

# Return of Organization Exempt From Income Tax

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

**2010**

**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.

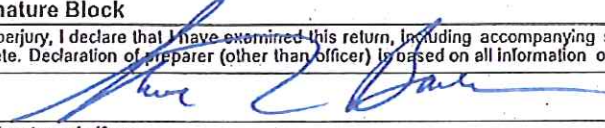
<b>A</b> For the 2010 calendar year, or tax year beginning <b>10/01, 2010</b> , and ending <b>09/30, 20 11</b>																									
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization <b>WORLD RESOURCES INSTITUTE</b></td> <td><b>D</b> Employer identification number <b>52-1257057</b></td> </tr> <tr> <td colspan="2">Doing Business As</td> <td><b>E</b> Telephone number <b>(202) 729-7600</b></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td><b>G</b> Gross receipts \$ <b>50,627,595.</b></td> </tr> <tr> <td><b>10 G STREET, NE</b></td> <td></td> <td><b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td>City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20002</b></td> <td><b>F</b> Name and address of principal officer: <b>MANISH BAPNA</b> <b>10 G STREET, NE WASHINGTON, DC 20002</b></td> <td><b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td><b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td colspan="2"><b>H(c)</b> Group exemption number ▶</td> </tr> <tr> <td colspan="2"><b>J</b> Website: ▶ <b>WWW.WRI.ORG</b></td> <td><b>L</b> Year of formation: <b>1982</b> <b>M</b> State of legal domicile: <b>DE</b></td> </tr> <tr> <td><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td colspan="2"></td> </tr> </table>	<b>C</b> Name of organization <b>WORLD RESOURCES INSTITUTE</b>		<b>D</b> Employer identification number <b>52-1257057</b>	Doing Business As		<b>E</b> Telephone number <b>(202) 729-7600</b>	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>50,627,595.</b>	<b>10 G STREET, NE</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20002</b>	<b>F</b> Name and address of principal officer: <b>MANISH BAPNA</b> <b>10 G STREET, NE WASHINGTON, DC 20002</b>	<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>H(c)</b> Group exemption number ▶		<b>J</b> Website: ▶ <b>WWW.WRI.ORG</b>		<b>L</b> Year of formation: <b>1982</b> <b>M</b> State of legal domicile: <b>DE</b>	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
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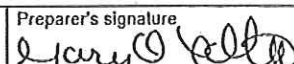
**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>WRI BUILDS GLOBAL SOLUTIONS TO URGENT ENVIRONMENT AND DEVELOPMENT CHALLENGES. WE WORK WITH GOVERNMENTS, COMPANIES, AND CIVIL SOCIETY TO PUT OUR EVIDENCE-BASED RESEARCH AND IDEAS INTO ACTION.</b>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>34.</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>33.</b>
	<b>5</b>	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>329.</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0.</b>
	<b>7a</b>	Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> <b>38,823,653.</b>	<b>Current Year</b> <b>47,451,943.</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>0.</b>	<b>0.</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>1,479,871.</b>	<b>2,600,022.</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>-431,892.</b>	<b>27,211.</b>
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>39,871,632.</b>	<b>50,079,176.</b>
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>8,094,598.</b>	<b>7,510,034.</b>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>18,382,341.</b>	<b>20,623,957.</b>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>	<b>0.</b>
	<b>16b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>1,993,642.</b>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>10,668,143.</b>	<b>12,399,021.</b>
	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>37,145,082.</b>	<b>40,533,012.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>2,726,550.</b>	<b>9,546,164.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>57,805,357.</b>	<b>End of Year</b> <b>65,224,571.</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<b>4,370,307.</b>	<b>5,322,724.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>53,435,050.</b>	<b>59,901,847.</b>

**Part II Signature Block**

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

<b>Sign Here</b>		<b>3/8/12</b>
	Signature of officer	Date
	<b>Steve L Barker CFO</b>	
	Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>Mary Torretta</b>	Preparer's signature 	Date <b>3/8/12</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00847851</b>
	Firm's name ▶ <b>GRANT THORNTON LLP</b>	Firm's EIN ▶ <b>36-6055558</b>		Phone no. <b>703-847-7500</b>	
	Firm's address ▶ <b>2010 CORPORATE RIDGE, SUITE 400 MCLEAN, VA 22102</b>				

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

For Paperwork Reduction Act Notice, see the separate instructions.

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box  X
  - If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file)** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

### Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print  File by the due date for filing your return. See instructions.	Name of exempt organization WORLD RESOURCES INSTITUTE	Employer identification number 52-1257057
	Number, street, and room or suite no. If a P.O. box, see instructions. 10 G STREET, NE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20002	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ▶ ARTHUR K. DROE

Telephone No. ▶ 202 729-7679

FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year 20 \_\_\_\_ or

▶  tax year beginning 10/01, 20 10, and ending 09/30, 20 11.

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**Part III** Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

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 \$ 8,559,836. including grants of \$ 3,348,241. ) (Revenue \$ )  
SEE SCHEDULE O

4b (Code: ) (Expenses \$ 8,476,092. including grants of \$ 2,198,757. ) (Revenue \$ )  
SEE SCHEDULE O

4c (Code: ) (Expenses \$ 7,824,743. including grants of \$ 304,008. ) (Revenue \$ )  
SEE SCHEDULE O

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ 9,970,502. including grants of \$ 1,659,028. ) (Revenue \$ )

4e Total program service expenses ▶ 34,831,173.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20b detailing various organizational requirements and their completion status.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 21 through 38 regarding grants, compensation, bond issues, and organizational structure.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V. [ ]

Table with columns for question number, question text, sub-column (1a-14b), Yes, and No. Contains questions 1a through 14b regarding Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business gross income, foreign country (Belgium), prohibited tax shelter transactions, annual gross receipts, deductible contributions, and charitable trusts.

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Does the organization have members or stockholders... 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body... 7b Are any decisions of the governing body subject to approval... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 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.

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? 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? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11b 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 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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 NONE
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**

Check if Schedule O contains a response to any question in this Part VII.

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(1) JONATHAN LASH PRESIDENT	37.50	X		X			376,153.	0	31,465.	
(2) JAMES A. HARMON CHAIRMAN	1.00	X		X			0.	0	0.	
(3) HARRIET BABBITT VICE CHAIR	1.00	X		X			0.	0	0.	
(4) WILLIAM D. RUCKELSHAUS DIRECTOR	1.00	X					0.	0	0.	
(5) DR. ALICE F. EMERSON DIRECTOR	1.00	X					0.	0	0.	
(6) ROBERTO ARTAVIA DIRECTOR	1.00	X					0.	0	0.	
(7) FRANCES G. BEINECKE DIRECTOR	1.00	X					0.	0	0.	
(8) AFSANEH BESCHLOSS DIRECTOR	1.00	X					0.	0	0.	
(9) FERNANDO HENRIQUE CARDOSO DIRECTOR	1.00	X					0.	0	0.	
(10) ROBIN CHASE DIRECTOR	1.00	X					0.	0	0.	
(11) CHEN JINING DIRECTOR	1.00	X					0.	0	0.	
(12) TIFFANY CLAY DIRECTOR	1.00	X					0.	0	0.	
(13) LESLIE DACH DIRECTOR	1.00	X					0.	0	0.	
(14) DANIEL L. DOCTOROFF DIRECTOR	1.00	X					0.	0	0.	
(15) JAMSHYD N. GODREJ DIRECTOR	1.00	X					0.	0	0.	
(16) 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 (describe hours for related organizations in Schedule O)	(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			
(17) KATHLEEN MCGINTY DIRECTOR	1.00	X					0.	0.	0.	
(18) PRESTON R. MILLER, JR. DIRECTOR	1.00	X					0.	0.	0.	
(19) DOUGLAS R. OBERHELMAN DIRECTOR	1.00	X					0.	0.	0.	
(20) JAIME LERNER DIRECTOR	1.00	X					0.	0.	0.	
(21) GORAN PERSSON DIRECTOR	1.00	X					0.	0.	0.	
(22) MICHAEL POLSKY DIRECTOR	1.00	X					0.	0.	0.	
(23) THEODORE ROOSEVELT IV DIRECTOR	1.00	X					0.	0.	0.	
(24) STEPHEN M. ROSS DIRECTOR	1.00	X					0.	0.	0.	
(25) ALISON SANDER DIRECTOR	1.00	X					0.	0.	0.	
(26) JAMES GUSTAVE SPETH DIRECTOR	1.00	X					0.	0.	0.	
(27) LEE M. THOMAS DIRECTOR	1.00	X					0.	0.	0.	
(28) TODD S. THOMSON DIRECTOR	1.00	X					0.	0.	0.	
<b>1b Sub-total</b>							376,153.	0.	31,465.	
<b>c Total from continuation sheets to Part VII, Section A</b>							2,577,924.	0	277,147.	
<b>d Total (add lines 1b and 1c)</b>							2,954,077.	0	308,612.	

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 **▶ 35**

	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 or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

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 **▶ 6**

**Part VIII** Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	1a Federated campaigns . . . . .	1a			
	b Membership dues . . . . .	1b			
	c Fundraising events . . . . .	1c			
	d Related organizations . . . . .	1d			
	e Government grants (contributions) . . . . .	1e	4,361,831.		
	f All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f	43,090,112.		
	g Noncash contributions included in lines 1a-1f: \$ . . . . .				
	<b>h Total. Add lines 1a-1f . . . . .</b>		<b>47,451,943.</b>		
<b>Program Service Revenue</b>	2a _____	Business Code			
	b _____				
	c _____				
	d _____				
	e _____				
	f All other program service revenue . . . . .				
	<b>g Total. Add lines 2a-2f . . . . .</b>		<b>0.</b>		
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts) . . . . .		422,812.		422,812.
	4 Income from investment of tax-exempt bond proceeds . . . . .		0.		
	5 Royalties . . . . .		4,025.		4,025.
	6a Gross Rents . . . . .	(i) Real (ii) Personal			
	b Less: rental expenses . . . . .				
	c Rental income or (loss) . . . . .				
	<b>d Net rental income or (loss) . . . . .</b>		<b>0.</b>		
	7a Gross amount from sales of assets other than inventory . . . . .	(i) Securities (ii) Other			
	b Less: cost or other basis and sales expenses . . . . .				
	c Gain or (loss) . . . . .				
	<b>d Net gain or (loss) . . . . .</b>		<b>2,177,210.</b>		<b>2,177,210.</b>
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	a			
	b Less: direct expenses . . . . .	b			
	<b>c Net income or (loss) from fundraising events . . . . .</b>		<b>0.</b>		
	9a Gross income from gaming activities. See Part IV, line 19 . . . . .	a			
b Less: direct expenses . . . . .	b				
<b>c Net income or (loss) from gaming activities . . . . .</b>		<b>0.</b>			
10a Gross sales of inventory, less returns and allowances . . . . .	a				
b Less: cost of goods sold . . . . .	b				
<b>c Net income or (loss) from sales of inventory . . . . .</b>		<b>0.</b>			
<b>Miscellaneous Revenue</b>		<b>Business Code</b>			
11a <u>MISC. REVENUE</u> . . . . .	900099	23,186.		23,186.	
b _____					
c _____					
d All other revenue . . . . .					
<b>e Total. Add lines 11a-11d . . . . .</b>		<b>23,186.</b>			
<b>12 Total revenue. See instructions . . . . .</b>		<b>50,079,176.</b>			<b>2,627,233.</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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . . . .	942,468.	942,468.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	6,567,566.	6,567,566.		
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	2,847,253.	1,425,541.	1,076,987.	344,725.
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 . . . . .	14,057,216.	12,418,399.	787,112.	851,705.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	972,496.	793,756.	113,035.	65,705.
9 Other employee benefits . . . . .	1,682,950.	1,337,851.	195,175.	149,924.
10 Payroll taxes . . . . .	1,064,042.	871,889.	121,502.	70,651.
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	0.			
f Investment management fees . . . . .	110,502.		110,502.	
g Other . . . . .	0.			
12 Advertising and promotion . . . . .	0.			
13 Office expenses . . . . .	0.			
14 Information technology . . . . .	0.			
15 Royalties . . . . .	0.			
16 Occupancy . . . . .	2,622,314.	2,442,296.		180,018.
17 Travel . . . . .	1,969,202.	1,735,676.	149,771.	83,755.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings . . . . .	483,944.	432,472.	36,982.	14,490.
20 Interest . . . . .	0.			
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . . . .	538,317.	501,362.		36,955.
23 Insurance . . . . .	0.			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a RESEARCH EXPENSES	2,845,750.	2,827,717.	11,683.	6,350.
b OTHER DIRECT COST	1,391,310.	246,701.	1,092,903.	51,706.
c PUBLICATION EXPENSES	1,061,847.	1,012,280.	12,509.	37,058.
d EQUIPMENT RENTAL AND MAINT	678,711.	632,119.		46,592.
e TELEPHONE AND CABLES	235,377.	219,219.		16,158.
f All other expenses	461,747.	423,861.	36.	37,850.
25 Total functional expenses. Add lines 1 through 24f	40,533,012.	34,831,173.	3,708,197.	1,993,642.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). 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	2,568,829.	2	3,094,317.	
	3	Pledges and grants receivable, net	16,342,077.	3	25,149,178.	
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	406,152.	9	608,433.	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	5,359,923.		
	b	Less: accumulated depreciation	10b	3,904,137.		
			1,167,495.	10c	1,455,786.	
	11	Investments - publicly traded securities	13,199,145.	11	13,468,311.	
	12	Investments - other securities. See Part IV, line 11	23,918,870.	12	21,446,046.	
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
15	Other assets. See Part IV, line 11	200,289.	15	0.		
16	<b>Total assets. Add lines 1 through 15 (must equal line 34)</b>	57,805,357.	16	65,224,571.		
Liabilities	17	Accounts payable and accrued expenses	3,282,046.	17	3,837,935.	
	18	Grants payable		18		
	19	Deferred revenue	825,983.	19	306,424.	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	20,280.	21	18,677.	
	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	241,998.	25	1,159,688.	
	26	<b>Total liabilities. Add lines 17 through 25</b>	4,370,307.	26	5,322,724.	
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	3,136,404.	27	3,464,252.	
	28	Temporarily restricted net assets	24,960,880.	28	31,099,829.	
	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>	53,435,050.	33	59,901,847.	
	34	<b>Total liabilities and net assets/fund balances</b>	57,805,357.	34	65,224,571.	

**Part XI** Reconciliation of Net Assets   
 Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	50,079,176.
2	Total expenses (must equal Part IX, column (A), line 25)	2	40,533,012.
3	Revenue less expenses. Subtract line 2 from line 1	3	9,546,164.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	53,435,050.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,079,367.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	59,901,847.

**Part XII** Financial Statements and Reporting   
 Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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 separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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	

Public Charity Status and Public Support

2010

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 <b>WORLD RESOURCES INSTITUTE</b>	Employer identification number <b>52-1257057</b>
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**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?  
 (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? 

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

 (ii) A family member of a person described in (i) above?  
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- 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	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	23,674,691.	21,994,209.	30,206,391.	38,875,853.	47,451,943.	162,203,087.
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 . . . . .	23,674,691.	21,994,209.	30,206,391.	38,875,853.	47,451,943.	162,203,087.
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). . . . .						32,724,816.
6 Public support. Subtract line 5 from line 4.						129,478,271.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4 . . . . .	23,674,691.	21,994,209.	30,206,391.	38,875,853.	47,451,943.	162,203,087.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	414,737.	748,305.	129,037.	364,585.	426,837.	2,083,501.
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.) . . . . .	8,968.	32,018.	8,800.	-66,971.	23,186.	6,001.
11 Total support. Add lines 7 through 10 . . . . .						164,292,589.
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	35,751.
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 2010 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	78.81 %
15 Public support percentage from 2009 Schedule A, Part II, line 14 . . . . .	15	80.67 %
16a 33 1/3 % support test - 2010. 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 - 2009. 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 - 2010. 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 - 2009. 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

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

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests - 2010. 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 - 2009. 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 explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

## SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
OTHER REVENUE	8,968.	32,018.	8,800.	-66,971.	23,186.	6,001.
TOTALS	<u>8,968</u>	<u>32,018</u>	<u>8,800</u>	<u>-66,971</u>	<u>23,186</u>	<u>6,001</u>

# Schedule of Contributors

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

# 2010

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)(3) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

### General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$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 1/3 % 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):

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization is described below.

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

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) or Form 990-EZ, Part V, line 35a (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 on behalf of or in opposition to candidates for public office 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 filing organization made payments. 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-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part III-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)	55,849.	
c	Total lobbying expenditures (add lines 1a and 1b)	55,849.	
d	Other exempt purpose expenditures	34,831,173.	
e	Total exempt purpose expenditures (add lines 1c and 1d)	34,887,022.	
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	
If the amount on line 1e, column (a) or (b) is:		The lobbying nontaxable amount is:	
Not over \$500,000		20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000		\$1,000,000.	
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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total	
2 a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c	Total lobbying expenditures	104,000.	221,754.	228,728.	55,849.	610,331.
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

Part III-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... a Volunteers? b Paid staff or management... c Media advertisements? d Mailings to members... e Publications... f Grants to other organizations... g Direct contact with legislators... h Rallies, demonstrations... i Other activities... j Total... 2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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 2 columns: Question, 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). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)

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 1i. Also, complete this part for any additional information.

Series of horizontal dashed lines for providing supplemental information.

**Part IV** Supplemental Information (continued)

Supplemental Financial Statements

2010

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WORLD RESOURCES INSTITUTE

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 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year, and two questions about donor advisement.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, number of easements, and monitoring details. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and amounts for revenues and assets.

**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 XI V 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 XI V.

**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	31,225,909.	30,039,015.	32,563,020.		
b Contributions					
c Net investment earnings, gains, and losses	-589,847.	2,566,301.	-654,685.		
d Grants or scholarships					
e Other expenditures for facilities and programs	2,213,309.	1,379,407.	1,869,320.		
f Administrative expenses					
g End of year balance	28,422,753.	31,225,909.	30,039,015.		

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

- a Board designated or quasi-endowment  9.2400 %
- b Permanent endowment  89.1500 %
- c Term endowment  1.6100 %

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 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		1,188,944.	928,419	260,525.
d Equipment		3,070,581.	2,021,386	1,049,195.
e Other		1,100,397.	954,331	146,066.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,455,786.



**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
(1) Financial derivatives . . . . .	21,446,046.	
(2) Closely-held equity interests . . . . .		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	21,446,046.	

**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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (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
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (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
(1) Federal income taxes	
(2) DEFERRED RENT	181,538.
(3) OBLIGATION UNDER CAPITAL LEASE	978,150.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,159,688.

2. FIN 48 (ASC 740) 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 (ASC 740).

**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	50,079,176.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	40,533,012.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	9,546,164.
4	Net unrealized gains (losses) on investments	4	-3,079,367.
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	-3,079,367.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	6,466,797.

**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	46,889,307.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-3,079,367.
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	-3,079,367.
3	Subtract line 2e from line 1	3	49,968,674.
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	110,502.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	110,502.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	50,079,176.

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

1	Total expenses and losses per audited financial statements	1	40,422,510.
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	40,422,510.
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	110,502.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	110,502.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	40,533,012.

**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

THE INSTITUTE HAS ADOPTED GUIDANCE ISSUED BY THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) WHICH CREATES A SINGLE MODEL TO ADDRESS UNCERTAINTY IN TAX POSITIONS AND CLARIFIES ACCOUNTING FOR INCOME TAXES BY PRESCRIBING THE MINIMUM RECOGNITION THRESHOLD A TAX POSITION IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN ITS CONSOLIDATED FINANCIAL STATEMENTS.

UNDER THE REQUIREMENTS OF THIS GUIDANCE, ORGANIZATIONS COULD NOW BE REQUIRED TO RECORD AN OBLIGATION AS THE RESULT OF TAX POSITIONS THEY HAVE HISTORICALLY TAKEN ON VARIOUS TAX EXPOSURE ITEMS. PRIOR TO THIS PRONOUNCEMENT, 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.

**Part XIV** Supplemental Information (continued)

SCHEDULE D, PART IV, LINE 2

THE INSTITUTE HELD \$18,677 OF PASS-THROUGH FUNDING FOR ANOTHER ORGANIZATION. THE FUNDS WERE FOR A CELINE COUSTEAU EVENT (THE OCEAN INSPIRATION EVENT).

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

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

▶ Attach to Form 990. ▶ See separate instructions.

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 V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	REV RAP DEG - ECOSYS	5,895.
(2) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	SUPPORT ENVIRONMENTALL	3,944.
(3) EAST ASIA AND THE PACIFIC			GRANTMAKING	EXPAND ECONOMIC OPPORT	125,000.
(4) EAST ASIA AND THE PACIFIC			GRANTMAKING	PROTECT CLIMATE	
(5) EAST ASIA AND THE PACIFIC			GRANTMAKING	REV RAP DEG - ECOSYS	169,423.
(6) EAST ASIA AND THE PACIFIC			GRANTMAKING	SUPPORT ENVIRONMENT	277,086.
(7) EUROPE			GRANTMAKING	PROTECT CLIMATE	22,851.
(8) EUROPE			GRANTMAKING	REV RAP DEG - ECOSYS	174,781.
(9) EUROPE			GRANTMAKING	SUPPORT ENVIRONMENT	24,600.
(10) NORTH AMERICA			GRANTMAKING	EXPAND ECONOMIC OPPORT	58,500.
(11) NORTH AMERICA			GRANTMAKING	PROMOTE ENVIRONMENT	1,593,208.
(12) NORTH AMERICA			GRANTMAKING	SUPPORT ENVIRONMENT	2,600.
(13) SOUTH AMERICA			GRANTMAKING	EXPAND ECONOMIC OPPORT	95,000.
(14) SOUTH AMERICA			GRANTMAKING	PROMOTE ENVIRONMENT	1,687,034.
(15) SOUTH AMERICA			GRANTMAKING	REV RAP DEG - ECOSYS	5,000.
(16) SOUTH AMERICA			GRANTMAKING	SUPPORT ENVIRONMENT	424,091.
(17) SOUTH ASIA			GRANTMAKING	EXPAND ECONOMIC OPPORT	138,066.
3a Sub-total					4,990,236.
b Total from continuation sheets to Part I					1,577,330.
c Totals (add lines 3a and 3b)					6,567,566.

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

Schedule F (Form 990) 2010

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

Employer identification number

WORLD RESOURCES INSTITUTE

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 V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) SOUTH ASIA			GRANTMAKING	PROTECT CLIMATE	50,000.
(2) SOUTH ASIA			GRANTMAKING	SUPPORT ENVIRONMENT	68,760.
(3) SUB-SAHARAN AFRICA			GRANTMAKING	PROTECT CLIMATE	48,000.
(4) SUB-SAHARAN AFRICA			GRANTMAKING	REV RAP DEG - ECOSYS	1,108,341.
(5) SUB-SAHARAN AFRICA			GRANTMAKING	SUPPORT ENVIRONMENT	290,429.
(6) RUSSIA/INDEPENDENT STATES			GRANTMAKING	SUPPORT ENVIRONMENT	10,000.
(7) SUB-SAHARAN AFRICA			GRANTMAKING	PROGRAM DEVELOPMENT	1,800.
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total, . . . . .					
b Total from continuation sheets to Part I, . . . . .					
c Totals (add lines 3a and 3b)					

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

Schedule F (Form 990) 2010

**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  Part II can be duplicated if additional space is needed.

(1)	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

**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.  
Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2010



**Part IV** Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
  
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* . . . . .  Yes  No
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . .  Yes  No
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . . . . .  Yes  No
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* . . . . .  Yes  No
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* . . . . .  Yes  No

**Part V** Supplemental Information

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

## 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.

**SCHEDULE I**  
**(Form 990)**

**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  
**2010**  
**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 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. Part II can be duplicated if additional space is needed. ▶

(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
(1) CONSENSUS BUILDING INSTITUTE 131 MT AUBURN STREET CAMBRIDGE, MA 02138	04-3186073	501(C)(3)	65,569.				PROGRAM DEVELOPMENT
(2) ENVIRONMENTAL INVESTIGATION AGENCY PO BOX 53343 WASHINGTON, DC 20009	52-1654284	501(C)(3)	590,470.				REV RAP DEG - ECOSYS
(3) LANDSEA RURAL DEVELOPMENT INSTITUTE 1424 FOURTH AVENUE STE 300 RAINEPORT, ALABAMA	91-1158970	501(C)(3)	65,583.				SUPPORT ENV. & SOC.
(4) SOUTH AFRICA DEVELOPMENT FUND 665 BROADWAY, 5TH FLR NEW YORK, NY 10012	13-3377892	501(C)(3)	17,000.				REV RAP DEG - ECOSYS
(5) SOUTH AFRICA DEVELOPMENT FUND 555 ARMORY STREET BOSTON, MA 02130	22-2674813	501(C)(3)	8,000.				SUPPORT ENV. & SOC.
(6) SOUTH DAKOTA STATE UNIVERSITY OFFICE OF RESEARCH AND SPONSORED PROGRAM AD 46-0273801			41,882.				REV RAP DEG - ECOSYS
(7) TEXAS INSTITUTE FOR APPLIED ENVIRONMENTAL PO BOX 1410, FARMINGTON STATE UNIVERSITY 75-6001870		501(C)(3)	24,590.				REV RAP DEG - ECOSYS
(8) UNIVERSITY OF CALIFORNIA-BERKELEY REGENTS OF UNIVERSITY OF CALIFORNIA, SPONSO 94-6002123			68,000.				PROMOTE ENV. SUST.
(9) WINROCK INTERNATIONAL 2121 CRYSTAL DRIVE ARLINGTON, VA 22202	71-0603560	501(C)(3)	56,501.				REV RAP DEG - ECOSYS
(10) _____							
(11) _____							
(12) _____							

2 Enter total number of section 501(c)(3) and government organizations 9

3 Enter total number of other organizations ▶

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

**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. Part III can be duplicated 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
1						
2						
3						
4						
5						
6						
7						

**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 TAX EXEMPT PURPOSE AND MISSION. ALL OF THESE  
 ORGANIZATIONS WERE WORKING ON ISSUES WHICH FURTHER WRI'S MISSION.

**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

**2010**

**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 are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**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 from the organization or a related organization? . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . .
- 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? . . .
- b** Any related organization? . . .
- 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? . . .
- b** Any related organization? . . .
- 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 . . .

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . .

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . .

	Yes	No
1a		
1b		
2		
3		
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2010

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

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

Note. The sum of columns (B)(i)-(iii) 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				
1 JONATHAN LASH	(i) 366,153. (ii) 0. (iii) 0.	10,000.	0.	18,854.	12,611.	407,618.	0.
2 MANISH BAPNA	(i) 205,500. (ii) 0. (iii) 0.	10,000.	0.	13,285.	7,162.	235,947.	0.
3 STEVE BARKER	(i) 202,085. (ii) 0. (iii) 0.	10,000.	0.	15,366.	10,315.	237,766.	0.
4 ROBERT MURPHY	(i) 186,475. (ii) 0. (iii) 0.	0.	0.	14,917.	12,896.	214,288.	0.
5 JANET RANGANATHAN	(i) 182,499. (ii) 0. (iii) 0.	7,500.	0.	13,999.	0.	203,998.	0.
6 ELIZABETH COOK	(i) 182,225. (ii) 0. (iii) 0.	5,000.	0.	14,178.	6,844.	208,247.	0.
7 ANN KETE	(i) 200,961. (ii) 0. (iii) 0.	9,737.	33,763.	8,077.	1,053.	253,591.	0.
8 JENNIFER MORGAN	(i) 164,240. (ii) 0. (iii) 0.	5,216.	0.	7,860.	9,841.	187,157.	0.
9 DANIEL TUNSTALL	(i) 162,500. (ii) 0. (iii) 0.	5,000.	0.	11,640.	2,082.	181,222.	0.
10 JACOB WERKSMAN	(i) 157,338. (ii) 0. (iii) 0.	2,000.	0.	12,427.	6,566.	178,331.	0.
11 PETER G VEIT	(i) 137,202. (ii) 0. (iii) 0.	0.	0.	10,976.	12,162.	160,340.	0.
12 PIERRE METHOT	(i) 137,451. (ii) 0. (iii) 0.	2,108.	0.	10,827.	12,162.	162,548.	0.
13 CRAIG HANSON	(i) 146,350. (ii) 0. (iii) 0.	0.	0.	11,708.	12,402.	170,460.	0.
14 KRISTY JENKINSON	(i) 154,372. (ii) 0. (iii) 0.	1,500.	0.	7,643.	4,958.	168,473.	0.
15 CLAYTON LANE	(i) 141,152. (ii) 0. (iii) 0.	5,000.	0.	7,643.	9,475.	163,270.	0.
16	(i) 0. (ii) 0. (iii) 0.	0.	0.	0.	0.	0.	0.

**Part III** Supplemental Information

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

SCHEDULE J, PART I, LINE 4A

SEVERANCE PAYMENT: ANN KETE (\$33,763)

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

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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

EVERY PROJECT UNDERTAKEN BY WRI CONTRIBUTES TO ONE OR MORE OF THE  
FOLLOWING GOALS:

PEOPLE AND ECOSYSTEMS: REVERSE RAPID DEGRADATION OF ECOSYSTEMS AND  
ASSURE THEIR CAPACITY TO PROVIDE HUMANS WITH NEEDED GOODS AND SERVICES.

MARKET AND ENTERPRISE: HARNESS MARKETS AND ENTERPRISE TO EXPAND ECONOMIC  
OPPORTUNITY AND PROTECT THE ENVIRONMENT.

CLIMATE PROTECTION: PROTECT THE GLOBAL CLIMATE SYSTEM FROM FURTHER HARM  
DUE TO EMISSIONS OF GREENHOUSE GASES AND HELP HUMANITY AND THE NATURAL  
WORLD ADAPT TO UNAVOIDABLE CLIMATE CHANGE.

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

WITH A STAFF OF OVER 200 SCIENTISTS, ECONOMISTS, POLICY EXPERTS, BUSINESS  
ANALYSTS, STATISTICIANS, LAWYERS, AND MAPMAKERS, AND NEARLY 400 PARTNER  
ORGANIZATIONS AROUND THE WORLD, WRI ADMINISTERS ITS ACTIVITIES THROUGH



Name of the organization

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THE SEVEN PROGRAMS DESCRIBED BELOW.

EMBARQ PROGRAM:

EMBARQ CATALYZES AND HELPS IMPLEMENT SOCIALLY, FINANCIALLY, AND ENVIRONMENTALLY SUSTAINABLE TRANSPORT SOLUTIONS TO IMPROVE QUALITY OF LIFE IN CITIES. WORKING THROUGH PUBLIC-PRIVATE 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, BRAZIL, AND THE ANDEAN REGION, WHICH MANAGE ITS DAY TO DAY INTERACTIONS WITH LEADERSHIP OF CITIES IN THOSE REGIONS, AND HAS SIGNIFICANT PROJECT ACTIVITIES IN INDIA 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 NON-MOTORIZED TRANSPORT.

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 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

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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

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 4D

OTHER PROGRAM SERVICES

INSTITUTIONS AND GOVERNANCE PROGRAM:

BY PARTNERING WITH GOVERNMENTAL AND NON-GOVERNMENTAL ORGANIZATIONS IN MORE THAN 50 COUNTRIES, IGP PROMOTES GREATER TRANSPARENCY, INCLUSIVENESS, AND ACCOUNTABILITY IN DECISIONS REGARDING NATURAL RESOURCES AND THE

Name of the organization

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ENVIRONMENT. IGP'S CURRENT PROJECTS PROMOTE SYSTEMIC IMPROVEMENTS IN ACCESS TO INFORMATION, PUBLIC PARTICIPATION AND ACCESS TO JUSTICE; IMPROVE GOVERNANCE IN THE ELECTRICITY SECTOR AND IN FOREST MANAGEMENT IN THE CONTEXT OF LOW CARBON DEVELOPMENT; STRENGTHEN THE ENVIRONMENTAL AND SOCIAL STANDARDS AND SAFEGUARDS OF INTERNATIONAL FINANCIAL INSTITUTIONS, INCLUDING THOSE BASED IN EMERGING ECONOMIES; AND PROMOTE THE SOUND MANAGEMENT AND EQUITABLE DISTRIBUTION OF BENEFITS DERIVED FROM NATURAL RESOURCES, PARTICULARLY IN AFRICA.

MARKET & ENTERPRISE PROGRAM:

WRI'S MARKETS AND ENTERPRISE GROUP PRODUCES ECONOMICALLY SOUND POLICIES, BOLD VISION, AND PRACTICAL 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:

BUILD MARKET DEMAND: EXPAND THE MARKET FOR GOODS AND SERVICES THAT PROTECT THE CLIMATE AND ECOSYSTEMS -- SUCH AS GREEN POWER, CERTIFIED FOREST PRODUCTS, AND RESPONSIBLY MINED METALS -- BY ENABLING THE ENVIRONMENT FOR THESE PRODUCTS TO GROW AND BY DEVELOPING COST-COMPETITIVE PROCUREMENT STRATEGIES.

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.

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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, COUNTRIES OR OBJECTIVES, AND ON NEW TOOLS AND CAPACITIES IN AREAS SUCH AS MODELING AND COMMUNICATIONS.

EXTERNAL RELATIONS PROGRAM:

MANAGES WRI'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 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.

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FORM 990, PART VI, LINE 11A

FORM 990 REVIEW

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

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

EMPLOYEES/OFFICERS: EVERY STAFF MEMBER SIGNS OFF ON A CONFLICT OF INTEREST FORM. OFFICERS AND MANAGEMENT TEAM ARE SUPPOSED TO RE-SIGN CONFLICT OF INTEREST FORMS EACH CALENDAR YEAR. STAFF MEMBERS ARE DIRECTED TO RAISE QUESTIONS TO THEIR IMMEDIATE SUPERVISORS OR PROGRAM DIRECTORS/VPS IF THEY HAVE A QUESTION ON AN ACTIVITY WHICH THEY THINK MIGHT POSE A CONFLICT OF INTEREST. HUMAN RESOURCES STAFF IS AVAILABLE TO ASSIST WITH QUESTIONS.

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

FORM 990, PART VI, LINE 15B

COMPENSATION DETERMINATION

THE ORGANIZATION BRINGS IN INDEPENDENT CONSULTANTS PERIODICALLY TO DO A COMPARATIVE REVIEW OF ITS SALARY STRUCTURE AND ALSO REVIEWS SALARY SURVEYS. THE MANAGING DIRECTOR SETS PAY INCREASES FOR ALL DEPARTMENT HEADS; THE PRESIDENT DOES THE SAME FOR THE MANAGING DIRECTOR, CFO, AND ALL VP'S; THE BOARD OF DIRECTORS DOES THE SAME FOR THE PRESIDENT. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES THE PRESIDENT'S ANNUAL SALARY INCREASES AND BONUSES AS APPROPRIATE. THE HUMAN RESOURCES DIRECTOR MAKES A RECOMMENDATION ON THE PERCENTAGE INCREASE AND BONUS AMOUNT, AND PARTICIPATES IN THE EXECUTIVE COMMITTEE OF THE BOARD MEETING WHICH EVALUATES THE PRESIDENT'S PERFORMANCE. THE HUMAN RESOURCES DIRECTOR TAKES NOTES /MINUTES OF THIS PORTION OF THE MEETING AND THESE MINUTES TO DOCUMENT THE DECISION MADE REGARDING THE PRESIDENT'S ANNUAL SALARY.

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.

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FORM 990, PART VI, LINE 19

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

FORM 990, PART XI, LINE 5

OTHER CHANGES IN NET ASSETS

UNREALIZED LOSSES - \$3,079,367

ATTACHMENT 1

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES,  
KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

(A) NAME AND TITLE	(B) HOURS	(C) POSITION						COMPENSATION FROM		
		(1)	(2)	(3)	(4)	(5)	(6)	(D) ORG.	(E) REL. ORG.	(F) OTHER
29 SUSAN TIERNEY DIRECTOR	1.00	X						0.	0.	0.
30 DIANA H. WALL DIRECTOR	1.00	X						0.	0.	0.
31 DANIEL WEISS DIRECTOR	1.00	X						0.	0.	0.
32 DANIEL CRUISE DIRECTOR	1.00	X						0.	0.	0.
33 WILLIAM B RICHARDSON DIRECTOR	1.00	X						0.	0.	0.
34 CLINTON A VINCE DIRECTOR	1.00	X						0.	0.	0.
35 MANISH BAPNA EXECUTIVE VP/MANAGING DIR	37.50		X				215,500.	0.		20,447.
36 STEVE BARKER CFO	37.50		X				212,085.	0.		25,681.
37 ROBERT MURPHY VP OF EXTERNAL RELATIONS	37.50		X				186,475.	0.		14,917.
38 JANET RANGANATHAN VP OF SCIENCE	37.50		X				189,999.	0.		13,999.
39 ELIZABETH COOK VP OF STRATEGY & DEVELOPMENT	37.50		X				187,225.	0.		21,022.
40 ANN KETE EMBARQ	37.50			X			244,461.	0.		9,130.
41 JENNIFER MORGAN CLIMATE, ENERGY & POLLUTION	37.50			X			169,456.	0.		17,701.
42 DANIEL TUNSTALL EMBARQ	37.50			X			167,500.	0.		13,722.
43 JACOB WERKSMAN INSTITUTIONS & GOVERNANCE	37.50				X		159,338.	0.		18,993.
44 ARTHUR DROE										

Name of the organization WORLD RESOURCES INSTITUTE	Employer identification number 52-1257057
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ATTACHMENT 1 (CONT'D)

CONTROLLER	37.50	X	120,750.	0.	21,579.
45 PETER G VEIT					
SENIOR ASSOCIATE III	37.50	X	137,202.	0.	23,138.
46 PIERRE METHOT					
SENIOR FELLOW	37.50	X	139,559.	0.	22,989.
47 CRAIG HANSON					
PEOPLE AND ECOSYSTEMS	37.50	X	146,350.	0.	24,110.
48 KRISTY JENKINSON					
MARKETS ENTERPRISE	37.50	X	155,872.	0.	12,601.
49 CLAYTON LANE					
EMBARQ	37.50	X	146,152.	0.	17,118.

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ICORE NETWORKS, INC 7900 WESTPARK DR, SUITE A-315 MCLEAN, VA 22102	TECHNOLOGY	187,910.
MINDSHIFT TECHNOLOGIES, INC P.O. BOX 200105 PITTSBURG, PA 15251-0105	TECHNOLOGY	178,208.
GRANT THORNTON LLP 2010 CORPORATE RIDGE, SUITE 400 MCLEAN, VA 22102	CONSULTANT	170,183.
ISAACSON MILLER, INC 263 SUMMER ST 7TH FLOOR BOSTON, MA 02210	CONSULTANT	139,323.
DEBORAH SELIGSOHN PARK APT C2102 CHAOYANG PK W RD BEIJING CHINA	CONSULTANT	106,264.
TOTAL COMPENSATION		<u>781,888.</u>



**Related Organizations and Unrelated Partnerships**

▶ 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.

Department of the Treasury  
Internal Revenue Service  
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
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	WORLD RESOURCES INSTITUTE FUND 10 G STREET, NE WASHINGTON, DC 20002 52-1464425	SUPPORT	DC	501(C)(3)	11	WRI	X	
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

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

Schedule R (Form 990) 2010

**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.)

(1) Name, address, and EIN of related organization	(2) Primary activity	(3) Legal domicile (state or foreign country)	(4) Direct controlling entity	(5) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(6) Share of total income	(7) Share of end-of-year assets	(8) Disproportionate allocations?		(9) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(10) General or managing partner?		(11) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

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

(1) Name, address, and EIN of related organization	(2) Primary activity	(3) Legal domicile (state or foreign country)	(4) Direct controlling entity	(5) Type of entity (C corp, S corp, or trust)	(6) Share of total income	(7) Share of end-of-year assets	(8) Percentage ownership
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

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

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

				Yes	No
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	1a		X	
b	Gift, grant, or capital contribution to other organization(s)	1b		X	
c	Gift, grant, or capital contribution from other organization(s)	1c		X	
d	Loans or loan guarantees to or for other organization(s)	1d		X	
e	Loans or loan guarantees by other organization(s)	1e		X	
f	Sale of assets to other organization(s)	1f		X	
g	Purchase of assets from other organization(s)	1g		X	
h	Exchange of assets	1h		X	
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X	
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X	
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		X	
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X	
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X	
n	Sharing of paid employees	1n		X	
o	Reimbursement paid to other organization for expenses	1o		X	
p	Reimbursement paid by other organization for expenses	1p		X	
q	Other transfer of cash or property to other organization(s)	1q		X	
r	Other transfer of cash or property from other organization(s)	1r		X	

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

(1)	(2)	(3)	(4)	(5)	(6)
Name of other organization					
		(b)	(c)	(d)	
		Transaction type (a-r)	Amount involved	Method of determining amount involved	
(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 section 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
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											
(15)											
(16)											

Schedule R (Form 990) 2010

**Part VII** Supplemental Information

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

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