Return of Organization Exempt From Income Tax

orm **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)

OMB No. 1545-0047
2014

Open to Public Inspection

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.

A For the 2014 calendar year, or tax year beginning 10/01, 2014, and ending 09/30,20 15 D Employer identification number C Name of organization B Check if applicable: WORLD RESOURCES INSTITUTE 52-1257057 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Name change 10 G STREET, NE (202) 729 - 7600Initial return City or town, state or province, country, and ZIP or foreign postal code Amended WASHINGTON, DC 20002 G Gross receipts \$ 75,021,307. return Application pending Name and address of principal officer: ANDREW STEER H(a) Is this a group return for Yes X Nο subordinates' G STREET, NE WASHINGTON, DC 20002 Yes No H(b) Are all subordinates included? Tax-exempt status: 501(c)(3) 501(c) (If "No," attach a list. (see instructions) (insert no.) 4947(a)(1) or Website: ► WWW.WRI.ORG H(c) Group exemption number Form of organization: | X | Corporation Association Other > L Year of formation: 1982 M State of legal domicile: DE Summary 1 Briefly describe the organization's mission or most significant activities: WRI FOCUSES ON THE INTERSECTION OF THE ENVIRONMENT AND SOCIO-ECONOMIC DEVELOPMENT. WE WORK WITH GOVERNMENTS, Governance BUSINESS, AND CIVIL SOCIETY TO BUILD SOLUTIONS- GOING BEYOND RESEARCH. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 35. Activities & Number of independent voting members of the governing body (Part VI, line 1b) 34. 426. 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 0 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h) 81,917,245 72,738,600. **COPY FOR** Program service revenue (Part VIII, line 2g) PUBLIC INSPECTION Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,437,143. 504,656. 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 47,602 -554,899. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 84,401,990. 72,688,357. 12 17,955,798 Grants and similar amounts paid (Part IX, column (A), lines 1-3) \cap 13 Benefits paid to or for members (Part IX, column (A), line 4) 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 26,449,452 30,366,864 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) ▶ _ _ _ 1,928,576 21,358,705. 47,173,033. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 65,763,955 77,539,897. 18 -4,851,540. 18,638,035. Revenue less expenses. Subtract line 18 from line 12 s or **Beginning of Current Year End of Year** 96,765,491 97,500,992. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 7,456,696 16,487,491 81,013,501 89,308,795. 22 Net assets or fund balances. Subtract line 21 from line 20. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here STEVE BARKER CFO, VP ADMIN Type or print name and title Print/Type preparer's name Preparer's signature PTIN Date Check Paid Mary () MARY 5/9/16 self-employed TORRETTA P00847851 Preparer ► GRANT THORNTON LLP Firm's EIN ▶ 36-6055558 Firm's name Use Only 703-847-7500 Firm's address ▶ 2010 CORPORATE RIDGE, SUITE 400 MCLEAN, VA 22102 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

JSA 4E1065 1.000

For Paperwork Reduction Act Notice, see the separate instructions.

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print WORLD RESOURCES INSTITUTE 52-1257057 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for 10 G STREET, NE filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions WASHINGTON, DC 20002 **Application** Application Return Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 0.9 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 • The books are in the care of ▶ARTHUR K. DROE, 10 G STREET, NE, WASHINGTON, DC 20002 Telephone No. ▶ 202 729-7679 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 05/15, 20 16, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 or ► X tax year beginning ________10/01 , 2014 , and ending ______09/30 , 2015 . Initial return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a |\$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 0 c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 0 Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2014)

Page 2 Form 990 (2014)

Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: SEE SCHEDULE O.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	X No
	If "Yes," describe these new services on Schedule O.	A NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes If "Yes," describe these changes on Schedule O.	X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measu expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$	
4b	(Code:) (Expenses \$1,570,891. including grants of \$276,957.) (Revenue \$) ENERGY PROGRAM - SEE SCHEDULE O	
_		
4C	(Code:) (Expenses \$	
4d	Other program services (Describe in Schedule O.)	
4-	(Expenses \$ 35,725,253. including grants of \$ 10,707,428.) (Revenue \$)	
46	Total program service expenses ► 70,433,448.	

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

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Part l	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated	22	х	
	employees? If "Yes," complete Schedule J	23	Λ	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	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			
	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,			
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	· · ·	27		Х
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Λ
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):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
٠.	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
D	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
26		555	23	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		Х
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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,			37
	Part VI	37		X
38	$ \ \text{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	

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Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			_ X
	Officer if Octredule O contains a response of flote to any line in this rait v		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and	-		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 426			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4-	Х	
L	account)? If "Yes," enter the name of the foreign country: ▶ ATTACHMENT 1	4a	Λ	
D				
	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		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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	7-	X	
L	and services provided to the payor?	7a 7b	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.5	21	
·	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.6		
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 Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	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.

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 35			
	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 34			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		3.7
<u>C4</u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- 1	Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	<i>∃.)</i> Yes	No
		100	X	140
	Did the organization have local chapters, branches, or affiliates?	10a	Λ	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10h	Х	
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 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?	IIa		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
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		
С	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_ ATTACHMENT_2			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	•	-	
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of 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: ▶		
	ARTHUR K. DROE 10 G STREET. NE WASHINGTON. DC 20002 202-729-7679			

JSA 4E1042 1.000

Part VII

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 hours per week (list any	box,	unles	Pos heck ss pe	rson	e than c is both or/trust	an	- tha	(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)	Individual trustee or director	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				374,114.	0	13,000.	
(2)JAMES A. HARMON	1.00							·			
CHAIRMAN	0	Х						C	0	0	
(3)HARRIET BABBITT	1.00										
VICE CHAIR	0	Х						C	0	0	
(4)WILLIAM D. RUCKELSHAUS	1.00										
CHAIRMAN EMERITUS	0	Х						C	0	0	
(5)DR. ALICE F. EMERSON	1.00										
VICE CHAIR EMERITUS	0	X						C	0	0	
(6)DR. DINO PATTI DJALAL	1.00										
DIRECTOR	0	X						C	0	0	
(7) FRANCES G. BEINECKE	1.00										
DIRECTOR	0	X						C	0	0	
(8)AFSANEH BESCHLOSS	1.00										
DIRECTOR	0	X						C	0	0	
(9) FERNANDO HENRIQUE CARDOSO	1.00										
DIRECTOR	0	Х						C	0	0	
(10)ROBIN CHASE	1.00										
DIRECTOR	0	X						C	0	0	
(11)CHEN JINING	1.00										
DIRECTOR	0	X						C	0	0	
(12)TIFFANY_CLAY	1.00										
DIRECTOR	0	Х						C	0	0	
(13)DANIEL L. DOCTOROFF DIRECTOR	1.00	Х						C	0	0	
(14)JAMSHYD N. GODREJ	1.00										
DIRECTOR	0	Х						C	0	0	

Form **990** (2014)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles er and	Pos heck ss pe	rson lirect	e than o	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	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)	from the organization and related organizations
15) THE HONORABLE AL GORE	1.00									
DIRECTOR	0	X						C	0	0
16) KATHLEEN MCGINTY	1.00									_
DIRECTOR	0	X						C	0	0
17) PRESTON R. MILLER, JR.	1.00	,								
DIRECTOR	1 00	X						C	0	0
18) JONATHAN LASH DIRECTOR	1.00	X								0
19) JAMIE LERNER	1.00	Λ							0	0
DIRECTOR	1.00	X							0	0
20) GORAN PERSSON	1.00	21							,	
DIRECTOR	0	X							0	0
21) MICHAEL POLSKY	1.00									
DIRECTOR	0	Х						c	0	0
22) DR. SUSAN TIERNEY	1.00									
VICE CHAIR	0	Х						C	0	0
23) STEPHEN M. ROSS DIRECTOR	1.00	X						C	0	0
24) ALLISON SANDER	1.00									
DIRECTOR	0	X						C	0	0
25) JAMES GUSTAVE SPETH	1.00									
DIRECTOR	0	X						0	0	0
1b Sub-total								374,114.	0	- ,
c Total from continuation sheets to Part VII, S	_							2,907,553.	0	,
d Total (add lines 1b and 1c)								3,281,667.		509,705.
Total number of individuals (including but not reportable compensation from the organization)		66 66		u ai	DOV	e) who	. Te	eceived more than	\$100,000 01	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched.										Yes No
4 For any individual listed on line 1a, is the organization and related organizations gro	sum of repeater than	ortab \$15	ole c 50,0	com 00?	per	sation	n aı	nd other compens	sation from the	
individual										4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "You										5 X
Section B. Independent Contractors										

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

(A) Name and business address	(B) Description of services	(C) Compensation
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 ► 40

Part VII Section A. Officers, Directors (A)	(B)			(C				(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related	box,	unles er and	Posit neck r ss per	tion more son rect	e than o is both or/truste	an ee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation from the
	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)	organization and related organizations
26) LEE M. THOMAS	1.00									
DIRECTOR	0	Х						0	0	
27) D. JAMES UMPLEBY	1.00									
DIRECTOR	0	Х						0	0	
28) FELIPE CALDERON	1.00									
DIRECTOR	0	X						0	0	
29) DANIEL CRUISE	1.00									
DIRECTOR	0	X						0	0	
30) CLINTON A. VINCE	1.00									
DIRECTOR	0	X						C	0	
31) DR. DIANA H. WALL	1.00									
DIRECTOR	0	X						C	0	
32) DANIEL WEISS	1.00									
DIRECTOR	0	X						0	0	
33) BILL RICHARDSON	1.00									
DIRECTOR	0	X						0	0	
34) RENEE JONES-BOS DIRECTOR	1.00								0	
35) CAIO KOCH-WESER	1.00	X							0	
DIRECTOR		X							0	
36) MANISH BAPNA	40.00	Λ							0	
EXEC VP/MANAGING DIR				х				269,934.	0	52,08
				Δ			_	200,004.	0	32,00.
1b Sub-total c Total from continuation sheets to Part										
d Total (add lines 1b and 1c)					•					
Total number of individuals (including bu reportable compensation from the organical compensation)	t not limited to t		liste				re	eceived more than	\$100,000 of	
										Yes N
3 Did the organization list any former	officer, directo	r. or	tru	istee	<u>.</u>	kev e	mn	lovee, or highes	t compensated	
employee on line 1a? If "Yes," complete S										3 2
4 For any individual listed on line 1a, is										
organization and related organization individual	s greater than	\$15	0,00	00?	If	"Yes	,"	complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receiv										
for services rendered to the organization?										5 2
Section B. Independent Contractors	•								·	· · · · · · · · · · · · · · · · · · ·
Complete this table for your five highest compensation from the organization. Re										

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

Part VII Section A. Officers, Directors, Tr		:y ⊏iĭ	ibio			anu F	ııgı			:ontinu 		
(A) Name and title	Average hours per week (list any hours for related	box,	not ch unles er and	s pe	ition more rson irect	e than or is both or/truste	an ee)	(D) Reportable compensation from the	Reportable compensation from related organizations	con	(F) stimated mount of other npensation	f
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	ey employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	orç ar	ganizatio nd related ganization	d
37) STEVEN BARKER CFO, VP FINANCE ADMINISTRATION	40.00			Х				236,165.	0		41,5	547
38) ELIZABETH COOK VP FOR INSTITUTIONAL	40.00			X				225,496.	0		29,3	
39) JANET RANGANATHAN VP FOR SCIENCE	40.00			Х				219,109.	0		18,7	
40) ROBERT MURPHY VP FOR EXTERNAL RELATION	40.00			Х				0	0			0
41) JENNIFER MORGAN CLIMATE, ENERGY & POLLUTION	40.00			71	Х			205,549.	0		23,4	
42) ARTHUR DROE CONTROLLER	40.00				X			145,039.	0		40,0	
43) PETER VEIT DIR. FOR INSTITUTIONS & GOV.	40.00				X			184,196.	0		25,1	
44) CRAIG HANSON DIR. PEOPLE AND ECOSYSTEMS	40.00				X			188,315.	0		38,6	
45) CLAYTON LANE COO FOR EMBARO	40.00				Х			194,884.	0		25,5	
46) HOLGER DALKMAN DIRECTOR EMBARO	40.00				Х			192,260.	0		26,7	
47) KRISTY JENKINSON DIR. MARKETS ENTERPRISE	40.00				Х			0	0		- ,	0
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)							> >					
Total number of individuals (including but not reportable compensation from the organization)		nose 66		d at	oove	e) who	re	ceived more than	\$100,000 of		1	
3 Did the organization list any former officemployee on line 1a? If "Yes," complete Sched										3	Yes	No X
4 For any individual listed on line 1a, is the organization and related organizations gr	sum of represents	ortab \$15	le c	om 00?	pen <i>If</i>	satior "Yes	n ar	nd other compens complete Schedu	sation from the le J for such			_
 individual	accrue co	mpen	satio	on f	ron	any	uni	related organization	on or individual	4	X	y
for services rendered to the organization? If "Y Section B. Independent Contractors	es, comple	ie Scr	ieau	iie J	ior	sucn	per	SON		5		X

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

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)					and Hi	(D)	(E)	/E\	
(A) Name and title	(B)			Pos	•		(D) Reportable	(E) Reportable	(F) Estimated	4
Name and title	Average hours per	(do r	not ch			than on		compensation from	amount o	
	week (list any					is both a	n from	related	other	
	hours for	office				or/trustee		organizations	compensati	
	related	ndi or d	nsti	Officer	(ey	mp High	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	organizations below dotted	/idu	tt	Эeг	emp	est	[(W-2/1099-MISC)		and relate	
	line)	Individual trustee or director	Institutional trustee		Key employee	con			organizatio	ns
		uste	Į į		эе	nper				
		Ф	tee			Highest compensated employee				
8) NIGEL SIZER	40.00					ā				—
DIRECTOR, GLOBAL FOREST	1 - 40.00	1				X	187,566.	0	41,6	642
9) PANKAJ BHATIA	40.00						101,7000		/	
DIR. GHG PROTOCOL	0	1				Х	192,083.	0	37,4	481
0) ROBERT WINTERBOTTOM	40.00						,		•	
DIRECTOR ECOSYSTEM	0	1				Х	136,151.	0	38,3	396
1) CHRISTINA DECONCINI	40.00								·	
DIRECTOR, LEGISLATIVE AFFAIRS	0	1				Х	162,948.	0	15,2	288
2) MARTHA ATHENA BALLESTEROS	40.00									
OBJECTIVE DIRECTOR II	0					Х	167,858.	0	42,6	532
b Sub-total							>			
c Total from continuation sheets to Part VII, S	ection A						`			—
d Total (add lines 1b and 1c)							received more than	\$100,000 of		
reportable compensation from the organization		66		u ai	JUV	5) WIIO	received more man	φ 100,000 OI		
·									Yes	N
B Did the organization list any former office	er, directo	r. or	tru	ıste	e.	kev en	nplovee, or highes	t compensated		
employee on line 1a? If "Yes," complete Sched									3	X
For any individual listed on line 1a, is the organization and related organizations gro	sum of repeater than	ortab \$15	le c	om 00?	pen <i>If</i>	sation "Yes."	and other compen	sation from the		
individual									4 X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y									5	X
Section B. Independent Contractors	,								- 1	
Complete this table for your five highest comcompensation from the organization. Report of										

(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

Part VIII Statement of Revenue

		Check if Schedule O contains a respon	se or note to an	y line in this Part VI	II		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
t s	1a	Federated campaigns 1a					
ira our	b	Membership dues	745,000.				
s, G	C	Fundraising events 1c	·				
ar Ta	d	Related organizations 1d					
ns, Simi	e	Government grants (contributions). 1e	4,940,810.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,					
를 된		and similar amounts not included above . 1f	67,052,790.				
o d	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f	▶	72,738,600.			
Program Service Revenue			Business Code				
eve	2a						
ë	b						
ξ	С						
Se	d						
ran	е						
rog	f	All other program service revenue					
	g	Total. Add lines 2a-2f		0			
	3	Investment income (including dividen					
		and other similar amounts)		485,414.			485,414.
	4	Income from investment of tax-exempt bond		0			55, 405
	5	Royalties	(ii) Personal	56,495.			56,495.
			(ii) i Giddiidii				
	6a	Gross rents					
	b	Rental income or (loss)					
	c d	Net rental income or (loss)		0			
	7a	Gross amount from sales of (i) Securities	(ii) Other	, i			
		assets other than inventory 2,352,192.	. ,				
	b	Less: cost or other basis					
	"	and sales expenses 2,278,265.	54,685.				
	С	Gain or (loss)	-54,685.				
	d	Net gain or (loss)		19,242.			19,242.
<u>o</u>	8a	Gross income from fundraising					
ů		events (not including \$					
eVe		of contributions reported on line 1c).					
Ř		See Part IV, line 18 a					
Other Revenue	b	Less: direct expenses b					
ŏ	С	Net income or (loss) from fundraising events.	▶	0			
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities.	•	0			
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b Net income or (loss) from sales of inventory					
	٣	Miscellaneous Revenue	Business Code	0			
	44			021 610			021 610
	11a	FOREIGN REALIZED LOSS CREDIT CARD REBATES	900099	-831,610. 14,887.			-831,610. 14,887.
	b	DISCOUNT ON GRANTS RECEIVABLE	900099	205,329.			205,329.
	C		200033	203,329.			203,329.
	d	All other revenue		-611,394.			
	12	Total revenue. See instructions		72,688,357.			-50,243.
				_, , , , , , , ,			. 50,213.

52-1257057

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				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
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				
individuals. See Part IV, lines 15 and 16	0			
Benefits paid to or for members Compensation of current officers, directors,	0			
trustees, and key employees	3,881,686.	2,912,096.	745,184.	224,406.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	17,612,646.	15,470,252.	1,409,636.	732,758.
8 Pension plan accruals and contributions (include		, ,		·
section 401(k) and 403(b) employer contributions)	1,481,967.	1,262,736.	152,133.	67,098.
9 Other employee benefits	5,758,364.	4,894,609.	575,837.	287,918.
10 Payroll taxes	1,632,201.	1,387,371.	163,219.	81,611.
11 Fees for services (non-employees):				
a Management	100,868.	100,868.		
b Legal	256,733.	256,733.		
c Accounting d Lobbying	0	230,733.		
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	160,771.		160,771.	
9 Other. (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O.)	0			
12 Advertising and promotion	0			
13 Office expenses	177,334.	170,540.		6,794.
14 Information technology	0			
15 Royalties	3,415,131.	2,942,644.	331,621.	140,866.
16 Occupancy	3,389,135.	3,177,047.	141,685.	70,403.
17 Travel 18 Payments of travel or entertainment expenses	3,300,133.	3,11,,01,.	111,003.	70,103.
for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	1,494,756.	1,408,507.	47,899.	38,350.
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	939,052.	903,076.		35,976.
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.)				
aRESEARCH EXPENSES	5,756,394.	5,693,737.	31,052.	31,605.
bOTHER DIRECT COST	2,152,340.	709,944.	1,410,935.	31,461.
cPUBLICATION EXPENSES	1,647,174.	1,606,478.	7,181.	33,515.
dEQUIPMENT RENTAL AND MAINT	1,098,671.	1,056,579.		42,092.
e All other expenses <u>ATCH</u> 4	26,584,674.	26,480,231.	720.	103,723.
25 Total functional expenses. Add lines 1 through 24e	77,539,897.	70,433,448.	5,177,873.	1,928,576.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if				
following SOP 98-2 (ASC 958-720)	0			Form 990 (2014)

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Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X									
		Chronic in Contradic C contains a response of	11010		(A)		(B)			
					Beginning of year		End of year			
	1	Cash - non-interest-bearing			2,500.	1	2,500.			
	2	Savings and temporary cash investments			10,263,420.	2	8,296,247.			
	3	Pledges and grants receivable, net			43,514,960.	3	44,594,398.			
	4	Accounts receivable, net			0	4	0			
	5	Loans and other receivables from current and the								
		trustees, key employees, and highest co								
		Complete Part II of Schedule L Loans and other receivables from other disqualified pers			0	5	0			
	6									
		4958(f)(1)), persons described in section 4958(c)(3)(B) and sponsoring organizations of section 501(c)(9) volu								
S		organizations (see instructions). Complete Part II of Sche	dule L		0	_	0			
Assets	7	Notes and loans receivable, net			0	7	0			
As	8	Inventories for sale or use			0	8	0			
	9	Prepaid expenses and deferred charges			824,754.	9	2,853,548.			
	10 a	Land, buildings, and equipment: cost or								
			10a		1 060 610		2 000 005			
	1	Less: accumulated depreciation			1,869,618.		3,898,925.			
	11	Investments - publicly traded securities			16,615,006.		15,963,521.			
	12	Investments - other securities. See Part IV, line 11			23,675,233.	12	21,891,853.			
	13	Investments - program-related. See Part IV, line 11			0	13 14	0			
	14 15	Intangible assets Other assets See Part IV line 11	0	15	0					
	16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal	96,765,491.	16	97,500,992.					
_	17	Accounts payable and accrued expenses			6,571,124.	17	9,109,235.			
	18	Grants payable			0,3,2,2210		0			
	19	Deferred revenue			688,079.	19	1,202,739.			
	20	Tax-exempt bond liabilities			0		0			
S	21	Escrow or custodial account liability. Complete Pa	art IV	of Schedule D	25,889.	21	74,157.			
Liabilities	22	Loans and other payables to current and for								
abi		trustees, key employees, highest compen	sated	employees, and						
=		disqualified persons. Complete Part II of Schedule	L		0	22	0			
	23	Secured mortgages and notes payable to unrelate			0	23	0			
	24	Unsecured notes and loans payable to unrelated			0	24	0			
	25	Other liabilities (including federal income tax,								
		parties, and other liabilities not included on lines		· ·						
		of Schedule D					6,101,360.			
	26	Total liabilities. Add lines 17 through 25			7,456,696.	26	16,487,491.			
S		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and		k here 🕨 🗓 and						
ű	27				3,790,122.	27	3,579,888.			
ala	28	Unrestricted net assets Temporarily restricted net assets			60,418,673.	28	52,333,613.			
В	29	Permanently restricted net assets	25,100,000.	29	25,100,000.					
Ë		Organizations that do not follow SFAS 117 (ASC 958)			.,,					
ō		complete lines 30 through 34.								
ts	30	Capital stock or trust principal, or current funds			30					
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equ	iipmer	nt fund		31				
ت ک	32	Retained earnings, endowment, accumulated inco	ome,	or other funds		32				
Ne	1	Total net assets or fund balances			89,308,795.	33	81,013,501.			
	34	Total liabilities and net assets/fund balances			96,765,491.	34	97,500,992.			

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Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		72,6	88,3	357.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		77,5	39,8	397.	
3	Revenue less expenses. Subtract line 2 from line 1	3		-4,8	51,5	540.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		89,308,795			
5	Net unrealized gains (losses) on investments	5		-3,443,754			
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				0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		81,0	13,5	501.	
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
					Yes	No	
1	Accounting method used to prepare the Form 990: CashX Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaiı	n 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 com-	piled	d 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	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ed c	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 or	vers	ight				
	of the audit, review, or compilation of its financial statements and selection of an independent acc	ounta	ant?	2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain in						
	Schedule O.	•					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	fort	h 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	ergo	the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits.		3b	X		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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	Ē				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	Ш	A church, convention of chu	urches, or associa	tion of churches descr	ribed in s	ection 1	70(b)(1)(A)(i).			
2	Ш	A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E.)						
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).			
4		A medical research organiz	ation operated in	conjunction with a hos	spital des	scribed i	n section 170(b)(1)(A)	(iii). Enter the		
		hospital's name, city, and st	ate:							
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). (Complete Part II.)									
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	Х	An organization that norma	ally receives a sub	stantial 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				-	•			
10		An organization organized	•	•	-					
11		An organization organized	•	•						
		one or more publicly suppo								
		the box in lines 11a through		• • • • • • • • • • • • • • • • • • • •			•	•		
а		Type I. A supporting orga	•		-					
		the supported organization	• •	• • • • • • • • • • • • • • • • • • • •	elect a m	ajority o	f the directors or trus	tees of the supporting		
		_ organization. You must c o								
b	L	<u> </u>	-					· · · · · -		
		control or management of	· · · -	=	the sam	e persor	ns that control or man	age the supported		
		organization(s). You must								
С		Type III functionally integrated						lly integrated with,		
		its supported organization		-						
d		Type III non-functionally						= ::		
		that is not functionally inte	-	-	-		· ·	d an attentiveness		
		requirement (see instruct	•	-						
е		_ Check this box if the orga						ı, туре ііі		
f	En	functionally integrated, or			porting c	organizai	iion.			
t		ter the number of supported ovide the following information								
9				(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of		
	(.,	ame of supported organization	(, =	(described on lines 1-9	listed in you	ur governing	support (see	other support (see		
				above or IRC section (see instructions))	docui	ment?	instructions)	instructions)		
				(000 111011 00110110))	Yes	No				
(A)										
(B)										
(C)										
(D)										
(E)										
Tot	al									

WRI

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

Sec	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	47,451,943.	44,171,816.	49,834,180.	81,917,245.	72,738,600.	296,113,784.				
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	47,451,943.	44,171,816.	49,834,180.	81,917,245.	72,738,600.	296,113,784.				
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)						28,636,991.				
6	Public support. Subtract line 5 from line 4.						267,476,793.				
	tion B. Total Support	() 0040	420044	() 0040	(N 0040	() 0044					
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	47,451,943.	44,171,816. 428,524.	49,834,180.	81,917,245. 433,515.	72,738,600. 541,909.	2,261,017.				
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	23,186.	114,846.	25,308.	-180,115.	-611,394.	-628,169.				
11	Total support. Add lines 7 through 10						297,746,632.				
12	Gross receipts from related activities, etc. (s	,				12	1,523,850.				
13	First five years. If the Form 990 is forganization, check this box and stop here	<u> </u>									
	tion C. Computation of Public Sup		•				00.02				
14	Public support percentage for 2014 (li		•			14	89.83 % 89.47 %				
15	Public support percentage from 2013					15					
16a	331/3% support test - 2014. If the o	=					.				
h	this box and stop here. The organization 331/3% support test - 2013. If the content is the support test - 2013 is the support t						• • •				
b	check this box and stop here. The organization										
172	10%-facts-and-circumstances test - 2										
114	10% or more, and if the organization	_									
	Part VI how the organization meets t					-	•				
	organization			•	•	• •	▶ □				
b	10%-facts-and-circumstances test - 2	2013. If the org	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,	and line				
	15 is 10% or more, and if the orga	anization meets	the "facts-and	l-circumstances'	test, check th	his box and st	op here.				
	Explain in Part VI how the organization	on meets the "	facts-and-circum	stances" test.	The organization	on qualifies as a	publicly				
	supported organization						▶ □				
18	Private foundation. If the organization	did not check a	a box on line 13,	16a, 16b, 17a	, or 17b, check	this box and see					
	instructions						▶ □				

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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
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						
	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						
r	Add lines 7a and 7b						
	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
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 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	the organization	n's first, second,	third, fourth, or	fifth tax year a	as a section 501(c)(3)
	organization, check this box and stop here .	<u></u>	<u></u> .	<u> </u>	<u></u> .		▶ 🔲
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2014 (line 8,	column (f) divide	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2013 Sche	dule A, Part III, lir	ne 15			16	%
Sec	tion D. Computation of Investmen	t Income Per	centage				
17	Investment income percentage for 2014 (lin					17	%
18	Investment income percentage from 2013 S	Schedule A, Part	III, line 17			18	%
19 a	331/3% support tests - 2014. If the org					e than 331/3%, a	and line
	17 is not more than 331/3%, check thi	s box and stor	here. The org	anization qualifies	s as a publicly	supported organi	zation 🕨 🗌
b	331/3% support tests - 2013. If the orga	nization did not	check a box on	line 14 or line 19	a, and line 16 is	s more than 331/3	3 %, and
	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization of	did not check	a box on line	14, 19a, or 19b	, check this bo	ox and see instr	uctions ►

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

1	Are all of the	organization's	supported	organizations	listed	by nam	ne in	the	organization's	governing
	documents? If	"No," describe i	in Part VI h	now the suppo	rted org	ganizatio	ns ar	e de	signated. If de	signated by
	class or purpose	e, describe the de	esignation. It	f historic and co	ntinuing	g relatio	nship,	expla	ain.	

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - 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.)

		Yes	No
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Schedule A (Form 990 or 990-EZ) 2014

Part IV Supporting Organizations (continued)

ıaıı	Supporting Organizations (continued)		V	NIa
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	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		
Section	on B. Type I Supporting Organizations			
			Yes	No
	Did the diseases to steep an acceptance of the contract of the disease of the contract of the			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in 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		
Section	on D. All Type III Supporting Organizations	•		
00011	on b. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		169	NO
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior			
	tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	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		
Section	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	one).	
	The organization satisfied the Activities Test. Complete line 2 below.	ucu	<i>0113</i>).	
a	The organization satisfied the Activities rest. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
b		<i></i> .		
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	::::::::::::::::::::::::::::::::::::::		Nic
2	Activities Test. Answer (a) and (b) below.		res	No
a	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? <i>If "Yes," then in Part VI identify</i>			
	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		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
b	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		
_		-5		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2.0		
_	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		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations	3		
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All				
other Type III non-functionally integrated supporting organizations must com	nplete Se	ections A through E.		
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year	
——————————————————————————————————————		(A) FIIOI Teal	(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	
——————————————————————————————————————		(A) FIIOI Teal	(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		ted Type III supporting	organization (see	
instructions).				

Schedule A (Form 990 or 990-EZ) 2014

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Part '	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Secti	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish ex	xempt purposes				
2	Amounts paid to perform activity that directly furthers exer	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.	o.gaa	0.10.10			
9	Distributable amount for 2014 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount					
	Ellie o amount divided by Ellie o amount		/ii\	(iii)		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	Distributable Amount for 2014		
1	Distributable amount for 2014 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2014					
	(reasonable cause required-see instructions)					
3	Excess distributions carryover, if any, to 2014:					
а						
b						
С						
d						
е	From 2013					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2014 distributable amount					
i	Carryover from 2009 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2014 from Section					
	D, line 7: \$					
а	Applied to underdistributions of prior years					
	Applied to 2014 distributable amount					
С	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2014, if					
	any. Subtract lines 3g and 4a from line 2 (if amount					
	greater than zero, see instructions).					
6	Remaining underdistributions for 2014. Subtract lines 3h					
	and 4b from line 1 (if amount greater than zero, see					
	instructions).					
7	Excess distributions carryover to 2015. Add lines 3j					
-	and 4c.					
8	Breakdown of line 7:					
a						
b						
C						
	Excess from 2013					
	Excess from 2014					

Schedule A (Form 990 or 990-EZ) 2014

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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	2			ATTACHMENT 1	
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
OTHER REVENUE	23,186.	114,846.	25,308.	-180,115.	-611,394.	-628,169.
TOTALS	23 186	114 846	25 308	_180 115		

WRI

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 on	e):	
Filers of:	Section:	
Form 990 or 990-EZ	X 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	
	covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See	
General Rule		
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.	
Special Rules		
regulations under s 13, 16a, or 16b, a	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, onal purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.	
contributor, during contributions totale during the year for General Rule appli	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such ed more than \$1,000. If this box is checked, enter here the total contributions that were received an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the lies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions more during the year	
	it 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).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

Part I	Contributors ((see instructions).	Use duplicate cop	pies of Part I if addition	nal space is needed.
--------	----------------	---------------------	-------------------	----------------------------	----------------------

(a)			
No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _		\$4,553,080.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$4,176,907.	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	Name, address, and zir + 4	\$2,757,539.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No. 4 4	(b) Name, address, and ZIP + 4	(c) Total contributions \$6,463,310.	Person Payroll Noncash (Complete Part II for noncash contributions.)
No.	Name, address, and ZIP + 4	\$6,463,310.	Person Payroll Noncash (Complete Part II for noncash contributions.)
No 4	Name, address, and ZIP + 4	*6,463,310.	Person Payroll Noncash (Complete Part II for noncash contributions.)
No. - 4	Name, address, and ZIP + 4	\$6,463,310. (c) Total contributions	Person X

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number 52-1257057

Part I Cor	tributors (see	e instructions).	Use duplicate	copies of Part I	if additional s	pace is needed.
------------	----------------	------------------	---------------	------------------	-----------------	-----------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7 _		\$2,131,759.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8 _		\$6,901,789.	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
9 _		\$5,000,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 10 _		\$1,554,439.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)			
No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No. 11			
		Total contributions	Person X Payroll Noncash (Complete Part II for

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is nee	ded.

(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
		 \$	

Name of organization WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10)

	that total more than \$1,000 for the year following line entry. For organizations or contributions of \$1,000 or less for the year Use duplicate copies of Part III if addition	ompleting Part III, enter the ear. (Enter this informatio	e total of <i>excl</i>	usively religious, charitable, etc.,
(a) No. from				
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	-			
	-			
		(e) Transfer of gift		
	Transferee's name, address, and a	ZIP + 4	Relationship	p 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		
	Transferenta name address and	7ID . 4	Bolotionobi	n of transferer to transfere
	Transferee's name, address, and a	ZIP + 4	Relationship	p of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Turti				
		(e) Transfer of gift		
	Transferee's name, address, and a	ZIP + 4	Relationship	p of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, and a	ZIP + 4	Relationship	p 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," to 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," to 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.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

-	(see separate instructions), ther		, (000 copulate		, , (
	Section 501(c)(4), (5), or (6) organization	anizations: Complete Part III.		Employer ide	ntification number
		I TO TO		' '	
	RLD RESOURCES INSTITU	organization is exempt under	costion FO1(s) or i	52-125	
	-	<u> </u>			IIZALIOII.
1	•	organization's direct and indirect p			
2					
3	Volunteer hours				
Par		organization is exempt under			
1		cise tax incurred by the organizatio			
2		cise tax incurred by organization m			
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
Par	rt I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).
1		expended by the filing organization			
2	527 exempt function activiti	ng organization's funds contributed			
3		enditures. Add lines 1 and 2. En			
4 5	Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numbers. For each organization listed, entributions received that were promed or a political action committee (list)	er (EIN) of all section ter the amount paic optly and directly de	on 527 political organiza I from the filing organiz livered to a separate po	ations to which the filing ation's funds. Also ente ditical organization, sucl
	(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) 2014

Sch	edule C (Form 990 or 990-EZ) 2014 WORLD	RESOURCES INSTITUTE	52-12	25/05/	Page 4				
Pa	Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion under					
Α	Check ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
В	Check ▶ if the filing organization checked box A and "limited control" provisions apply.								
	Limits on Lobb	(a) Filing	(b) Affiliate	ed					
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group total	s				
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)							
k	Total lobbying expenditures to influence	a legislative body (direct lobbying)	40,117.						
c	: Total lobbying expenditures (add lines 1	a and 1b)	40,117.						
c	Other exempt purpose expenditures	70,393,331.							
	Total exempt purpose expenditures (add	70,433,448.							
f	Lobbying nontaxable amount. Enter the	e amount from the following table in both							
	columns.		1,000,000.						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:							
	Not over \$500,000	20% of the amount on line 1e.							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.							
	Over \$17,000,000	\$1,000,000.							
	•	i% of line 1f)	250,000.						
	Subtract line 1g from line 1a. If zero or le		0		C				
		ss, enter -0-	0						
j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720								
	reporting section 4911 tax for this year?								
		I-Year Averaging Period Under Section 501(h)							
	(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.								
	See the separate instructions for lines 2a through 2f.)								

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total				
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.				
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.				
c Total lobbying expenditures	33,919.	34,489.	44,302.	40,117.	152,827.				
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.				
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.				
f Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2014

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 57	68		
(election under section 301(ii)).					(b)		
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Amou	ınt	
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:						
a	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
b b	Media advertisements?						
d	Mailings to members, legislators, or the public?						
e f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?						
j	Other activities? Total. Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
d C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ectio	n		
	501(c)(6).					V	
1	Were substantially all (90% or more) dues received nondeductible by members?				1	Yes	No
2	Did the agreement in make only in house labbuing arounditures of \$2,000 or less?			 			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			 			
Pa	rt 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 (b) Pa	rt III- <i>i</i>	A, line	3, is	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount						
	political expenses for which the section 527(f) tax was paid).						
a	Current year Carryover from last year			2a			
b	Total			2b 2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion		ne				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible I	obbyir	ng				
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			5			
	rt IV Supplemental Information						
2 (s	vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.	d grou	up list	t); Part	II-A, lir	nes 1	and

Schedule C (Form 990 or 990-EZ) 2014

Part IV Supplemental Information (continued)

PAID STAFF OR MANAGEMENT

SCHEDULE C, PART II-B, LINE 1B

MOST OF OUR LOBBYING ACTIVITIES ARE ON CAPITAL HILL WHERE WE ARE CALLED TO TESTIFY ON ISSUES OF CLIMATE CHANGE. WE WORK WITH CONGRESS TO DRAFT LEGISLATIONS ON CLIMATE CHANGE. ALL OF OUR LOBBYING EXPENSES ARE TRACKED IN PROJECT #00162 AND 02103

DIRECT CONTACT

SCHEDULE C, PART II-A, LINE 1G

WE WORK WITH CONGRESS IN DRAFTING LEGISLATIONS ON CLIMATE CHANGE. WE ARE CALLED ON CAPITAL HILL FROM TIME TO TIME TO TESTIFY. EXPENSES ARE TRACKED IN PROJECT # 00162, 02103.

SCHEDULE D (Form 990)

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

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WOF	RLD RESOURCES INSTITUTE	52-1257057
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	accounts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
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 in	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 fund	
•	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	
Pa	Int II Conservation Easements.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		a historically important land area
		a certified historic structure
	Preservation of open space	a continua motorio ciractaro
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	ne form of a conservation
_	easement on the last day of the tax year.	Held at the End of the Tax Year
а		2a
a b		2b
		2c
c d	Number of conservation easements on a certified historic structure included in (a)	20
u		2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminat	
3	tax year >	ed by the organization during the
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	
3	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easen	
Ū		ments during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements	during the year
•	S ====================================	s during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	ion 170(h)(4)(R)(i)
•	and a action 470/h)/4)/D)/ii)0	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and e	
•	balance sheet, and include, if applicable, the text of the footnote to the organization's financial	
	organization's accounting for conservation easements.	otatomente alat accombco alc
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rev	venue statement and halance sheet
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reversely of art, historical treasures, or other similar assets held for public exhibition, educations of art, historical treasures, or other similar assets held for public exhibition, educations are supported by the contraction of the contraction	ition, or research in furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that descri	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its review of art bitariaal transport of art bit	
	works of art, historical treasures, or other similar assets held for public exhibition, educa public service, provide the following amounts relating to these items:	mon, or research in jurtherance of
	(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 ass	
-	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ooto for ilitariolal galli, provide the
а	Revenue included in Form 990, Part VIII, line 1	▶\$
b	Assets included in Form 990, Part X	> \$

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

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 Page **2**

Par	rt Organizations Maintaining Co	ollections of	Art,	Historic	al Treas	ures,	or Oth	ner Simila	ar Asse	ts (cont	tinue	ed)
_	Heiner the connection to a constitution of	:	-41		-11	-6.41-				::::		£ :4-
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its							TITS				
_	collection items (check all that apply): Public exhibition		٨		oan or exc	hanar	program	mc				
a b	Scholarly research		d e	_		_						
C	Preservation for future generations	•	-									
4	Provide a description of the organization		s and e	exnlain h	ow they f	urthei	the or	nanization'	s exemn	t nurnos	o in □	Part
•	XIII.	no concener	o una c	σχριαίτι τ	iow thoy i	ui ti ioi	1110 013	gariizatiori	o oxomp	, parpoo		· uit
5	During the year, did the organization soli	cit or receive o	donatio	ns of art	. historical	treasi	ures. or	other simila	ar			
	assets to be sold to raise funds rather that								_	Yes		No
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9,											
	or reported an amount on For	n 990, Part <mark>አ</mark>	ine :	21.								-
1 a	Is the organization an agent, trustee, cus					utions	or othe	r assets no	t _			
	included on Form 990, Part X?								L	Yes	Х	No
b	If "Yes," explain the arrangement in Part	XIII and comp	olete th	e followir	ng table:		_					
								Α	mount			
	Beginning balance											
	Additions during the year											
e	Distributions during the year											
f 20	Ending balance Did the organization include an amount of						uctodial	account lia	hility2	X Yes		No
	If "Yes," explain the arrangement in Part										X	INO
	rt V Endowment Funds. Complete										21	
· ai		Current year		Prior year			ars back	(d) Three y		(e) Four	vears b	oack
1a	<u> </u>	,835,795.		,758,4			,424.	28,422		31,2		
	Contributions			· · ·		•	•	,	,	· ·		
	Net investment earnings, gains,											
	and losses -2	,434,865.	2,	,949,4	87. 3	,172	,044.	4,086	5,295.	-5	89,	847.
d	Grants or scholarships											
е	Other expenditures for facilities											
		,978,588.	1,	,872,1	36. 2	,129	,024.	1,793	3,624.	2,2	13,	309.
f	Administrative expenses											
g		,422,342.		,835,7			,444.	30,715	,424.	28,4	22,	753.
2	Provide the estimated percentage of the	•		ance (lin	e 1g, colun	nn (a)	held as	:				
	Board designated or quasi-endowment)_% _									
	Permanent endowment 88.3100											
C	Temporarily restricted endowment ▶2900_% The percentages in lines 2a, 2b, and 2c should equal 100%.											
3a	Are there endowment funds not in the po	•		anization	that are h	eld ar	ıd admir	nistered for	the			
	organization by:		9-							1	es	No
	(i) unrelated organizations									3a(i)		X
	(ii) related organizations									3a(ii)		X
b	If "Yes" to 3a(ii), are the related organization									3b		
4	Describe in Part XIII the intended uses of	f the organiza	ition's e	endowme	nt funds.						<u> </u>	
Par	rt VI Land, Buildings, and Equipmen	nt.	-" 4- 5		O D(IV		44 - 0	F C	00 D	V !!	40	
	Complete if the organization a	(a) Cost or			Cost or other			cumulated		I 入, IINE I) Book valu		
		(inves	tment)	(3)	(other)	24010		eciation	,,,	., Dook vale		
	Land											
	Buildings											
	Leasehold improvements				3,470,9			73,005.		2,59		
	Equipment				4,025,4			41,017.		1,08		
	Other		m 000 '	Dow V -	559,			42,877.			6,5	
ota	al. Add lines 1a through 1e. (Column (d) m	iust equal Forn	n 990, I	Part X, c	oiumn (B),	iine 10	<i>J</i> (C).)	<u></u> ▶		3,89	8,9	<u>∠5.</u>

Schedule D (Form 990) 2014

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Part VII Investments - Other Securities.	1 "Voo" to Form 000	Part IV line 11h See Form 000 Part V line 12
		Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	21,891,853.	FMV
(B)		
(C)		
(D)		
(E)		
(F) (G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	21,891,853.	
Part VIII Investments - Program Related.	21/051/055.	
	l "Yes" to Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
<u>(6)</u>		
(7)		
<u>(8)</u> (9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
	l "Yes" to Form 990,	Part IV, line 11d. See Form 990, Part X, line 15.
· · · · · · · · · · · · · · · · · · ·	scription	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) li	ino 15 \	
Part X Other Liabilities.		Part IV, line 11e or 11f. See Form 990, Part X,
1. (a) Description of liability	(b) Book valu	e
(1) Federal income taxes		
(2) OBLIGATION UNDER CAPITAL LEASES	33,4	408.
(3) DEFERRED REVENUE	3,067,9	
(4) LINE OF CREDIT	3,000,0	000.
(5)		
(6)		
(7)		
(8)		
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	6 101 3	260
Total (Column (b) must equal Form 990, Part X, COI. (b) line 25.)	6,101,3	

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 4E1270 1.000 Schedule D (Form 990) 2014

Χ

Schedule D (Form 990) 2014 Page **4**

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	١.	
1	Total revenue, gains, and other support per audited financial statements	1	69,083,832.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•	05/005/052.
– a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b		
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
	Add lines 2a through 2d	2e	-3,443,754.
3	Subtract line 2e from line 1	3	72,527,586.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		, - ,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 160,771.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	160,771.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	72,688,357.
Part 2		rn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	77,379,126.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.) Add lines 30 through 3d		
	Add lines za tillough zu	2e	
3	Subtract line 2e from line 1	3	77,379,126.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a 160,771.		
	Other (Describe in Part XIII.) Add lines 4a and 4b	4.	160,771.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c 5	77,539,897.
Part		<u> </u>	77,332,037.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	rt V. li	ne 4: Part X. line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

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 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. THE INSTITUTE IS NOT REQUIRED TO RECORD SUCH AN OBLIGATION.

Schedule D (Form 990) 2014

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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

i vaiii c	of the organization				Linployer identifies	ation namber			
WORI	D RESOURCES INSTITUTE				52-1257057	7			
Part	General Information of Form 990, Part IV, line 14		Outside the U	Jnited States. Complete	if the organization answe	ered "Yes" on			
1	For grantmakers. Does the orga	nization mainta	in records to s	ubstantiate the amount of	fits grants and other				
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the								
						X Yes No			
					-				
2	For grantmakers. Describe in	Part V the or	ganization's pr	ocedures for monitorina	the use of its grants a	and other			
	assistance outside the United Sta		g p.		g				
	accidented catolics the Chites Ca								
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	(c) Number of	(d) Activities conducted in	(e) If activity listed in (d) is	(f) Total			
	(4) 1103.011	offices in the	employees,	region (by type) (e.g.,	a program service,	expenditures for			
		region	agents, and independent	fundraising, program services, investments,	describe specific type of service(s) in region	and investments in region			
			contractors	grants to recipients	Conviction in region	iii rogion			
			in region	located in the region)					
(1)	CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		127,285.			
(2)	EAST ASIA AND THE PACIFIC			GRANTMAKING		2,291,755.			
(3)	EUROPE			GRANTMAKING		5,106,250.			
(4)	NORTH AMERICA			GRANTMAKING		1,973,318.			
(5)	RUSSIA/INDEPENDENT STATES			GRANTMAKING		281,081.			
(•)	RUSSIA/ INDEPENDENT STATES			GRANIMAKING		201,001.			
(6)						5 065 055			
(0)	SOUTH AMERICA			GRANTMAKING		5,067,877.			
(7)									
(1)	SOUTH ASIA			GRANTMAKING		560,350.			
(0)									
(8)	SUB-SAHARAN AFRICA			GRANTMAKING		2,245,552.			
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
/									
(16)									
<u>,, </u>									
(17)									
	Sub total					18 650 466			
3a	Sub-total					17,653,468.			
b	Total from continuation	1				1			

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

sheets to Part I c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2014

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17,653,468.

Schedule F (Form 990) 2014

	(· ····· · · · · · · · · · · · · · · ·
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)
				PROMOTE ENVI					
(1)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	703,438.	EFT OR WIRE			
				PROTECT CLIM					
(2)			EUROPE/ICELAND/GREENLAND	CLIMATE	837,736.	EFT OR WIRE			
				REVERSE RAPI					
(3)			EUROPE/ICELAND/GREENLAND	DEGRADATION	1,354,436.	EFT OR WIRE			
				SUPPORT ENVI					
(4)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	54,827.	EFT OR WIRE			
				PROMOTE ENVI					
(5)			NORTH AMERICA	ENVIRONMENT	1,543,394.	EFT OR WIRE			
				REVERSE RAPI					
(6)			NORTH AMERICA	DEGRADATION	339,924.	EFT OR WIRE			
				PROTECT CLIM					
(7)			NORTH AMERICA	ENVIRONMENT	90,000.	EFT OR WIRE			
(8)			RUSSIA/NEWLY IND. STATES	REVERSE DEGR	241,300.	EFT OR WIRE			
					·				
(9)			RUSSIA/NEWLY IND. STATES	SUPPORT ENVI	39,781.	EFT OR WIRE			
,				PROTECT CLIM					
(10)			SOUTH AMERICA	ECONOMIC OPP	123,287.	EFT OR WIRE			
, ,				PROMOTE ENVI	-, -				
(11)			SOUTH AMERICA	ENVIRONMENT	3,129,421.	EFT OR WIRE			
,				REVERSE RAPI	-,,				
(12)			SOUTH AMERICA	ENVIRONMENT	1,384,963.	EFT OR WIRE			
,				PROTECT CLIM	1/301/3031	DIT OR WILL			
(13)			SOUTH ASIA	ENVIRONMENT	193,080.	EFT OR WIRE			
(10)			DOUTH ADIA	PROMOTE ENVI	173,000.	EFT OR WIRE			
(14)			SOUTH ASIA	ENVIRONMENT	26,625.	EFT OR WIRE			
,			DOUTH ADIA	REVERSE RAPI	20,023.	TEI OK WIKE			
(15)			SOUTH ASIA	ECONOMIC	37,795.	EFT OR WIRE			
(10)			DOULH ASIA	PROTECT CLIM	37,195.	EFI OR WIRE			
(16)			CUD CAUADAN APDICA		20.460	EEE OF MEE			
(10)			SUB-SAHARAN AFRICA	ENVIRONMENT	29,460.	EFT OR WIRE		1	

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) 2014

Schedule F (Form 990) 2014

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)
				REVERSE RAPI					
(1)			SUB-SAHARAN AFRICA	DEGRADATION	1,909,542.	EFT OR WIRE			
				REVERSE RAPI					
(2)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	48,502.	EFT OR WIRE			
				SUPPORT ENVI					
(3)			SUB-SAHARAN AFRICA	ENVIRONMENT	151,320.	EFT OR WIRE			
(4)			CENT. AMERICA/CARIBBEAN	SUPPORT ENVI	25,532.	EFT OR WIRE			
(5)			CENT. AMERICA/CARIBBEAN	PROGRAM DEVE	53,251.	EFT OR WIRE			
(6)			EAST ASIA/PACIFIC	PROTECT CLIM	482,997.	EFT OR WIRE			
(7)			EAST ASIA/PACIFIC	PROMOTE ENVI	1,235,858.	EFT OR WIRE			
(8)			EAST ASIA/PACIFIC	REVERSE RAPI	360,021.	EFT OR WIRE			
(9)			EAST ASIA/PACIFIC	SUPPORT ENVI	143,481.	EFT OR WIRE			
(10)			EAST ASIA/PACIFIC	PROGRAM DEVE	69,398.	EFT OR WIRE			
(11)			EUROPE/ICELAND/GREENLAND	PROGRAM DEVE	2,155,813.	EFT OR WIRE			
(12)			SOUTH AMERICA	SUPPORT ENVI	131,627.	EFT OR WIRE			
(13)			SOUTH AMERICA	PROGRAM DEVE	298,578.	EFT OR WIRE			
(14)			SOUTH ASIA	SUPPORT ENVI	13,467.	EFT OR WIRE			
(15)			SOUTH ASIA	PROGRAM DEVE	289,383.	EFT OR WIRE			
(16)			SUB-SAHARAN AFRICA	PROGRAM DEVE	155,231.	EFT OR WIRE			

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exen	mpt	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	▶ _	152.
2	Enter total number of other organizations or optities		

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **3**

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)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Page 4 Schedule F (Form 990) 2014

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	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 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)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 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.

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 Part I Questions Regarding Compensation Employer identification number 52-1257057

ıaı	Questions regarding compensation			
4-	Charly the appropriate havean if the appropriation provided any of the following to as for a paragraphic form		Yes	No
та	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	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 in 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		X
С	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.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
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) 2014

WORLD RESOURCES INSTITUTE 52-1257057

Schedule J (Form 990) 2014

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

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

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

		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
ANDREW STEER	(i)	365,525.	(8,589.	13,000.	0	387,114.	0
1 PRESIDENT & CEO	(ii)	0	(0	O	0	0	0
MANISH BAPNA	(i)	262,727.	6,000.	1,207.	20,320.	31,761.	322,015.	0
2 EXEC VP/MANAGING DIR	(ii)	0	(0	O	0	0	0
STEVEN BARKER	(i)	226,018.	8,000.	2,147.	18,081.	23,466.	277,712.	0
3 CFO, VP FINANCE ADMINISTRATION	(ii)	0	(0	O	0	0	0
ELIZABETH COOK	(i)	215,406.	9,000.	1,090.	17,232.	12,104.	254,832.	0
4 VP FOR INSTITUTIONAL	(ii)	0	(0	O	0	0	0
JANET RANGANATHAN	(i)	212,039.	6,000.	1,070.	16,963.	1,794.	237,866.	0
5 VP FOR SCIENCE	(ii)	0	(0	O	0	0	0
JENNIFER MORGAN	(i)	199,898.	5,000.	651.	15,951.	7,518.	229,018.	0
6 CLIMATE, ENERGY & POLLUTION	(ii)	0	(0	O	0	0	0
ARTHUR DROE	(i)	140,304.	3,500.	1,235.	11,224.	28,801.	185,064.	0
7 CONTROLLER	(ii)	0	(0	O	0	0	0
PETER VEIT	(i)	166,927.	15,753.	1,516.	13,354.	11,764.	209,314.	0
8 DIR. FOR INSTITUTIONS & GOV.	(ii)	0	(0	0	0	0	0
CRAIG HANSON	(i)	179,088.	8,844.	383.	14,327.	24,342.	226,984.	0
9 DIR. PEOPLE AND ECOSYSTEMS	(ii)	0	(0	O	0	0	0
CLAYTON LANE	(i)	166,070.	11,000.	17,814.	13,246.	12,298.	220,428.	0
10 ^{COO} FOR EMBARQ	(ii)	0	(0	O	0	0	0
HOLGER DALKMAN	(i)	173,890.	18,000.	370.	11,322.	15,398.	218,980.	0
11 ^{DIRECTOR EMBARQ}	(ii)	0	(0	0	0	0	0
NIGEL SIZER	(i)	170,240.	16,800.	526.	12,841.	28,801.	229,208.	0
12DIRECTOR, GLOBAL FOREST	(ii)	0	(0	0	0	0	0
PANKAJ BHATIA	(i)	183,943.	7,568.	572.	14,715.	22,766.	229,564.	0
13 ^{DIR. GHG PROTOCOL}	(ii)	0	(0	0	0	0	0
ROBERT WINTERBOTTOM	(i)	133,869.	500.	1,782.	10,356.	28,040.	174,547.	0
14 ^{DIRECTOR} ECOSYSTEM	(ii)	0	(0	0	0	0	0
CHRISTINA DECONCINI	(i)	162,164.	(784.	12,973.	2,315.	178,236.	0
15 ^{DIRECTOR, LEGISLATIVE} AFFAIRS	(ii)	0	(0	0	0	0	0
MARTHA ATHENA BALLESTER	(i)	166,383.	1,000.	475.	12,190.	30,442.	210,490.	0
16 ^{OBJECTIVE DIRECTOR II}	(ii)	0	(0	0	0	0	0

Schedule J (Form 990) 2014

WORLD RESOURCES INSTITUTE 52-1257057

Schedule J (Form 990) 2014

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.

WRI

Schedule J (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2014

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.

Employer identification number

52-1257057

Name of the organization
WORLD RESOURCES INSTITUTE

ORGANIZATION'S MISSION

FROM 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

SOLUTIONS THAT MITIGATE CLIMATE CHANGE ANDHELP COMMUNITIES ADAPT TO ITS

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

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 PROVIDES A PLATFORM FOR STAKEHOLDERS TO
EXPLORE, UNDERSTAND AND COMMUNICATE CLIMATE AND EMISSIONS DATA. AND 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

ENERGY PROGRAM: 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
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

Name of the organization

WORLD RESOURCES INSTITUTE

52-1257057

STAKEHOLDERS, INCLUDING REGULATORS, UTILITIES, BUSINESSES, GOVERNMENTS, AND CIVIL SOCIETY.

PROGRAM SERVICE ACTIVITY 3

FORM 990, PART III, LINE 4C

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.

AND 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. OURGLOBAL RESTORATION INITIATIVE INITIATIVE

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. AND WE 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
OUALITY 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. AND WE IDENTIFY SOLUTIONS-SUCH AS RESTORING ECOSYSTEM SERVICES-TO ALLEVIATE STRESSES ON THE WORLD'S WATER SUPPLIES.

FORM 990, PART III, LINE 4D

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. AND WE PARTNER WITH BUSINESSES, GOVERNMENTS, AND CIVIL SOCIETY TO SCALE OUR SUCCESSFUL PILOT PROJECTS GLOBALLY.

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

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.

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

WRI

Schedule O (Form 990 or 990-EZ) 2014 Page **2**

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

OPTIONS.

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.

OUR GOVERNANCE CENTER WORKS TO EMPOWER PEOPLE AND SUPPORT INSTITUTIONS TO FOSTER SOCIALLY EQUITABLE AND ENVIRONMENTALLY SOUND DECISION-MAKING.

OTHER PROGRAM SERVICE ACTIVITIES

- 1. SPECIAL PROJECTS
- 2. COMMUNICATIONS

PROGRAM DESCRIPTION	GRANTS	EXPENSES
WRI ROSS CENTER FOR SUSTAINABLE CITIES	\$6,644,947	\$16,862,448
BUSINESS, ECONOMICS, FINANCE AND	\$38,870	\$7,042,726
GOVERNANCE CENTERS		
SPECIAL PROJECTS	\$4,023,611	\$10,009,303
COMMUNICATIONS	\$0	\$1,810,776
TOTAL	\$10,707,428	\$35,725,253

FORM 990, PART VI, LINE 11A

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. MEETING. DRAFT IS AVAILABLE BEFORE A BOARD MEETING, IT IS ALSO GIVEN OUT AT THE MEETING. MEETING. MEETING. 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 WRI DOES 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 BRINGS IN INDEPENDENT CONSULTANTS PERIODICALLY TO DO 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 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.

Schedule O (Form 990 or 990-EZ) 2014 Page **2**

Name of the organization

WORLD RESOURCES INSTITUTE

52-1257057

ATTACHMENT 1

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

CHINA

INDIA

BELGIUM

UNITED KINGDOM

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,

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

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
APA TEN G LLC 750 FIRST STREET NE, SUITE 250 WASHINGTON, DC 20002	RENT	2,701,606.
OFFICE IMAGES 7650 STANDISH PL, SUITE 109 ROCKVILLE, MD 20855	CONSTRUCTION	1,189,076.
BLUE RASTOR, LLC 2200 WILSON BLVD, SUITE 210 ARLINGTON, VA 22201	WEBSITE DEVELOPMENT	760,893.
MINDSHIFT TECHNOLOGIES 307 WAVERLEY OAKS ROAD WALTHAM, MA 02452	IT SUPPORT	678,215.
MICROSERVE CONSULTING	IT SOFTWARE	433,801.

Schedule O (Form 990 or 990-EZ) 2014 Page **2**

Name of the organization WORLD RESOURCES INSTITUTE Employer identification number

52-1257057

ATTACHMENT 3 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

401 PROFESSIONAL DRIVE, SUITE 120 GAITHERSBURG, MD 20879

FORM 990, PART IX - OTHER EXPENSES DESCRIPTION TELEPHONE AND CABLES COMMUNICATION LIBRARY & INFORMATION SERVICES INDIRECT SALARIES			ATTACHMENT 4	
FORM 990, PART IX - OTHER EXPENSES				
DESCRIPTION	(A) TOTAL EXPENSES	(B) PROGRAM SERVICE EXP.		(D) FUNDRAISING EXPENSES
TELEPHONE AND CABLES	376,683.	362,252.		14,431.
COMMUNICATION	1,961,847.	1,957,027.	720.	4,100.
LIBRARY & INFORMATION SERVICES	194,046.	186,612.		7,434.
INDIRECT SALARIES	1,311,718.	1,261,464.		50,254.
SUBGRANT POOL SALARIES	663,566.	663,566.		
OTHER INDIRECT	160,076.	153,943.		6,133.
SUBGRANT POOL BENEFIT	282,693.	282,693.		
SUBGRANT POOL OTHER COSTS	133,564.	133,564.		
INDIRECT BENEFITS	557,820.	536,449.		21,371.
SUBGRANTS	20,942,661.	20,942,661.		
TOTALS	26,584,674.	26,480,231.	720.	103,723.

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

20 14

Open to Public Inspection

Name of the organization	Employer identification number
WORLD RESOURCES INSTITUTE	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
2)					
3)					
4)					
i)					
5)					
art II Identification of Related Tax-Exempt Organizations Compone or more related tax-exempt organizations during the tax	ete if the organization ans year.	 swered "Yes" on Fo	orm 990, Part I\	/, line 34 because	it had

(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	cont	(g) 512(b)(13) trolled tity?
						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)							
(3)							
(V)							
(4)							
(5)							
(6)							
(0)							
(7)							

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

Schedule R (Form 990) 2014

JSA 4E1307 1.000 Schedule R (Form 990) 2014

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	g Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	re of total Share of end-of-		e of total Share of end-of-		h) portionate ations?	ortionate Code V-UBI		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 foreigr country)		(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	(i) Section 512(b)(control entity	on (13) Iled /?
								Yes N	lo
(1) WRI - ENVIRON. MAN. CONSULTANCY CO, LTD.									
NO 6B CHAOWAI STREET 100020 BEIJING, CH	FUNCTION. SUPPORT	CH	WRI	C CORP	0	С)	Х	
(2)									
<u>(3)</u>									
									_
(4)									
(5)									
(6)									
(7)									_
	7								

JSA

4E1308 1.000

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014

Schedule R	(Form 990) 2014					Pag	٠,
Part V	Transactions With Related Organizations Complete if the organization answered "Ye	s" on Form 990, Par	t IV, line 34, 35b, or 36.				
Note. C	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				١	es l	٧o
1 Du	ring the tax year, did the organization engage in any of the following transactions with one or more	related organizations lis	sted in Parts II-IV?				
a Re	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			[1a		Χ
b Gif	t, grant, or capital contribution to related organization(s)				1b	Х	
c Gif	t, grant, or capital contribution from related organization(s)			[1c		Х
d Lo	ans or loan guarantees to or for related organization(s)				1d		X
e Lo	ans or loan guarantees by related organization(s)			[1e		X
f Div	vidends from related organization(s).				1f		
g Sa	le of assets to related organization(s)				1g		X
h Pu	rchase of assets from related organization(s)				1h		X
i Ex	change of assets with related organization(s)				1i		X
j Le	ase of facilities, equipment, or other assets to related organization(s)				1j		Х
k Le	ase of facilities, equipment, or other assets from related organization(s)				1k		Х
I Pe	rformance of services or membership or fundraising solicitations for related organization(s)				11		X
m Pe	rformance of services or membership or fundraising solicitations by related organization(s)				1m		X
n Sh	aring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		X
o Sh	aring of paid employees with related organization(s)				10		X
p Re	imbursement paid to related organization(s) for expenses				1p	Х	
q Re	imbursement paid by related organization(s) for expenses				1q		X
r Ot	her transfer of cash or property to related organization(s)				1r		X
s Ot	her transfer of cash or property from related organization(s).				1s		X
2 If t	he answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including cov	ered relationships and trans	action thres		. '	_
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	Method o	(d)	mining	1
(1) WE	RI - ENVIRON MAN. CONSULTANCY CO. LTD.	В	3,000,030.	CASH			
(2)							
(3)							
(4)							

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(5)

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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 partners section 501(c)(3) organizations?		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partners section 501(c)(3)		Are all partner section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	Dispro	(h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	(j) eral or aging tner?	(k) Percentage ownership
				sections 512-514)		No			Yes	No	(F01111 1065)	Yes	No																													
(1)																																										
(2)																																										
(3)																																										
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Supplemental Information Part VII

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