, AND RISKS

Employer identification number

52-1257057

ASSOCIATED WITH DIFFERENT ENERGY AND POLICY OPTIONS. WE DEVELOP

INNOVATIVE APPROACHES TO BUYING, SELLING, AND REGULATING CLEAN

ELECTRICITY. WE PROVIDE POLICY RECOMMENDATIONS TO ADVANCE RENEWABLE

ENERGY--PARTICULARLY IN MAJOR EMERGING ECONOMIES LIKE INDIA AND SOUTH

AFRICA. AND WE FOSTER COLLABORATION AMONGST A DIVERSE GROUP OF ENERGY

STAKEHOLDERS, INCLUDING REGULATORS, UTILITIES, BUSINESSES, GOVERNMENTS,

AND CIVIL SOCIETY.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

THE INSTITUTE'S MANAGEMENT REVIEWED A DRAFT OF THE FORM 990 WHICH WAS PREPARED BY WRI'S EXTERNAL ACCOUNTING ADVISORS. THE ORGANIZATION SHARED A COPY OF THE FORM 990 WITH ITS BOARD OF DIRECTORS BEFORE FILING THE RETURN WITH THE IRS. COMMENTS FROM BOARD MEMBERS ARE SENT TO THE CFO OR CONTROLLER. A DEADLINE IS GIVEN FOR BOARD MEMBERS TO RESPOND. IF THE DRAFT IS AVAILABLE BEFORE A BOARD MEETING, IT IS ALSO GIVEN OUT AT THE MEETING.

CONFLICT OF INTEREST POLICY

FORM 990, PART VI, LINE 12C

BOARD MEMBERS: A COPY OF CONFLICT OF INTEREST FORM IS GIVEN TO BOARD
MEMBERS ANNUALLY WITH LIST OF VENDORS THAT WE DO BUSINESS WITH. EACH
BOARD MEMBER SIGNS THE FORM LETTING THE ORGANIZATION KNOW IF THERE ARE
ANY CONFLICTS. THOSE WITH CONFLICTS ARE NOT PERMITTED TO PARTICIPATE IN
ANY DELIBERATIONS AND DECISIONS AFFECTING THE SOURCE OF THE CONFLICT.

EMPLOYEES/OFFICERS: EVERY STAFF MEMBER SIGNS OFF ON A CONFLICT OF

INTEREST FORM. OFFICERS AND MANAGEMENT TEAM ARE SUPPOSED TO RE-SIGN

CONFLICT OF INTEREST FORMS EACH CALENDAR YEAR. STAFF MEMBERS ARE DIRECTED

TO RAISE QUESTIONS TO THEIR IMMEDIATE SUPERVISORS OR PROGRAM

DIRECTORS/VPS IF THEY HAVE A QUESTION ON AN ACTIVITY WHICH THEY THINK

MIGHT POSE A CONFLICT OF INTEREST. HUMAN RESOURCES STAFF IS AVAILABLE TO

ASSIST WITH QUESTIONS.

ANY PROGRAM DIRECTOR OR VP CAN DETERMINE THAT THERE IS A CONFLICT OF INTEREST AND REQUEST THAT THE ACTIVITIES STOP. THE CONFLICT OF INTEREST POLICY SPECIFIES THAT THE STAFF MEMBER IS PROHIBITED FROM PARTICIPATING IN THE DELIBERATIONS PROCESS IF THEIR ACTIVITY IS IN QUESTION. HUMAN RESOURCES STAFF INFORM STAFF WHEN THERE IS A CONFLICT OF INTEREST AND ASSIST WITH ENSURING COMPLIANCE.

COMPENSATION DETERMINATION

FORM 990, PART VI, LINES 15A & 15B

THE ORGANIZATION ENGAGES INDEPENDENT CONSULTANTS PERIODICALLY TO CONDUCT A COMPARATIVE REVIEW OF ITS SALARY STRUCTURE AND ALSO REVIEWS SALARY SURVEYS. THE MANAGING DIRECTOR SETS PAY INCREASES FOR ALL DEPARTMENT HEADS; THE PRESIDENT DOES THE SAME FOR THE MANAGING DIRECTOR, CFO, AND ALL VICE-PRESIDENTS; THE BOARD OF DIRECTORS DOES THE SAME FOR THE PRESIDENT. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES THE PRESIDENT'S ANNUAL SALARY INCREASES AND BONUSES AS APPROPRIATE. THE HUMAN RESOURCES DIRECTOR MAKES A RECOMMENDATION ON THE PERCENTAGE

Schedule O (Form 990 or 990-EZ) 2015 Page **2**

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

INCREASE AND BONUS AMOUNT, AND PARTICIPATES IN THE EXECUTIVE COMMITTEE OF THE BOARD MEETING WHICH EVALUATES THE PRESIDENT'S PERFORMANCE. THE HUMAN RESOURCES DIRECTOR TAKES NOTES /MINUTES OF THIS PORTION OF THE MEETING TO DOCUMENT THE DECISION MADE REGARDING THE PRESIDENT'S ANNUAL SALARY.

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

FORM 990, PART VI, LINE 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC TO THE EXTENT REQUIRED BY LAW.

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

FORM 990, PART XI, LINE 9

UNREALIZED FOREIGN TRANSLATION GAIN \$7,867

ATTACHMENT 1

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

CHINA

INDIA

BELGIUM

UNITED KINGDOM

NETHERLANDS

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT, DE,

DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MT, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

Schedule O (Form 990 or 990-EZ) 2015

Schedule O (Form 990 or 990-EZ) 2015

Name of the organization	Employer identification number
WORLD RESOURCES INSTITUTE	52-1257057
	ATTACHMENT 2 (CONT'D)

FORM 990, PART VI, LINE 17 - STATES

RI,SC,TN,UT,VA,WA,WV,WI,

			ATTACHMENT 3	
990, PART VII- COMPENSATION OF THE FIVE	HIGHEST PAI	D IND. CONTRACT	ORS	
NAME AND ADDRESS	<u></u>	ESCRIPTION OF S	SERVICES CO	OMPENSATION_
APA TEN G LLC 750 FIRST STREET NE, SUITE 250 WASHINGTON, DC 20002		RENT		3,252,225.
VIZZUALITY CALLE ELOY GONZALO, 27 MADRID SPAIN 28010		WEBSITE DESIGN		1,250,843.
HARVEY-CLEARY BUILDERS 6710 ROCKLEDGE DRIVE, #430 BETHESDA, MD 20817			1,097,932.	
OFFICE IMAGES 7650 STANDISH PL, SUITE 109 ROCKVILLE, MD 20855		CONSTRUCTION		1,043,537.
MINDSHIFT TECHNOLOGIES 307 WAVERLEY OAKS ROAD WALTHAM, MA 02452		IT SUPPORT		708,659.
		- -	ATTACHMENT 4	
FORM 990, PART IX - OTHER EXPENSES DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
TELEPHONE AND CABLES	417,179.			15,613.
				13,013.
COMMUNICATIONS	2,353,357.	2,353,063.	294.	

Name of the organization			Employer identification number
WORLD RESOURCES INSTITUTE			52-1257057
HODM 000 DADELTY OFFIED HYDENGER			ATTACHMENT 4 (CONT'D)
FORM 990, PART IX - OTHER EXPENSES			
	(A)	(B)	(C) (D)
DESCRIPTION	TOTAL EXPENSES	PROGRAM SERVICE EXP.	MANAGEMENT FUNDRAISING AND GENERAL EXPENSES
LIBRARY AND INFORMATION SERVIC	188,661.	181,600.	7,061
INDIRECT SALARIES	1,507,980.	1,451,544.	56,436
SUBGRANT POOL SALARIES	1,020,500.	1,020,500.	
OTHER INDIRECT	338,886.	325,852.	13,034
SUBGRANT POOL BENEFITS	435,831.	435,831.	
SUBGRANT POOL OTHER COSTS	162,465.	162,465.	
INDIRECT BENEFITS	633,183.	609,486.	23,697
SUBGRANTS	2,694,162.	2,694,162.	
TOTALS	9,752,204.	9,636,069.	294. 115,841

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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.

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

OMB No. 1545-0047
2015
Open to Public Inspection

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
1)						
2)						
3)						
4)						
5)						
(6)						

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled ity?
						Yes	No
(1) WORLD RESOURCES INSTITUTE FUND 52-1464425							
10 G STREET, NE WASHINGTON, DC 20002	SUPPORT	DC	501(C)(3)	11-I	WRI	X	
(2) WRI EUROPE STICHTING							
C/O FMO, ANNA VAN SAKSENLAAN 71 DEN HAAG, NL 2593	SUPPORT	NL	501(C)(3)	11-I	WRI	Х	
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2015

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	eral or aging tner?	(k) Percentage ownership
			oounity)		,			Yes	No		Yes	No	
<u>(1)</u>													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(b contr	olled
								Yes	No
(1) WRI - ENVIRON. MAN. CONSULTANCY CO, LTD.									
NO. 6 B CHAOWAI STREET 100020 BEIJING, CHAOYANG DISTRICT	FUNCTION. SUPPORT	CH	WRI	C CORP	0.	0.	100.0000	х	
(2) WRI INDIA PRIVATE LIMITED									
87 NEW MANGAI PURI, MEHRAULI GURGAO, NEW DELHI, DL IN	FUNCTION. SUPPORT	IN	WRI	C CORP	0.	0.	100.0000	Х	
(3)									
(4)									
_(5)									
_(6)									
(7)									

JSA 5E1308 1.000

Schedule R (Form 990) 2015

Schedule R (For	om 990) 2015	Page
Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	,	Yes	No
	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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
С	Gift, grant, or capital contribution from related organization(s)	1c		Х
d	Loans or loan guarantees to or for related organization(s)	1d		Х
е		1e		X
f	Dividends from related organization(s).	1f		
g		1g		X
		1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
•				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
m		1m		X
n		1n		X
0		10		X
р	Reimbursement paid to related organization(s) for expenses	1p		Х
		1g		X
1				
r	Other transfer of cash or property to related organization(s)	1r		X
s		1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thres		 5.	

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WRI - ENVIRON. MAN. CONSULTANCY CO, LTD.	В	4,300,030.	CASH
(2) WRI INDIA PRIVATE LIMITED	В	1,500,000.	CASH
(3) WRI EUROPE STICHTING	В	63,236.	CASH
<u>(4)</u>			
<u>(5)</u>			
(6)			

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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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec	partners ction (c)(3) cations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	j) eral or aging ner?	(k) Percentage ownership
			sections 512-514)		No			Yes No	No	(* 5 1555)	Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

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Supplemental Information Part VII

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).