

**Return of Organization Exempt From Income Tax**

**2009**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2009 calendar year, or tax year beginning** 10/01, 2009, and ending 09/30, 2010

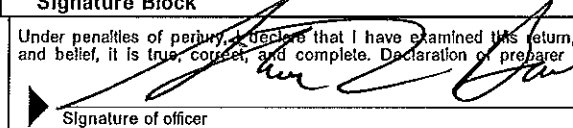
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C Name of organization</b> WORLD RESOURCES INSTITUTE Doing Business As		<b>D Employer identification number</b> 52-1257057
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 10 G STREET, NE		<b>E Telephone number</b> (202) 729-7600
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20002		<b>G Gross receipts \$</b> 57,828,380.
		<b>F Name and address of principal officer:</b> JONATHAN LASH 10 G STREET, NE WASHINGTON, DC 20002		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see Instructions)
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>J Website:</b> ▶ WWW.WRI.ORG		
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L Year of formation:</b> 1982		<b>M State of legal domicile:</b> DE


**Part I Summary**

<b>Activities &amp; Governance</b>	1	Briefly describe the organization's mission or most significant activities: 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.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	31
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30
	5	Total number of employees (Part V, line 2a)	5	204
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h)	Prior Year 30,206,391.	Current Year 38,823,653.
	9	Program service revenue (Part VIII, line 2g)	4,528.	0.
	10	Investment income (Part VIII, column (A), lines 4 and 5)	2,421,541.	1,479,871.
	11	Other revenue (Part VIII, column (A), lines 6, 7, 8, 9, 10, and 11e)	-23,796.	-431,892.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	27,765,582.	39,871,632.
	<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,022,782.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15,022,179.	18,382,341.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses, Part IX, column (D), line 25 ▶	1,909,093.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	8,057,158.	10,668,143.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	28,102,119.	37,145,082.
19	Revenue less expenses. Subtract line 18 from line 12	-336,537.	2,726,550.	
<b>Net Assets or Fund Balances</b>	20	Total assets (Part X, line 16)	Beginning of Year 53,223,660.	End of Year 57,805,357.
	21	Total liabilities (Part X, line 26)	3,795,121.	4,370,307.
	22	Net assets or fund balances. Subtract line 21 from line 20	49,428,539.	53,435,050.

**Part II Signature Block**

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

**Sign Here**  **Steven L. Barker** | **2/15/2011**  
 Signature of officer Date  
**Chief Financial Officer and Vice President of Admin.**  
 Type or print name and title

**Paid Preparer's Use Only**  
 Preparer's signature  Date **2/10/11** Check if self-employed   
 Preparer's identifying number (see instructions) **PO1281516**  
 Firm's name (or yours if self-employed), address, and ZIP + 4 **GRANT THORNTON LLP** EIN ▶ **36-6055558**  
**2010 CORPORATE RIDGE, SUITE 400 MCLEAN, VA 22102** Phone no. ▶ **703-847-7500**

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

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.\* Form **990** (2009)

**Part III** Statement of Program Service Accomplishments

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?  Yes  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 7,130,042. including grants of \$ 497,683. ) (Revenue \$ )  
SEE SCHEDULE O

4b (Code: ) (Expenses \$ 5,365,946. including grants of \$ 2,131,705. ) (Revenue \$ )  
SEE SCHEDULE O

4c (Code: ) (Expenses \$ 3,169,694. including grants of \$ 1,730,680. ) (Revenue \$ )  
SEE SCHEDULE O

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ 15,806,217. including grants of \$ 3,734,530. ) (Revenue \$ )

4e Total program service expenses ▶ 31,471,899.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20 contain various questions about organizational activities and reporting requirements, with 'X' marks in the Yes or No columns.

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

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, sub-column (1a-12b), Yes, and No. Contains questions 1a through 12b regarding IRS filings and tax compliance.

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (31), 1b Enter the number of voting members that are independent (30), 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X), 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (X), 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X), 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X), 6 Does the organization have members or stockholders? (X), 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X), 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X), 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X), b Each committee with authority to act on behalf of the governing body? (X), 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X), 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? (X), 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X), 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990., 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (X), 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X), 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (X), 13 Does the organization have a written whistleblower policy? (X), 14 Does the organization have a written document retention and destruction policy? (X), 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X), b Other officers or key employees of the organization (X), 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X), 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
[X] Own website [ ] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ARTHUR K. DROE 10 G STREET, NE, WASHINGTON, DC 20002
202-729-7679

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JONATHAN LASH PRESIDENT	37.50	X		X			354,564	0	44,084	
JAMES A. HARMON CHAIRMAN	1.00	X		X			0	0	0	
HARRIET BABBITT VICE CHAIR	1.00	X		X			0	0	0	
WILLIAM D. RUCKELSHAUS DIRECTOR	1.00	X					0	0	0	
DR. ALICE F. EMERSON DIRECTOR	1.00	X					0	0	0	
ROBERTO ARTAVIA DIRECTOR	1.00	X					0	0	0	
FRANCES G. BEINECKE DIRECTOR	1.00	X					0	0	0	
AFSANEH BESCHLOSS DIRECTOR	1.00	X					0	0	0	
FERNANDO HENRIQUE CARDOSO DIRECTOR	1.00	X					0	0	0	
ROBIN CHASE DIRECTOR	1.00	X					0	0	0	
CHEN JINING DIRECTOR	1.00	X					0	0	0	
TIFFANY CLAY DIRECTOR	1.00	X					0	0	0	
LESLIE DACH DIRECTOR	1.00	X					0	0	0	
DANIEL L. DOCTOROFF DIRECTOR	1.00	X					0	0	0	
JAMSHYD N. GODREJ DIRECTOR	1.00	X					0	0	0	
THE HONORABLE AL GORE DIRECTOR	1.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KATHLEEN MCGINTY DIRECTOR	1.00	X					0.	0.	0.	
PRESTON R. MILLER, JR. DIRECTOR	1.00	X					0.	0.	0.	
DOUGLAS R. OBERHELMAN DIRECTOR	1.00	X					0.	0.	0.	
DR. NGOZI OKONJO-IWEALA DIRECTOR	1.00	X					0.	0.	0.	
GORAN PERSSON DIRECTOR	1.00	X					0.	0.	0.	
MICHAEL POLSKY DIRECTOR	1.00	X					0.	0.	0.	
THEODORE ROOSEVELT IV DIRECTOR	1.00	X					0.	0.	0.	
STEPHEN M. ROSS DIRECTOR	1.00	X					0.	0.	0.	
ALISON SANDER DIRECTOR	1.00	X					0.	0.	0.	
JAMES GUSTAVE SPETH DIRECTOR	1.00	X					0.	0.	0.	
LEE M. THOMAS DIRECTOR	1.00	X					0.	0.	0.	
TODD S. THOMSON DIRECTOR	1.00	X					0.	0.	0.	
SUSAN TIERNEY DIRECTOR	1.00	X					0.	0.	0.	
<b>1b Total</b> CONTINUED AT SCHEDULE J-2							2,431,055.	0.	439,479.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **20**

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

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

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

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 **2**



**Part VIII Statement of Revenue**

52-1257057

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . . . .	1a			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c	849,250.		
	d	Related organizations . . . . .	1d			
	e	Government grants (contributions) . .	1e	4,397,908.		
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	33,576,495.		
	g	Noncash contributions included in lines 1a-1f: \$				
	h	<b>Total. Add lines 1a-1f . . . . .</b>		<b>38,823,653.</b>		
Program Service Revenue			<b>Business Code</b>			
	2a					
	b					
	c					
	d					
	e					
	f	All other program service revenue . . . . .				
g	<b>Total. Add lines 2a-2f . . . . .</b>		<b>0.</b>			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		505,839.		505,839.
	4	Income from investment of tax-exempt bond proceeds . . .		0.		
	5	Royalties . . . . .		7,277.		7,277.
			(i) Real	(ii) Personal		
	6a	Gross Rents . . . . .				
	b	Less: rental expenses . . . . .				
	c	Rental income or (loss) . . . . .				
	d	Net rental income or (loss) . . . . .		0.		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
			18,506,382.	0.		
	b	Less: cost or other basis and sales expenses . . . . .		70,552.		
	c	Gain or (loss) . . . . .	1,044,584.	-70,552.		
	d	Net gain or (loss) . . . . .		974,032.		974,032.
	8a	Gross income from fundraising events (not including \$ 849,250. of contributions reported on line 1c). See Part IV, line 18 . . . . .	a	52,200.		
	b	Less: direct expenses . . . . .	b	424,398.		
	c	Net income or (loss) from fundraising events . . . . .		-372,198.		-372,198.
	9a	Gross income from gaming activities. See Part IV, line 19 . . . . .	a			
	b	Less: direct expenses . . . . .	b			
	c	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				
c	Net income or (loss) from sales of inventory . . . . .		0.			
Miscellaneous Revenue			<b>Business Code</b>			
11a	MISC. REVENUE		900099	-66,971.		-66,971.
b						
c						
d	All other revenue . . . . .					
e	<b>Total. Add lines 11a-11d . . . . .</b>			-66,971.		
12	<b>Total Revenue. See instructions . . . . .</b>			<b>39,871,632.</b>		<b>1,047,979.</b>

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	1,219,142.	1,219,142.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	376,567.	376,567.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	6,498,889.	6,498,889.		
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	2,431,055.	1,234,271.	854,134.	342,650.
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 . . . . .	12,357,510.	10,439,014.	1,041,865.	876,631.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	849,764.	668,210.	107,909.	73,645.
9 Other employee benefits . . . . .	1,775,860.	1,398,708.	225,921.	151,231.
10 Payroll taxes . . . . .	968,152.	764,953.	121,370.	81,829.
11 Fees for services (non-employees):				
a Management . . . . .	0.			
b Legal . . . . .	0.			
c Accounting . . . . .	0.			
d Lobbying . . . . .	0.			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees . . . . .	193,531.		193,531.	
g Other . . . . .	0.			
12 Advertising and promotion . . . . .	0.			
13 Office expenses . . . . .	332,570.	303,835.		28,735.
14 Information technology . . . . .	0.			
15 Royalties . . . . .	0.			
16 Occupancy . . . . .	2,219,540.	2,027,762.		191,778.
17 Travel . . . . .	2,166,140.	1,747,245.	237,545.	181,350.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0.			
19 Conferences, conventions, and meetings . . . . .	826,537.	707,468.	34,014.	85,055.
20 Interest . . . . .	0.			
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . . . .	447,870.	409,172.		38,698.
23 Insurance . . . . .	0.			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a RESEARCH EXPENSES	1,267,395.	1,248,260.	17,635.	1,500.
b PUBLICATION EXPENSES	1,048,336.	929,993.	31,257.	87,086.
c OTHER DIRECT COST	1,184,815.	229,563.	898,410.	56,842.
d EQUIPMENT RENTAL AND MAIN	823,296.	752,159.		71,137.
e COMMUNICATIONS	369,230.	321,836.	499.	46,895.
f All other expenses	-211,117.	194,852.		-405,969.
25 Total functional expenses. Add lines 1 through 24f	37,145,082.	31,471,899.	3,764,090.	1,909,093.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	2,500.	1	2,500.
	2	Savings and temporary cash investments	2,506,201.	2	2,568,829.
	3	Pledges and grants receivable, net	13,981,372.	3	16,342,077.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	395,492.	9	406,152.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	4,568,633.		
	b	Less: accumulated depreciation	3,401,138.	10c	1,167,495.
	11	Investments - publicly traded securities	35,017,435.	11	37,118,015.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	143,444.	15	200,289.
16	<b>Total assets. Add lines 1 through 15 (must equal line 34)</b>	53,223,660.	16	57,805,357.	
Liabilities	17	Accounts payable and accrued expenses	1,977,027.	17	3,282,046.
	18	Grants payable		18	
	19	Deferred revenue	63,208.	19	825,983.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	1,754,886.	25	262,278.
	26	<b>Total liabilities. Add lines 17 through 25</b>	3,795,121.	26	4,370,307.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	2,552,425.	27	3,136,404.
	28	Temporarily restricted net assets	21,538,348.	28	24,960,880.
	29	Permanently restricted net assets	25,337,766.	29	25,337,766.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	<b>Total net assets or fund balances</b>	49,428,539.	33	53,435,050.	
34	<b>Total liabilities and net assets/fund balances</b>	53,223,660.	34	57,805,357.	

**Part XI** Financial Statements and Reporting

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

Form 990 (2009)

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

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

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

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

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

h Provide the following information about the supported organization(s).

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

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	23,072,927.	23,674,691.	21,994,209.	30,206,391.	38,875,853.	137,824,071.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
4 Total. Add lines 1 through 3. . . . .	23,072,927.	23,674,691.	21,994,209.	30,206,391.	38,875,853.	137,824,071.
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). . . . .						24,985,902.
6 Public support. Subtract line 5 from line 4. . . . .						112,838,169.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4 . . . . .	23,072,927.	23,674,691.	21,994,209.	30,206,391.	38,875,853.	137,824,071.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	322,555.	414,737.	748,305.	129,037.	364,585.	1,979,219.
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	97,797.	8,968.	32,018.	8,800.	-66,971.	80,612.
11 Total support. Add lines 7 through 10 . . . . .						139,883,902.
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	986,351.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . .						<input type="checkbox"/>

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

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	80.67%
15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	15	82.62%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .	<input type="checkbox"/>	

**Part III. Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 . . . . .						
7a 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 . . . . .						
c Add lines 7a and 7b. . . . .						
8 Public support (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6. . . . .						
10a 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 . . . . .						
c 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 IV.) . . . . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . . . . .						

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

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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)). . . . .	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15. . . . .	16	%

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

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶

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

**Part IV** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

ATTACHMENT 1

## SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
OTHER REVENUE	97,797.	8,968.	32,018.	8,800.	-66,971.	80,612.
<b>TOTALS</b>	<u>97,797.</u>	<u>8,968.</u>	<u>32,018.</u>	<u>8,800.</u>	<u>-66,971.</u>	<u>80,612.</u>



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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2009**

Name of the organization  
WORLD RESOURCES INSTITUTE

Employer identification number  
52-1257057

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(<sup>3</sup>) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

9E1251 2.000

90340H 649C 2/10/2011 7:18:35 AM

WRI

PAGE 19

**Political Campaign and Lobbying Activities**

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

▶ Complete if the organization is described below.

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

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>WORLD RESOURCES INSTITUTE</b>	Employer identification number <b>52-1257057</b>
--	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ \_\_\_\_\_
- 3 Volunteer hours \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred 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.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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-.

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check  if the filing organization belongs to an affiliated group.  
 B Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .														
b	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	228,728.													
c	Total lobbying expenditures (add lines 1a and 1b) . . . . .	228,728.													
d	Other exempt purpose expenditures . . . . .	31,243,171.													
e	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	31,471,899.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		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.		
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.														
g	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .														
i	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .														
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? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No												

**4-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 Instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount		1,000,000.	44,351.	1,000,000.	2,044,351.
b Lobbying ceiling amount (150% of line 2a, column (e))					3,066,527.
c Total lobbying expenditures		104,000.	221,754.	228,728.	554,482.
d Grassroots nontaxable amount		250,000.	11,088.	250,000.	511,088.
e Grassroots ceiling amount (150% of line 2d, column (e))					766,632.
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation... 2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

Table with 3 columns: Question, Line Number, Amount. Rows include: 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 11. Also, complete this part for any additional information.

Series of horizontal dashed lines for providing supplemental information.

**Part IV** Supplemental Information (continued)

Area with horizontal dashed lines for supplemental information.

Supplemental Financial Statements

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990. See separate instructions.

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for totals, 5-6 for Yes/No questions.

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

Table with 3 columns: Line number, Description, and Held at the End of the Year (2a-2d). Rows 1-8 for various questions and data points.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance . . . . .	30,039,015.	32,563,020.			
b Contributions . . . . .					
c Net investment earnings, gains, and losses . . . . .	2,566,301.	-654,685.			
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .	1,379,407.	1,869,320.			
f Administrative expenses . . . . .					
g End of year balance . . . . .	31,225,909.	30,039,015.			

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

- a Board designated or quasi-endowment ▶ 8.4100 %
- b Permanent endowment ▶ 81.1400 %
- c Term endowment ▶ 10.4400 %

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

- (i) unrelated organizations . . . . .
- (ii) related organizations . . . . .

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

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

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

Description of Investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold Improvements . . . . .		1,033,171	837,804	195,367.
d Equipment . . . . .		2,552,179	1,762,178	790,001.
e Other . . . . .		983,283	801,156	182,127.
<b>Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)</b> . . . . . ▶				<b>1,167,495.</b>

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives .....		
Closely-held equity interests .....		
Other .....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

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

(a) Description	(b) Book value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

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

1.	(a) Description of liability	(b) Amount	
	Federal income taxes		
	RENT ABATEMENT	206,293.	
	OBLIGATION UNDER CAPITAL LEASE	35,705.	
	FUNDS HELD FOR OTHERS	20,280.	
	<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	262,278.	

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



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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

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

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

**Part XIV Supplemental Information**

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

SEE PAGE 5

**Part XIV** Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

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

SCHEDULE D, PART X, LINE 2

FIN 48 FOOTNOTE

EFFECTIVE FOR THE YEAR ENDED SEPTEMBER 30, 2010, THE INSTITUTE ADOPTED NEW GUIDANCE THAT CREATES A SINGLE MODEL TO ADDRESS UNCERTAINTY IN TAX POSITIONS AND CLARIFIES THE ACCOUNTING FOR INCOME TAXES BY PRESCRIBING THE MINIMUM RECOGNITION THRESHOLD A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN ITS 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 IMPACT OF THE ADOPTION OF THIS GUIDANCE DID NOT HAVE A MATERIAL EFFECT ON THE FINANCIAL STATEMENTS OF THE INSTITUTE. PRIOR TO THE ADOPTION OF THIS GUIDANCE, THE DETERMINATION OF WHEN TO RECORD A LIABILITY FOR A TAX EXPOSURE WAS BASED ON WHETHER A LIABILITY WAS CONSIDERED PROBABLE AND REASONABLY ESTIMABLE IN ACCORDANCE WITH GUIDANCE CONCERNING RECORDING CONTINGENCIES.

**Schedule F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

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

▶ Attach to Form 990. ▶ See separate instructions.

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

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

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

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

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	REVERSE DEGRADATION	24,231.
CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	SUPPORT ENVIRONMENT	16,000.
EAST ASIA AND THE PACIFIC	1	9	GRANTMAKING	EXPAND ECONOMIC OPP.	234,850.
EAST ASIA AND THE PACIFIC			GRANTMAKING	PROTECT CLIMATE	5,000.
EAST ASIA AND THE PACIFIC			GRANTMAKING	REVERSE DEGRADATION	162,800.
EAST ASIA AND THE PACIFIC			GRANTMAKING	SUPPORT ENVIRONMENT	239,938.
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	PROTECT CLIMATE	110,112.
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	REVERSE DEGRADATION	16,280.
EUROPE			GRANTMAKING	PROTECT CLIMATE	119,379.
EUROPE			GRANTMAKING	REVERSE DEGRADATION	150,000.
EUROPE			GRANTMAKING	SUPPORT ENVIRONMENT	46,400.
EUROPE			PROGRAM SERVICES	EXPAND ECONOMIC OPP.	2,500.
EUROPE			PROGRAM SERVICES	PROGRAM DEVELOPMENT	9,000.
EUROPE			PROGRAM SERVICES	PROMOTE ENVIRONMENT	378,968.
EUROPE			PROGRAM SERVICES	PROTECT CLIMATE	19,034.
EUROPE			PROGRAM SERVICES	REVERSE DEGRADATION	81,999.
EUROPE			PROGRAM SERVICES	SUPPORT ENVIRONMENT	10,000.
<b>Totals</b>					

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

Schedule F (Form 990) 2009

JSA  
9E1274 2.000

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . .  Use Schedule F-1 (Form 990) if additional space is needed.

(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)
		CENT. AMERICA/CARIBBEAN	REVERSE DEGRADATION	24,231.	EFT OR WIRE			
		EAST ASIA/PACIFIC	EXPAND ECONOMIC OPP	234,850.	EFT OR WIRE			
		EAST ASIA/PACIFIC	PROMOTE CLIMATE	17,000.	EFT OR WIRE			
		EAST ASIA/PACIFIC	REVERSE DEGRADATION	162,800.	EFT OR WIRE			
		EAST ASIA/PACIFIC	SUPPORT ENVIRONMENT	229,938.	EFT OR WIRE			
		EUROPE/ICELAND/GREENLAND	PROMOTE ENVIRONMENT	229,471.	EFT OR WIRE			
		EUROPE/ICELAND/GREENLAND	PROJECT CLIMATE	136,984.	EFT OR WIRE			
		EUROPE/ICELAND/GREENLAND	REVERSE DEGRADATION	152,100.	EFT OR WIRE			
		EUROPE/ICELAND/GREENLAND	SUPPORT ENVIRONMENT	56,400.	EFT OR WIRE			
		NORTH AMERICA	PROMOTE ENVIRONMENT	1,198,146.	EFT OR WIRE			
		NORTH AMERICA	REVERSE DEGRADATION	20,000.	EFT OR WIRE			
		NORTH AMERICA	SUPPORT ENVIRONMENT	25,400.	EFT OR WIRE			
		SOUTH AMERICA	EXPAND ECONOMIC OPP	47,500.	EFT OR WIRE			
		SOUTH AMERICA	PROMOTE ENVIRONMENT	442,480.	EFT OR WIRE			
		SOUTH AMERICA	SUPPORT ENVIRONMENT	34,000.	EFT OR WIRE			
		SOUTH ASIA	SUPPORT ENVIRONMENT	162,815.	EFT OR WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . **64**

3 Enter total number of other organizations or entities . . . . . **79**

**Part III** Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Use Schedule F-1 (Form 990) 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)
RESEARCH	EUROPE/ICELAND/GREENLAND	1	705.	CHECK			
RESEARCH	NORTH AMERICA	2	7,677.	CHECK			
RESEARCH	EAST ASIA/PACIFIC	8	114,392.	EFT OR WIRE			
RESEARCH	EUROPE/ICELAND/GREENLAND	15	239,620.	EFT OR WIRE			
RESEARCH	NORTH AMERICA	3	92,497.	EFT OR WIRE			
RESEARCH	SOUTH AMERICA	8	183,482.	EFT OR WIRE			
RESEARCH	SOUTH ASIA	23	282,258.	EFT OR WIRE			
RESEARCH	SUB-SAHARAN AFRICA	9	43,774.	EFT OR WIRE			

**Part IV** Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

SCHEDULE F, PART I, QUESTION 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.

Continuation Sheet for Schedule F (Form 990)

2009

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 to list additional information for  
Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III.  
▶ See instructions for Schedule F (Form 990).

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA			GRANTMAKING	PROMOTE ENVIRONMENT	1,198,146.
NORTH AMERICA			GRANTMAKING	SUPPORT ENVIRONMENT	25,400.
NORTH AMERICA			PROGRAM SERVICES	EXPAND ECONOMIC OPP.	7,177.
NORTH AMERICA			PROGRAM SERVICES	PROGRAM DEVELOPMENT	2,000.
NORTH AMERICA			PROGRAM SERVICES	REVERSE DEGRADATION	110,997.
SOUTH AMERICA			GRANTMAKING	EXPAND ECONOMIC OPP.	47,500.
SOUTH AMERICA			GRANTMAKING	PROMOTE ENVIRONMENT	430,480.
SOUTH AMERICA			GRANTMAKING	REVERSE DEGRADATION	13,781.
SOUTH AMERICA			GRANTMAKING	SUPPORT ENVIRONMENT	252,000.
SOUTH AMERICA			PROGRAM SERVICES	PROGRAM DEVELOPMENT	3,000.
SOUTH AMERICA			PROGRAM SERVICES	PROMOTE ENVIRONMENT	190,482.
SOUTH AMERICA			PROGRAM SERVICES	PROTECT CLIMATE	36,000.
SOUTH ASIA			GRANTMAKING	EXPAND ECONOMIC OPP.	40,000.
SOUTH ASIA			GRANTMAKING	SUPPORT ENVIRONMENT	162,815.
SOUTH ASIA			PROGRAM SERVICES	EXPAND ECONOMIC OPP.	45,551.
SOUTH ASIA			PROGRAM SERVICES	PROGRAM DEVELOPMENT	4,500.
SOUTH ASIA			PROGRAM SERVICES	PROMOTE ENVIRONMENT	218,164.
SOUTH ASIA			PROGRAM SERVICES	SUPPORT ENVIRONMENT	20,370.
SUB-SAHARAN AFRICA			GRANTMAKING	PROGRAM DEVELOPMENT	13,000.
SUB-SAHARAN AFRICA			GRANTMAKING	REVERSE DEGRADATION	1,137,857.
SUB-SAHARAN AFRICA			GRANTMAKING	SUPPORT ENVIRONMENT	867,904.
SUB-SAHARAN AFRICA			PROGRAM SERVICES	REVERSE DEGRADATION	25,170.
<b>Totals</b>					

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

Schedule F-1 (Form 990) 2009

Continuation Sheet for Schedule F (Form 990)

2009

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 to list additional information for  
Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III.  
▶ See instructions for Schedule F (Form 990).

Name of the organization  
WORLD RESOURCES INSTITUTE

Employer identification number  
52-1257057

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA			PROGRAM SERVICES	SUPPORT ENVIRONMENT	20,104.
Totals . . . . . ▶	1	9			6,498,889.

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990. Schedule F-1 (Form 990) 2009









**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events	
		NY DINNER (event type)	(event type)	0 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts . . . . .	901,450.		901,450.	
	2	Less: Charitable contributions . . . . .	849,250.		849,250.	
	3	Gross income (line 1 minus line 2) . . . . .	52,200.		52,200.	
Direct Expenses	4	Cash prizes . . . . .				
	5	Noncash prizes . . . . .				
	6	Rent/facility costs . . . . .				
	7	Food and beverages . . . . .				
	8	Entertainment . . . . .				
	9	Other direct expenses . . . . .	424,398.		424,398.	
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . .				( 424,398.)
	11	Net income summary. Combine line 3, column (d), and line 10 . . . . .				-372,198.

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

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

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a	
b If "No," explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," explain: _____		
11 Does the organization operate gaming activities with nonmembers? . . . . .	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	12	

		Yes	No
<b>13</b>	Indicate the percentage of gaming activity operated in:		
a	The organization's facility . . . . . <b>13a</b> %		
b	An outside facility . . . . . <b>13b</b> %		
<b>14</b>	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ▶ _____		
	Address ▶ _____		
<b>15a</b>	Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . <b>15a</b>		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____		
c	If "Yes," enter name and address of the third party:		
	Name ▶ _____		
	Address ▶ _____		
<b>16</b>	Gaming manager information:		
	Name ▶ _____		
	Gaming manager compensation ▶ \$ _____		
	Description of services provided ▶ _____		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
<b>17</b>	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . <b>17a</b>		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____		

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047  
**2009**  
**Open to Public Inspection**

Name of the organization  
**WORLD RESOURCES INSTITUTE**

Employer identification number  
**52-1257057**

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

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	ENVIRONMENTAL INVESTIGATION AGENCY PO BOX 53343 WASHINGTON, DC 20009	52-1654284	501 (C) (3)	547,454.				REVERSE DEGRADATION OF ECOSYSTEMS
	ATLAS SERVICE CORPS, INC. 1133 19TH STREET, NW, WASHINGTON, DC 20036	76-0834735		14,750.				RESEARCH AGREEMENT
	BERNOTH AND WILLIAMSON 13 CAMPBELLTON CIRCLE PRINCETON, NJ 08540	20-2641394		25,000.				RESEARCH AGREEMENT
	CONSENSUS BUILDING INSTTT. 238 MAIN STREET CAMBRIDGE, MA 02142	04-3186073	501 (C) (3)	26,885.				PROGRAM DEVELOPMENT
	CREATIVE CHANGE 229 MILES STREET YPSILANTI, MI 48198-4017	28-0006486	501 (C) (3)	10,000.				REVERSE DEGRADATION OF ECOSYSTEMS
	DOGWOOD ALLIANCE PO BOX 7645 ASHEVILLE, NC 28802	56-2139120	501 (C) (3)	48,235.				REVERSE DEGRADATION OF ECOSYSTEMS
	DRIVE CURRENT, INC. 8305 VICKERS STREET SAN DIEGO, CA 92111	26-0514720		23,625.				RESEARCH AGREEMENT
	E COMPANY 383 FRANKLIN STREET BLOOMFIELD, NJ 07003	22-3319460	501 (C) (3)	70,500.				EXPAND ECONOMIC OPPORTUNITY
	FORESTER RESEARCH, INC. DEPT. CH 10334 PALATINE, IL 60055-0334	04-2797789		10,000.				RESEARCH AGREEMENT
	INTERNATIONAL SUSTAINABLE RESEARCH CENTER RESEARCH CENTER (ISSRC) LA HABRA, CA 90631	57-1164239	501 (C) (3)	28,580.				PROMOTE ENVTL. TRANSPORT SOLUTIONS
	SCIENCES, LLC 350 NORTH AVENUE ANNE ARBOR, MI 48104	38-3395674	501 (C) (3)	90,000.				EXPAND ECONOMIC OPPORTUNITY
	KELLER & PABER 1707 OAK STREET SAN FRANCISCO, CA 94117	26-0853924		9,960.				RESEARCH AGREEMENT

- 2 Enter total number of section 501(c)(3) and government organizations **13**
- 3 Enter total number of other organizations **26**
- For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
RESEARCH AGREEMENT	38	376,567.			

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

SCHEDULE I, PART IV

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 NON-TAX EXEMPT PURPOSE AND MISSION. ALL OF THESE

ORGANIZATIONS WERE WORKING ON ISSUES THAT THE ORGANIZATION (WRI) CARE

ABOUT.







**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Name of the organization  
**WORLD RESOURCES INSTITUTE**

Employer identification number  
**52-1257057**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment? **4a**  Yes  No
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**  Yes  No
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**  Yes  No
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization? **5a**  Yes  No
- b** Any related organization? **5b**  Yes  No
- If "Yes" to line 5a or 5b, describe in Part III.

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

- a** The organization? **6a**  Yes  No
- b** Any related organization? **6b**  Yes  No
- 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**  Yes  No

**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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**  Yes  No

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**  Yes  No

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		<input checked="" type="checkbox"/>
<b>4b</b>		<input checked="" type="checkbox"/>
<b>4c</b>		<input checked="" type="checkbox"/>
<b>5a</b>		<input checked="" type="checkbox"/>
<b>5b</b>		<input checked="" type="checkbox"/>
<b>6a</b>		<input checked="" type="checkbox"/>
<b>6b</b>		<input checked="" type="checkbox"/>
<b>7</b>		<input checked="" type="checkbox"/>
<b>8</b>		<input checked="" type="checkbox"/>
<b>9</b>		<input checked="" type="checkbox"/>

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

Schedule J (Form 990) 2009

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.**

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JONATHAN LASH	(i) 353,064	(ii) 1,500	(iii) 0	19,600	24,484	398,648	0
MANISH BAPNA	(i) 188,320	(ii) 0	(iii) 0	9,416	21,434	219,170	0
STEVE BARKER	(i) 185,500	(ii) 0	(iii) 0	14,840	22,121	222,461	0
ROBERT MURPHY	(i) 181,000	(ii) 0	(iii) 0	9,955	24,412	215,367	0
JANET RANGANATHAN	(i) 169,000	(ii) 1,500	(iii) 0	13,520	24,242	208,262	0
ELIZABETH COOK	(i) 171,150	(ii) 9,000	(iii) 0	13,692	16,201	210,043	0
ANN KELE	(i) 176,560	(ii) 0	(iii) 0	14,125	9,247	199,932	0
JENNIFER LAYKE	(i) 142,746	(ii) 16,200	(iii) 0	11,412	15,412	185,770	0
DANIEL TUNSTALL	(i) 160,500	(ii) 2,000	(iii) 0	12,840	13,878	189,218	0
JACOB WERKSMAN	(i) 144,951	(ii) 0	(iii) 0	7,248	15,632	167,831	0
ARTHUR DROE	(i) 122,250	(ii) 3,500	(iii) 0	9,660	20,481	155,891	0
PETER G VEIT	(i) 132,398	(ii) 2,100	(iii) 0	10,592	15,725	160,815	0
PIERRE METHOT	(i) 132,041	(ii) 100	(iii) 0	10,563	24,121	166,825	0
CRAIG HANSON	(i) 135,675	(ii) 0	(iii) 0	10,854	23,772	170,301	0
	(i) 0	(ii) 0	(iii) 0	0	0	0	0





### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.

▶ Attach to Form 990.

**2009**

**Open to Public  
Inspection**

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

ATTACHMENT 2

FORM 990, PART III, LINE 1

ORGANIZATION'S MISSION

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.

FORM 990, PART III, LINE 4A

PROGRAM SERVICES

CLIMATE, ENERGY AND POLLUTION PROGRAM: FOCUSES ON REDUCING THE RISK OF  
CLIMATE CHANGE IN WAYS THAT DRIVE SUSTAINABLE DEVELOPMENT. PROJECTS  
INCLUDE DEVELOPING APPROACHES FOR GLOBAL AGREEMENTS TO REDUCE GREENHOUSE  
GAS EMISSIONS AND ADAPT TO CLIMATE CHANGE; US CLIMATE POLICY EFFORTS AT  
THE LOCAL, STATE AND NATIONAL LEVEL; AND ACTIVE ENGAGEMENT WITH THE  
BUSINESS COMMUNITY. THE PROGRAM DEVELOPS AND MAINTAINS TOOLS AND  
DATABASES, DESIGNS BUSINESS MODELS, AND CONVENES STAKEHOLDER GROUPS TO  
PROVIDE ADVICE TO ALL LEVELS OF GOVERNMENT AND CIVIL SOCIETY.

FORM 990, PART III, LINE 4B

PROGRAM SERVICES

PEOPLE AND ECOSYSTEMS PROGRAM: WORKS TO DEVELOP AND PROMOTE STRATEGIES TO  
REVERSE RAPID DEGRADATION OF ECOSYSTEMS AND ASSURE THEIR CAPACITY TO  
PROVIDE HUMANS WITH NEEDED GOODS AND SERVICES. THESE STRATEGIES  
EMPHASIZE MULTI-SCALE APPROACHES TO MANAGING ECOSYSTEMS, STRESS THE  
IMPORTANCE OF ECOSYSTEM BENEFITS TO PEOPLE, AND RELY ON PARTNERSHIPS TO

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

ATTACHMENT 2 (CONT'D)

CREATE LASTING SOLUTIONS. STAFF WORK IN TWO FOCAL AREAS: (1)  
 MAINSTREAMING ECOSYSTEM SERVICES (THE BENEFITS PEOPLE OBTAIN FROM NATURE)  
 AND (2) FOREST LANDSCAPE INFORMATION. THE FIRST WORKS TOWARD A WORLD IN  
 WHICH GOVERNMENTS AND BUSINESSES VALUE AND INVEST IN ECOSYSTEMS--FORESTS,  
 WETLANDS, CORAL REEFS, ETC.--IN ORDER TO SECURE ECONOMIC GROWTH AND  
 PEOPLE'S WELL BEING. THE FOREST TEAM WORKS TO ENABLE GOVERNMENTS,  
 BUSINESSES, AND CIVIL SOCIETY TO ACT UPON BETTER AND MORE WIDELY SHARED  
 INFORMATION TO STRENGTHEN THE MANAGEMENT OF WORKING FORESTS, REDUCE  
 DEFORESTATION, AND SAFEGUARD PRIMARY FOREST IN FOREST-RICH REGIONS.

FORM 990, PART III, LINE 4C

## PROGRAM SERVICES

INSTITUTIONS AND GOVERNANCE PROGRAM: PROMOTES THE FAIR AND EFFECTIVE  
 MANAGEMENT OF NATURAL RESOURCES AND ENVIRONMENTAL REGULATION,  
 PARTICULARLY IN DEVELOPING COUNTRIES. PROJECTS INCLUDE DEVELOPING  
 INDICATORS NEEDED BY CIVIL SOCIETY TO ASSESS PUBLIC AUTHORITIES  
 COMPLIANCE WITH EMERGING ENVIRONMENTAL GOVERNANCE NORMS; WORKING WITH  
 DEVELOPING COUNTRY PARTNERS ON THE MANAGEMENT OF FOREST AND HYDROCARBON  
 RESOURCES AND REVENUES; AND PROMOTING THE REFORM OF PUBLIC AND PRIVATE  
 INTERNATIONAL FINANCIAL INSTITUTIONS TO BETTER REFLECT THE ENVIRONMENTAL  
 AND SOCIAL PRIORITIES OF THE COMMUNITIES IN WHICH THEY INVEST.

FORM 990, PART III, LINE 4D

## OTHER PROGRAM SERVICES

## EMBARQ PROGRAM:

CATALYZES SOCIALLY, FINANCIALLY, AND ENVIRONMENTALLY SOUND SOLUTIONS TO  
 THE PROBLEMS OF URBAN MOBILITY. WORKING THROUGH PUBLIC-PRIVATE

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

ATTACHMENT 2 (CONT'D)

PARTNERSHIPS WITH POLITICALLY AND FINANCIALLY EMPOWERED DECISION MAKERS IN MAJOR CITIES AROUND THE WORLD, EMBARQ REDUCES THE COST, RISK, TIME, AND COMPLEXITY OF FINDING AND IMPLEMENTING SUSTAINABLE TRANSPORT SOLUTIONS. EMBARQ HAS CREATED CENTERS FOR SUSTAINABLE TRANSPORT IN MEXICO AND BRAZIL WHICH MANAGE ITS DAY TO DAY INTERACTIONS WITH LEADERSHIP OF CITIES IN THOSE COUNTRIES, AND HAS SIGNIFICANT PROJECT ACTIVITIES IN CHINA AND TURKEY. TYPICAL SOLUTIONS WHICH EMBARQ HELPS CITIES ACHIEVE INCLUDE: CLEAN FUELS/CLEAN VEHICLES STRATEGIES; IMPROVED TRANSIT SERVICES SUCH AS BUS RAPID TRANSIT, DEMAND MANAGEMENT AND PROMOTION OF NON-MOTORIZED TRANSPORT. EMBARQ ALSO HELPS FIND AND ARRANGE FINANCING FOR THE SOLUTIONS IT PROPOSES.

## EXTERNAL RELATIONS PROGRAM:

MANAGES THE ORGANIZATION'S EFFORTS TO COMMUNICATE ITS WORK TO DIVERSE AUDIENCES, INCLUDING GOVERNMENTS, CORPORATIONS, AND INTERNATIONAL ORGANIZATIONS TO SUPPORT THE ACCOMPLISHMENT OF THE OBJECTIVES OUTLINED IN PROGRAM PLANS. IN ADDITION, WE SEEK WAYS OF ENHANCING WRI'S OVERALL PROFILE THROUGH CONTINUED ATTENTION TO COMMUNICATION OPPORTUNITIES. WE UTILIZE A WIDE VARIETY OF MECHANISMS TO COMMUNICATE WORLD RESOURCES INSTITUTE'S (WRI'S) WORK APPROPRIATE TO THE GOALS OF EACH PROGRAM; WE ARE CONSTANTLY EXPLORING NEW MEANS OF COMMUNICATING OUR WORK MORE EFFECTIVELY TO KEY AUDIENCES.

## MARKET &amp; ENTERPRISE PROGRAM:

PRODUCES ECONOMICALLY SOUND POLICIES, BOLD VISION, AND PRACTICAL



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

SOLUTIONS IN COLLABORATION WITH THE BUSINESS COMMUNITY. TO CHANNEL THE PRIVATE SECTOR TO INCORPORATE ENVIRONMENTAL AND SOCIAL OPPORTUNITIES INTO CORE BUSINESS STRATEGIES, WE EMPLOY THE FOLLOWING APPROACHES:

CREATE SUSTAINABLE ENTERPRISES: DEMONSTRATE NOT ONLY A NEW WAY OF DOING BUSINESS, BUT ALSO THE POWER OF THE PRIVATE SECTOR TO REDUCE POVERTY AND PROTECT THE ENVIRONMENT. ENABLE ENTREPRENEURS AND CORPORATIONS TO DEVELOP PROFITABLE BUSINESS APPROACHES TO CLIMATE CHANGE, ECOSYSTEM DEGRADATION, AND IMPROVING PEOPLE'S LIVES.

TOOLS AND ANALYSIS: WRI HAS DEVELOPED TOOLS AND DATABASES TO GIVE CORPORATIONS, NGOS, AND ENTREPRENEURS FROM ACROSS THE GLOBE ACCESS TO THE MODELS AND IDEAS THEY NEED FOR SUCCESS.

PROMOTE GREEN INVESTING: CHANGE HOW FINANCIAL MARKETS VALUE COMPANIES BY MAKING THE INCORPORATION OF ENVIRONMENTAL VALUE AND RISK INTO INVESTMENT DECISIONS STANDARD PRACTICE AS A MEANS TO INFLUENCE CORPORATE PERFORMANCE AND STRATEGY.

SPECIAL STUDIES AND INNOVATION PROGRAM:

UNDERTAKES OR MENTORS NEW ACTIVITIES DESIGNED TO FOSTER INNOVATION ACROSS THE INSTITUTE. ACTIVITIES FOCUS ON NEW PROJECTS, OBJECTIVES, AND GEOGRAPHIES RELATED TO OUR STRATEGIC PLAN, AND ON NEW TOOLS AND CAPACITIES IN AREAS SUCH AS MODELING AND COMMUNICATIONS.

FORM 990, PART VI, LINE 11A

FORM 990 REVIEW

THE ORGANIZATION SHARES A COPY OF THE FORM 990 WITH ITS BOARD OF

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

ATTACHMENT 2 (CONT'D)

DIRECTORS BEFORE FILING. 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 AFTER THE BOARD MEETING. IF THE DRAFT IS AVAILABLE BEFORE A BOARD MEETING, IT IS GIVEN OUT AT THE MEETING.

FORM 990, PART VI, LINE 12C

CONFLICT OF INTEREST POLICY

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

FORM 990, PART VI, LINE 15B

COMPENSATION DETERMINATION

THE ORGANIZATION BRINGS IN INDEPENDENT CONSULTANTS PERIODICALLY TO DO A COMPARATIVE REVIEW OF ITS SALARY STRUCTURE. THE MANAGING DIRECTOR SETS PAY INCREASES FOR ALL DEPARTMENT HEADS; THE PRESIDENT DOES THE SAME FOR THE MANAGING DIRECTOR, CFO, AND ALL VP'S; THE BOARD OF DIRECTORS DOES THE SAME FOR THE PRESIDENT. THIS IS DONE ANNUALLY. IT WAS LAST DONE IN 2009.

FORM 990, PART VI, LINE 17

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI.

FORM 990, PART VI, LINE 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

Name of the organization

WORLD RESOURCES INSTITUTE

Employer identification number

52-1257057

ATTACHMENT 2 (CONT'D)

POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC TO THE EXTENT  
REQUIRED BY LAW.

FORM 990, PART VII, SECTION B

HIGHEST COMPENSATED INDEPENDENT CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
GRANT THORNTON LLP 2010 CORPORATE RIDGE, SUITE 400 MCLEAN, VA 22102	CONSULTANT	\$112,327
GREGORY MOCK 414 BOSTON AVE. TAKOMA PARK, MD 20912	CONSULTANT	\$111,000

ATTACHMENT 3FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

BELGIUM

CHINA

HONG KONG

UNITED KINGDOM

**SCHEDULER R**  
**(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization  
**WORLD RESOURCES INSTITUTE**

Employer identification number  
**52-1257057**

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

(a) Name, address, and EIN 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
<p><b>Part II Identification of Related Tax-Exempt Organizations</b> (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)</p>					
<p>Name, address, and EIN of related organization</p> <p><b>WORLD RESOURCES INSTITUTE FUND</b> 52-1464425 <b>10 G STREET, NE</b> WASHINGTON, DC 20002</p>	SUPPORT	DC	501 (C) (3)	11	N/A

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

Schedule R (Form 990) 2009

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

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

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

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
  - a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
  - b Gift, grant, or capital contribution to other organization(s)
  - c Gift, grant, or capital contribution from other organization(s)
  - d Loans or loan guarantees to or for other organization(s)
  - e Loans or loan guarantees by other organization(s)

- f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- l Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- o Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	
			1g	1r
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**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) Are all partners 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

